Educational Eligibility vs. Medical Diagnosis in Autism Spectrum Disorders
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March 9, 2012

Pervasive Developmental Disorders
(also known as Autism Spectrum Disorders)

Autism
Asperger Syndrome
Pervasive Developmental Disorder, Not Otherwise Specified (PDD-NOS)

Also Rett’s Disorder and Childhood Disintegrative Disorder

Autism Spectrum Disorder (ASD)

• The term Autism Spectrum Disorder (ASD) is often preferred because it clearly expresses the idea that these disorders are related, but the symptoms and severity can vary in degree along a “spectrum” or continuum.
Facts about Autism Spectrum Disorders

• Autism spectrum disorders affect approximately 1 in 110 children in the United States,
  — 600 percent increase in prevalence over the past two decades

• Autism is seen in countries around the world --
  — regardless of socioeconomic status, race, cultural and ethnic factors

• Autism is seen in males 4:1

• More children will be diagnosed with autism this year than with childhood cancer, juvenile diabetes or pediatric AIDS combined

• Autism is the fastest-growing serious developmental disability in the U.S.
  — Sibling estimates

What is an Autism Spectrum Disorder?

• An autism spectrum disorder is a neurobiological disorder that is present in children before age three and affects a child in three areas:
  — Social interaction
  — Communication
  — Restricted and repetitive patterns of behavior

Diagnosis of Autism Spectrum Disorders

• An autism spectrum disorder is a behavioral diagnosis ideally given by a team of professionals from a variety of disciplines
  — This practice may vary for a medical diagnosis

• There is no blood test or any other single test that can rule in or rule out the presence of an autism spectrum disorder
Impact of Autism Spectrum Disorders

- A diagnosis of an autism spectrum disorder is just one piece of the puzzle. Many areas of a child’s and family’s life are impacted:
  
<table>
<thead>
<tr>
<th>Behavior</th>
<th>Medical concerns</th>
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</thead>
<tbody>
<tr>
<td>Cognitive</td>
<td>Speech/language</td>
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<tr>
<td>Learning</td>
<td>Motor</td>
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<td>Attention</td>
<td>Sensory</td>
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<tr>
<td>Sleep</td>
<td>Social</td>
</tr>
<tr>
<td>Eating</td>
<td>Family functioning</td>
</tr>
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<td></td>
<td>Siblings</td>
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</table>

Most of these areas impact a child’s educational performance

Educational Impact of Autism Spectrum Disorders

- Increase in prevalence, increase in demand for the educational system to provide services, including specialized classrooms
- Increased demand on school diagnostic teams to have specific expertise in identification of autism spectrum disorders
- Increased demand for general and special education teachers to have knowledge about programs and intervention strategies for children with autism spectrum disorders
- Balance between social, academic, and behavioral needs in school

Educational Impact of Autism Spectrum Disorders

- Individuals with Disabilities Education Act (IDEA) says that school districts are responsible for providing appropriate eligibilities, including ASD, without a medical diagnosis.
  - In addition, long waiting lists for medical evaluations
- Leads to two separate systems: medical diagnosis and educational eligibility
Point of Clarification

- It is not necessary for a “medical” diagnosis to come from a physician (MD). Specially trained physicians or psychologists can make the diagnosis. To make a “medical” diagnosis, the provider uses the diagnostic criteria from the DSM-IV-TR.

Medical Diagnosis vs. Educational Eligibility

Fundamental distinction between a medical diagnosis and an educational determination is the impact the condition has on student learning.

Are medical and educational diagnoses the same?

NO!

Medical evaluation = Diagnosis
Educational evaluation = Category of eligibility for services
Are medical and educational diagnoses the same?

• Parents are often surprised to find out that a medical diagnosis of a disability does not automatically entitle a student to special education services under the Individuals with Disabilities Education Act (IDEA).
  
  – Eligibility for special education services is based on an educational determination of a disability.
  – Medical diagnosis is based on the DSM-IV TR

Medical Diagnosis

• Medical diagnosis is based on criteria in the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision (DSM-IV TR 2000). The DSM-IV TR is the standard reference that healthcare providers use to diagnose mental and behavioral conditions and is published by the American Psychiatric Association
  
  – Can be specific with diagnosis

Educational Eligibility Assessment

• In New Mexico, the school team determines that a child qualifies for special education services based on the Technical Evaluation and Assessment Manual (TEAM) under a general disability category under IDEA (14 categories)

  | Autism                     | Deaf-blindness                     |
  | Developmental Delay        | Visual Impairment                  |
  | Emotional Disturbance      | Hearing Impairment/Deaf            |
  | Learning Disability        | Traumatic Brain Injury             |
  | Intellectual Disability    | Multiple Disabilities              |
  | Other Health Impaired      | Orthopedic Impairment             |
  | Speech or Language Impairment | Severe Disabilities            |

*Note: A medical diagnosis is not required to request school services
Medical Diagnosis vs. Educational Eligibility

• Obviously, these 14 educational categories don’t cover all possible medically diagnosed disabilities
• The role of the educational team is to consider the medical diagnosis along with learning problems and behaviors displayed by the student to determine if the student is eligible for special education under one of these 14 categories.

Differences between Medical and Educational Assessment

• New Mexico Public Education Department TEAM specifies measures that are not usually included in medical diagnoses, including an observation of the student in the classroom context.

