

Presumptive IDD Eligibility Determinations for Adults without Documentation

At times, an intellectual and/or developmental disability (IDD), including functional impairment, is established in adulthood but is not clearly established to have been present before adulthood. In these instances, Vaya will consider all information available (including school records, treatment records, reports from family and relatives, etc.) to make a determination whether it is probable that the IDD existed prior to age 22.

Indicators of an IDD occurring before adulthood may include:

- Reported significant delay in achieving developmental milestones
- Inclusion in special education programs (these may have different labels)
- Never having lived independently
- Reliable information that the individual has never been successfully employed or had other accomplishments that would be uncommon in a person with an IDD without supports
- Eligibility for Social Security Disability benefits before adulthood, particularly if related to an IDD and not for other reasons unrelated to an IDD
- Well substantiated diagnosis of Autism Spectrum Disorder (ASD) in adulthood on the theory that ASD is always first expressed in childhood
- Absence of mental health disorders that might better account for intellectual and/or functional impairments
- Absence of medical conditions that might better account for intellectual and/or functional impairments
- The presence of Down syndrome or other genetic disorders that, if present as an adult, presumably were present since birth
- Assignment of guardianship or payee to manage affairs and funds

Vaya will make a determination of presumptive eligibility for IDD services based on a review of all available information when the overall pattern of information about the member is consistent with that for a person with an IDD.

Note: eligibility criteria are slightly different for Medicaid (b), Medicaid (b)(3) or Innovations services vs. non-Medicaid-funded (state-funded) IDD services:

- For information on Medicaid IDD eligibility, see NC Medicaid [Clinical Coverage Policy No. 8-E](#).
- For information on North Carolina non-Medicaid-funded (state-funded) IDD eligibility, see [N.C. Gen. Stat. § 122C-3\(12a\)](#).