

**Recommended Reporting Format for Results of
 Intellectual, Adaptive and Autism Spectrum Assessments**

Assessments completed by school psychologists as part of the Multidisciplinary Team evaluation are very important in assisting the Division of Developmental Disabilities (DD) in determining a student’s eligibility for services. The Division receives funding primarily through the utilization of Home and Community Based Services (HCBS) Waivers that provide federal matching funds through the Centers for Medicare and Medicaid (CMS) to supplement the DD Aid appropriated by the State. A determination of eligibility for DD services is made in accordance with federal and state regulations as well as the statutory definition of developmental disability, (Nebraska Revised State Statute 83-1205).

We realize that the MDT is a verification and not a diagnosis (which is required by our statute) but the complete testing results and summaries provided in multiple MDTs are valuable in documenting an individual’s cognitive abilities and adaptive functioning during his/her developmental years.

When documenting the results of your assessments, it would be very helpful to the Division to include the following information in the MDT report:

Intellectual Assessment: Please include a complete summary of all subtests that includes the subtest and composite scaled scores. Below is an example of the information needed from the Wechsler Scales. Of course you may select any Intellectual assessment appropriate for the individual you are assessing but a complete summary would be the most useful for the Division. The Division also recommends that you use a full cognitive test battery and not a brief cognitive test battery as this provides the most comprehensive information for us to make an eligibility determination.

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List of Scores

Individual Subtests

	Scaled Score	Percentile Rank
Similarities (SI)	12	75
Vocabulary (VC)	14	91
Comprehension (CO)	13	84
Information (IN)	12	75
Word Reasoning (WR)	13	84
Block Design (BD)	8	25
Picture Concepts (PCn)	7	16
Matrix Reasoning (MR)	7	16
Picture Completion (PCm)	8	25
Digit Span (DS)	10	50
Letter-Number Sequencing (LN)	11	63
Arithmetic (AR)	9	37
Coding (CD)	8	25
Symbol Search (SS)	9	37
Cancellation (CA)	10	50

IQ and Index Scores

	Score	Percentile	Description
Verbal Comprehension (VCI)	116	86	high average
Perceptual Reasoning (PRI)	84	14	low average
Working Memory (WMI)	102	55	average
Processing Speed (PSI)	91	27	average
Full Scale IQ (FSIQ)	99	47	average

Adaptive Assessment: Again, it would be most useful to include a complete summary of all subtests that includes the composite scores for the composites and scaled scores for subtests. Below is an example of the information needed from the ABAS-II. Of course you may select any valid adaptive assessment appropriate for the individual you are assessing.

Sum of Scaled Scores to Composite Score Conversions

Composite	Sum of Scaled Scores	Composite Score	SEM	Percentile Rank	95% Confidence Interval	Qualitative Range
GAC	67	89	1.50	23.0%	86 - 92	Below Average
Conceptual	23	93	2.12	32.0%	89 - 97	Average
Social	18	94	2.60	34.0%	89 - 99	Average
Practical	26	87	2.12	19.0%	83 - 91	Below Average

Raw Score to Scaled Score Conversions

Skill Areas	Raw Score	Scaled Score	Qualitative Range
Communication (Com)	52	4	Borderline
Community Use (CU)	37	6	Below Average
Functional Academics (FA)	59	9	Average
School Living (SL)	50	9	Average
Health and Safety (HS)	45	9	Average
Leisure (LS)	40	9	Average
Self-Care (SC)	49	2	Extremely Low
Self-Direction (SD)	55	10	Average
Social (Soc)	50	9	Average

Impressions: As is appropriate when interpretive information is provided, your clinical impressions of the assessments' validity in capturing an accurate picture of the individual's true capacities is very important. If there are conditions that you believe have impacted the testing results please clearly indicate this. If there are significantly discrepant scores from previous assessments or between raters please also comment on your impressions regarding the nature of these discrepancies. This information is critical in helping us to understand an individual's skills and abilities particularly given that our reviews do not usually include first hand assessment of the individual.

Autism Spectrum: Often in the course of an MDT other areas are also assessed which fit into the definition of developmental disability. The most common verification other than Intellectual Disability that school psychologists assess for that relates to Developmental Disability eligibility is Autism Spectrum Disorder. It is extremely important that we receive all of the scores for instruments used to make this determination as well as clear supporting language regarding your own observations of the youth in conjunction with the data provided by teachers and parents that assisted you in coming to your conclusion regarding the verification. This is critical because there are often discrepancies between raters and we need your expertise and professional opinion to make sense of any discrepancies.

Qualified Professional: Sometimes on the MDT it is not clear who completed the evaluation because that is not indicated along with the interpretive information. It would be helpful if the school psychologist completing the assessment could be indicated within the page where the results of testing are reported. Signing that one is a part of the MDT does not clearly indicate who completed the testing.

Thank you for your assistance with DD eligibility determination processes.