• Medical and/or private diagnoses can be taken to a review committee to determine what aspects of private/medical diagnoses meet the standards of the NM Public Education Department requirements
  — Likely requires additional testing and information to meet educational requirements

Medical and Educational Assessment

• Potential assessments for both medical and educational evaluation teams
  — Cognitive or Developmental Measure
  — Speech/Language
  — Adaptive Behavior
  — Gross and Fine Motor assessments
  — Sensory Assessment
  — Autism-specific (e.g., Autism Diagnostic Observation Schedule, ADOS)
  — Academic Achievement
  — Classroom Observation
  — Family Interview for information on developmental/educational, medical, family, and social history
• Or, a single provider may administer a selection of these options
  — Specially trained psychologists and physicians
What if…

• …the outcomes of medical and educational evaluations are different?

– It is possible for a child to receive a medical diagnosis of an autism spectrum disorder based on DSM-IV-TR criteria but not qualify for educational services under an eligibility of Autism

Remember...

The fundamental distinction between a medical diagnosis and an educational determination is the impact the condition has on student learning.

Educational Impact

• The role of the team is to determine what, if any, impact a student's disability has on his or her learning. Their job is to look at the disability in the context of a learning environment, specifically the classroom. It is, therefore, possible for a student to have a medical diagnosis of an autism spectrum disorder, but not be considered a child with a disability under IDEA.

• Likewise, it is possible for a student to meet the eligibility criteria of a student with autism under IDEA but not have a medical diagnosis of autism.
Educational Impact

• The difference is the adverse impact the condition has on student learning. If a student has been diagnosed by a physician or psychologist as having an autism spectrum disorder, but the multidisciplinary team determines the condition does not impact his or her ability to be involved in and progress in the general education curriculum, then the student will not be found to be a student with a disability and the district will not provide special services under IDEA to that student.

Medical Diagnosis vs. Educational Eligibility

<table>
<thead>
<tr>
<th>Medical Diagnosis</th>
<th>Educational Eligibility</th>
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<tbody>
<tr>
<td>• Individual or team evaluation</td>
<td>• School team conducts evaluation</td>
</tr>
<tr>
<td>• Diagnosis made by a multidisciplinary</td>
<td>• School team determines if the child’s disability has an impact on learning and qualifies for special education services under a specific disability category under IDEA (14 categories)</td>
</tr>
<tr>
<td>team/healthcare/clinical professional</td>
<td></td>
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<tr>
<td>based on DSM–IV or ICD 9 criteria</td>
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Categories of Eligibility

• If, after an educational evaluation, a child is not determined to qualify for services under the eligibility of Autism, there are other categories of eligibility that may apply
  – Other Health Impaired (ADHD)
  – Speech/Language Impairment
  – Developmental Delay
  – Emotional Disturbance
  – Intellectual Disability
  – Learning Disability
Eligibility Changes

• A child may qualify for services under a specific educational eligibility and then, based on additional assessment (medical or educational), that eligibility may be changed

Medical vs. Educational

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<thead>
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<th>Educational Eligibility</th>
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<tr>
<td>• Impact on functioning</td>
<td>• Impact on learning</td>
</tr>
<tr>
<td>• Impairments typically in daily living</td>
<td>• Impairments in access to academic environment</td>
</tr>
<tr>
<td>• Used in private settings</td>
<td>• Used only in school setting</td>
</tr>
<tr>
<td>• Access to local/state/federal interventions and/or services</td>
<td>• Access to school services</td>
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*Note - A medical diagnosis is not required to request school services

Why get a medical diagnosis?

• Access to local, state, or federal interventions and/or services
  – Developmental Disability Waiver
  – Social Security Insurance
  – Private therapies (insurance reimbursement)

• Barriers
  – Long waiting lists
  – Specialized assessment, access to resources especially for rural areas
Case Example

• A 5 year old boy has been receiving occupational therapy, speech/language, and special education services under the educational eligibility of Developmentally Delayed due to fine motor, speech/language, and social-emotional delays. He was evaluated by a team of providers in the community and was diagnosed with an autism spectrum disorder.

Case Example

• True or False
  – The school must change his eligibility to Autism
  – The school will not accept the testing completed by the private clinicians
  – The school team will only consider the Autism eligibility at the 3-year re-evaluation
  – The child’s placement and services will change if the eligibility changes

Case Example

• A 5 year old boy has been receiving occupational therapy, speech/language, and special education services under the educational eligibility of Autism due to fine motor, speech/language, and social-emotional delays. He was evaluated by a team of providers in the community and was not diagnosed with an autism spectrum disorder.
Case Example

- True or False
  - The school must take away his Autism eligibility
  - The school will not accept the testing completed by the private clinicians
  - He will lose all his services at school

Changes to Medical Diagnostic Criteria, DSM-V (2013)

**DSM-IV-TR**
- Three diagnoses: Autistic Disorder, Asperger’s Disorder, PDD-NOS
- Three domains: communication, social, RRB

**DSM-V**
- One diagnosis: Autism Spectrum Disorder
- Two domains: 1) Deficits in social communication and social interaction and 2) restricted, repetitive patterns of behavior, interests, or activities

Changes to Medical Diagnostic Criteria, DSM-V (2013)

**DSM-IV-TR**
- No requirement for sensory behaviors
- No medical, language, cognitive, or genetic indicators

**DSM-V**
- Will add sensory behaviors (hyper- or hypo-responsiveness or unusual sensory interests) to the second category of restricted or repetitive patterns of behavior
- Each person will also be described in terms of any known genetic cause (e.g. fragile X), level of language and intellectual disability and presence or seizures and/or gastrointestinal (GI) problems.
- New proposed category of Social Communication Disorder be added to the DSM. This would allow for a diagnosis of disability in social communication without the presence of repetitive behavior.
TEAM (Technical Evaluation and Assessment Manual)

- Determining Eligibility for IDEA Part B Special Education Services, New Mexico Public Education Department

Autism Speaks

- Autismspeaks.org
- Information on a wide range of topics related to autism spectrum disorders, including changes anticipated in the DSM-5