

**BERRIEN REGIONAL EDUCATION SERVICE AGENCY
Notice for Provision of Services and Programs**

The *Individuals with Disabilities Education Act* (IDEA) mandates that the district provide written notice to the parent when the district proposes to initiate or change the educational placement of the student or the provision of a Free Appropriate Public Education (FAPE) to the student; or when they refuse to initiate or change the educational placement of the student or the provision of a FAPE to the student.

You are receiving this notice for: _____
(student name)

IEP TEAM RECOMMENDATION

- You are receiving this notice because we are offering the provision of FAPE as delineated in an Individualized Education Program (IEP) developed at the IEP team meeting of ____/____/____. The purpose of the meeting was: _____
Operating district / school: _____ IEP implementation date: ____/____/____
Person assuring implementation: _____
- You are receiving this notice because we are offering the provision of FAPE. This proposal is the result of the Individualized Education Program (IEP) amendment of ____/____/____.
- You are receiving this notice because your student was found **ineligible** for special education programs and services at the Individualized Education Program (IEP) team meeting of ____/____/____, that was convened for the purpose of a reevaluation IEP.

The IEP describes each evaluation procedure, assessment, record, or report used in this offer of FAPE. In the course of the development of the IEP, other options (e.g., programs and services, supplementary aids and services) were considered by not selected. These were:

Option Considered but Not Selected	Reason Not Selected
<input type="checkbox"/> No other options were considered.	

RESIDENT DISTRICT COMMITMENT

Resident district superintendent/designee:

- Agrees with the IEP and its implementation.
- Authorizes the operating district to conduct subsequent IEP meetings.

Signed: _____ Date: _____
Resident District Superintendent or Designee (mo/day/yr)
(Upon district signature, this notice and student's IEP constitute the district's offer of a FAPE.)

OPERATING DISTRICT COMMITMENT (if other than resident district)

The student is attending a program outside of the resident district, and the operating district superintendent/designee:

- Agrees to provide the IEP program(s) and/or service(s).
- Agrees to conduct subsequent IEP Team meetings.

Signed: _____ Date: _____
Operating District Superintendent or Designee (mo/day/yr)

PARENT/GUARDIAN/SURROGATE/STUDENT CONSENT – MEDICAID ONLY

For the purpose of billing the state for any Medicaid-related services on this IEP, the resident district and RESA request your permission to release minimal student information to the state. Billing does not affect or limit any family Medicaid benefits and consent may be revoked at any time.

- I/We **agree** to allow the school to release information to the state to bill the state for Medicaid-related services on this IEP.
- I/We **do not agree** to allow the school to release information to the state to bill the state for Medicaid-related services on this IEP.

Signed: _____ Date: _____
Parent/Guardian/Surrogate/Student (mo/day/yr)

The Procedural Safeguards Notice you received describes protections under the IDEA. The Procedural Safeguards Notice is also available at www.michigan.gov/documents/mde/May09-ProceduralSafeguardsNotice_278611_7.pdf.

The following sources are available to assist you in understanding your rights:

Michigan Alliance for Families (800) 552-4821
<http://www.michiganallianceforfamilies.org/>

Berrien RESA Parent Advisory Committee (269) 471-7725
<http://www.berrienresa.org/specialeducation/parentsadvisorycommittee/>

Notice Requirements

The superintendent or designee of the resident district and, when applicable, the operating district assures that:

- (a) A continuum of alternative placements, special education programs, and related services is available to meet the needs of students with disabilities.
- (b) To the maximum extent appropriate, a student with a disability, including a one who is assigned to a public or private institution or other care facility, is educated with students who do not have disabilities.
- (c) A student with a disability is only removed from the general education environment (such as placing in special classes or separate schools) when the nature or severity of the disability is such that education in a regular class with supplementary aids and services cannot be achieved satisfactorily.
- (d) Unless the IEP of a student with a disability requires some other arrangement, the student is educated in the school that he or she would attend if non-disabled.
- (e) A student whose disability is such that he or she requires special classes or facilities is placed in programs or services as close as possible to his or her home school.
- (f) In selecting the least restrictive environment, consideration is given to any potentially harmful effects to the student or the quality of services that the student needs.
- (g) A student with a disability will not be removed from education in age-appropriate regular classrooms solely because of needed modifications in the general curriculum.

Programs and Services

Program Rule Number

Categorical Programs:	Severe Cognitive Impairment-	R340.1738
	Moderate Cognitive Impairment -	R340.1739
	Mild Cognitive Impairment -	R340.1740
	Emotional Impairment -	R340.1741
	Hearing Impairment -	R340.1742
	Visual Impairment -	R340.1743
	Physical Impairment-	R340.1744
	Other Health Impairment -	R340.1744
	Learning Disabilities -	R340.1747
	Severe Multiple Impairment -	R340.1748
	Early Childhood Special Education Program -	R340.1754
	Severe Language Impairment Program -	R340.1756
	Autism Spectrum Disorder -	R340.1758
Resource Room:	Elementary Resource Room-	R340.1749a
	Secondary Resource Room-	R340.1749b
Related Services:	Teacher Consultant-	R340.1749
	Speech and Language-	R340.1745
	Homebound / Hospitalized-	R340.1746
	Early Childhood Special Education Services-	R340.1755
	Other Related Services-	R340.1701
Other:	RESA Plan Program/Service	R340.1832
	<u>Berrien RESA Alternative Programs:</u>	
	Severe Cognitive Impairment Alternate	R340.1832(SCI-a)
	Mild Cognitive Impairment Alternate	R340.1832(MiCI)
	Specific Learning Disability Alternate	R340.1832(SLD)
	Elementary and Secondary Dept. Alternate	R340.1832(Dept.)
	Juvenile Detention Alternate	R340.1832(Juvenile Detention)

Medicaid Information Release

If any of the services listed below are included on this student's IEP, and if he/she is eligible for Medicaid at any time during the implementation of the IEP, the consent request on page 5 asks your permission to bill the state Medicaid program to receive funding to help support these services. Medicaid-supported services include: speech/language therapy, occupational therapy, physical therapy, social work services, nursing services, orientation and mobility, assistive technology services, targeted case management, transportation services.

Billing the state Medicaid program for the student's School-Based Services does NOT affect the family's Medicaid insurance benefits, and is at NO cost to the family, now or in the future. We are simply asking permission to claim funds reserved by the state to help schools provide services listed on the IEP.

Billing the state's Medicaid program requires the school district to send information to the state about the student. The information released could indicate date of birth, disability, gender, school, dates of service, type of service, and progress reports. School districts have released this information to the state since 1993, but needs your permission because of recent changes in federal law.

Parents have the right to refuse consent to bill the state Medicaid system, and have the right to revoke this consent at any time. If consent is not provided, the school district will provide the services on the IEP, but will not receive funding from the state's Medicaid system to help support these services.