

Aging and Disability Services Division

IDEA Part C

Medical Auto Eligible List for Nevada Early Intervention Services

What Families Need to Know

The medical conditions listed below are examples of what may make a child automatically eligible for early intervention (EI) services under Individuals with Disabilities Education Act (IDEA) Part C. A Nevada Early Intervention Services (NEIS) doctor reviews every referral to decide if a child qualifies. They look at the child's diagnosis, how the child is developing, and any medical records or other information. Some conditions are known to affect development. This is why children with these diagnoses may be able to start services right away.

Understanding the Types of Conditions That May Qualify

These broad categories help families understand the medical conditions that may make a child automatically eligible. This is not a complete list.

Conditions That Affect the Brain or Nervous System: These can change how a child moves, learns, communicates, or reacts to the world. Examples include differences in brain development, seizures, or injuries or infections that affect the brain.

Genetic or Chromosomal Conditions: These are conditions a child is born with that can affect growth, learning, or physical development. Examples include Down syndrome and other genetic syndromes.

Conditions Affecting the Face, Head, or Skull: These may affect feeding, breathing, hearing, or overall development. Examples include cleft palate and differences in how the skull forms.

Conditions That Affect Muscles, Strength, or Movement: These can make it harder for a child to sit, crawl, walk, or use their hands. Examples include cerebral palsy and muscle or nerve disorders.

Vision or Hearing Differences: Significant vision or hearing loss can affect how a child communicates, learns, and interacts with others. Examples include legal blindness and confirmed hearing loss.

Conditions Present at Birth or Shortly After: Some medical conditions that happen during pregnancy, birth, or the newborn period can affect development. Examples include some infections, prematurity, low birth weight, or needing feeding tubes or breathing support.

What Happens Next

A NEIS physician reviews your child's referral and medical information to determine whether they qualify automatically.

If your child is eligible, the team will work with you to create an Individualized Family Service Plan (IFSP) that outlines services and supports tailored to your child and family.

If more information is needed, the team will explain the next steps and answer any questions you may have. You can ask questions at any time; your team is here to support you.

Aging and Disability Services Division

IDEA Part C

Medical Auto Eligible List for Nevada Early Intervention Services

If Eligibility Changes

New information or updated records may show that a child no longer meets the criteria for EI services. The team will discuss any changes with you during an IFSP review. No child is exited from services without a full review and a conversation with you. The goal is always to make sure your child receives the right level of support at the right time.

Auto-Eligible Categories (not all inclusive)

Arthrogryposis/Major Limb Malformations

- Achondroplasia
- Amniotic Band Syndrome (with major limb malformation)
- Amputations
- Arthrogryposis
- Limb Malformations (e.g., club foot)

Central Nervous System Disorders/Diseases

- Agenesis of the Corpus Callosum
- Bacterial or Herpes Meningitis
- Encephalopathy
- Holoprosencephaly
- Hydrocephalus
- Infantile Spasms
- Intraventricular Hemorrhage (IVH) Grade III or IV
 - Grade II with atypical tone
- Kernicterus (Bilirubin Encephalopathy)
- Major brain malformations
- Perinatal Stroke (with abnormal neurologic examination)
- Periventricular Leukomalacia
- Seizure Disorder
- Sensory Feeding Issues
- Shaken Baby Syndrome
- Spina Bifida (all variants)
- Spinal Malformations
- Tethered cord
- Traumatic Brain Injury

Chromosomal Abnormalities

- Aneuploidy
- Angelman Syndrome
- CHARGE Syndrome/Association
- Cri-du-chat Syndrome
- Fragile X Syndrome
- Klinefelter Syndrome
- Prader-Willi Syndrome
- Single Gene Mutations associated with Rare Genetic Disorders

Aging and Disability Services Division

IDEA Part C

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- Syndromic Chromosomal Disorders
- Turner Syndrome
- Trisomies (e.g., Trisomy 21)
- Williams Syndrome
- 22q11.2 Deletion Syndrome

Craniofacial Malformations

- Cleft Palate (with or without cleft lip)
- Congenital Aural Atresia/Microtia
- Craniosynostosis
- Crouzon Syndrome
- Goldenhar Syndrome
- Pierre-Robin Sequence
- Treacher-Collins Syndrome

Neurocutaneous Syndromes

- Neurocutaneous Overgrowth Syndromes
- Neurofibromatosis
- Sturge-Weber Syndrome
- Tuberous Sclerosis

Neuromuscular Disorders

- Brachial Plexus Injury
- Cerebral Palsy
- Connective Tissue Disorders
- Cranial Nerve Palsy
- Diaphragmatic Hernia
- Hemiplegia
- Mitochondrial Disorders
- Muscular Dystrophies
- Myopathies
- Skeletal Dysplasia's
- Spinal Muscular Atrophy
- Tracheoesophageal Fistulae

Sensory Impairment

- Central Visual Impairment (Cortical–Cerebral)
- Legal Blindness (visual acuity of <20/200 in the better eye with corrective glasses or contact lenses)
- Microphthalmia
- Ocular Albinism
- Optic Nerve Hypoplasia
- Retinopathy of prematurity (with laser treatment)
- Septo-Optic Dysplasia (SOD)
- Unilateral or Bilateral Hearing Loss*

***NOTE:** Failing the newborn hearing screening is not a Part C referral until hearing loss is confirmed.

Aging and Disability Services Division

IDEA Part C

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TORCH Infections and Other Perinatal Infections

- Congenital Cytomegalovirus (CMV)
- Herpes
- Human Immunodeficiency Virus (HIV)
- Rubella (German Measles)
- Rubeola (Measles)
- Syphilis
- Toxoplasmosis

Other Disorders or Conditions Associated with Developmental Delay:

- Autism Spectrum Disorder (ASD)
- Childhood Cancers
- Cyanotic Heart Disease
- Cystic Fibrosis
- Extracorporeal Membrane Oxygenation (ECMO)
- Extreme Prematurity (≤ 27 weeks gestation – up to 18 months corrected)
- Extremely Low Birth Weight ($\leq 1,000$ grams/2.20 pounds)
- Failure to Thrive (requiring treatment)
- Fetal Alcohol Spectrum Disorders
- Gastroschisis or Omphalocele
- Hypoxic Ischemic Encephalopathy
- Inborn Errors of Metabolism (e.g., PKU, Fatty Acid Disorders)
- Nasogastric (NG)-tube/Gastrostomy (G)-tube feeding
- Neonatal Abstinence Syndrome (NAS) requiring medical intervention
- Tracheostomy/Ventilator Dependence
- Whole Body Cooling (Therapeutic Hypothermia)