The medical home is the ideal setting for developmental screening.

California ranks 30th in the country for screening infants and toddlers.
44th for screening children living below the federal poverty level.

Only 28.5% of children in California receive timely developmental screenings.

1 in 4 children under the age of 6 in California are at moderate- or high-risk for developmental, behavioral, or social delays.

1 in 68 children are at risk for an autism spectrum disorder.

Too often developmental delays go undetected.
Developmental screening at AAP recommended well-child visits will catch delays earlier, making treatment more effective.
The American Academy of Pediatrics Practice Recommends:

**DEVELOPMENTAL SURVEILLANCE** during every well-child visit.

**DEVELOPMENTAL SCREENINGS** at 9, 18, and 24/30 months.

**AUTISM-SPECIFIC SCREENING** at 18 and 24 months

**REFERRAL** for evaluation and early intervention services when a risk is identified

Using a well-validated developmental screening tool during routine healthcare visits increases referral and identification rates for children with developmental delays and supports linkage to early intervention services.

**Recommended Tools for Developmental Screening:**

<table>
<thead>
<tr>
<th>Tool</th>
<th>Ages and Stages</th>
<th>Parent Completion</th>
<th>Provider Score &amp; Interpret Time</th>
<th>Languages</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ASQ-3</strong></td>
<td>2 months–5 years</td>
<td>10–20 minutes</td>
<td>2 minutes</td>
<td>English, Spanish, French; ASQ PTI also available in Somali and Hmong</td>
</tr>
<tr>
<td><strong>PEDS</strong></td>
<td>0–8 years</td>
<td>2–5 minutes</td>
<td>English, Spanish, Vietnamese; Others with license</td>
<td></td>
</tr>
<tr>
<td><strong>M-CHAT</strong></td>
<td>16–30 months</td>
<td>5–10 minutes</td>
<td>English, Spanish, Chinese, &amp; Korean; Others with license</td>
<td></td>
</tr>
</tbody>
</table>

**PROVEN PARENT-REPORT METHODOLOGY.** Research shows that parents are reliable reporters of their child’s development.

**Screening results that indicate a concern will require further assessment and referral for necessary services.**

**Risk factors which may contribute to a delay**

- Prematurity of less than 32 weeks or low birth weight
- Environmental factors such as neglect and abuse
- Prenatal or other exposure to drugs, alcohol, or tobacco
- Children with an orthopedic, vision, or hearing impairment
- Poor nutrition or difficulties eating
- Exposure to lead-based paint
Why is Developmental Screening in YOUR Practice Important?

Screening early leads to more successful long-term outcomes

Children who receive early treatment for developmental delays are more likely to be ready for kindergarten, successful in school, and live independently

YOU are often the first line of defense

Approximately 25–30% of problems noted by parents during well-child visits are developmental and behavioral in nature

Families feel supported

Families report higher levels of satisfaction and support for physicians who offer developmental screening

BEFORE TURNING 3, CHILDREN SHOULD BE SCREENED A MINIMUM OF THREE TIMES.

Feedback from an Expert

Ventura pediatrician, Dr. Sun Lee, began using the ASQ-3 in 2011. He has extensive experience with this tool and has found:

Easy for parents

Parents typically only need minor clarifications about how to complete the ASQ-3

Quick to complete

Completion of the tool has never taken him longer than 2–3 minutes

Essential for identification

All evidence indicates that, without a screening tool, physicians often miss many signs of developmental delays

Screening is COVERED

Developmental Screening can be billed using CPT billing code 96110 or ICD-10 Z13.4. This covers the time a physician scores, reviews results, and interprets findings. Federal health reform law requires insurance plans to cover developmental and behavioral screenings at no cost to children. Medicaid (Medi-Cal) also covers screenings as part of children’s preventive services.
WHEN, WHERE, AND HOW TO REFER

WHEN to REFER

WHEN A DEVELOPMENTAL DELAY IS SUSPECTED

WHEN A CHILD SCREENS POSITIVE ON A VALIDATED SCREENING TOOL

WHEN A CHILD’S PARENT HAS A DEVELOPMENTAL DISABILITY

WHERE to REFER

DEPENDS ON THE AGE OF THE CHILD

CALIFORNIA EARLY START PROGRAM
Coordinated through Regional Centers

LOCAL SCHOOL DISTRICT
Children with an eligible disability may qualify for special education services

REGIONAL CENTER
Children with autism, cerebral palsy, epilepsy or intellectual disability may receive additional services through their Regional Center

HELP ME GROW
Providing child development information, follow-up support, resource connections, outreach and care coordination

HOW to REFER

ANYONE can refer to Early Start with parental consent for further evaluation
800-515 BABY earlystart@dds.ca.gov www.dds.ca.gov/earlystart

PARENTS must request an evaluation to determine eligibility
Contact the child’s local school district office or SELPA
Visit www.dds.ca.gov/RC for Regional Center office locations

ANYONE may refer a family to Help Me Grow
Visit www.helpmegrowca.org to contact HMG systems where available

HELP ME GROW
Helping children achieve their optimal, healthy development by offering: screening follow-up support, resource connections, referral assistance and care coordination in multiple languages. www.helpmegrowca.org

Adapted from materials by Help Me Grow Ventura County and First 5 Ventura County