

IF THIS FEELS BIGGER THAN A PHASE

Resources & Next Steps

For parents who have given the other packets a real try and still wonder if something more is going on. This guide covers what a formal evaluation actually involves, how to judge a center before you sign anything, and where to find real help.

WHO THIS IS FOR

Most families never need this page. If you have used the Simple Start and Deep Dive tools for a few weeks and the same pattern keeps showing up at home, at school, and with other kids, this is where you go next.

Wanting an evaluation does not mean something is wrong with your parenting, or with your child.

WHAT IS IN THIS GUIDE

1. Signs it may be time to ask
2. How an evaluation actually works
3. Choosing a center, part one: credentials
4. Choosing a center, part two: red flags
5. Paying for it, and your rights
6. National resources directory
7. Your call & waitlist tracker

Read this at your own pace. Nothing here requires you to act today. Its only job is to make the process less confusing when you are ready.

Signs it may be time to ask for an evaluation

None of these alone means anything is “wrong.” What matters is the pattern: the same thing, in more than one setting, for longer than you would expect, even after you have tried the tools in this packet.

IT SHOWS UP EVERYWHERE

Teachers, grandparents, or coaches independently describe the same struggle you see at home, without you bringing it up first.

IT HAS OUTLASTED YOUR EFFORT

You have used the Simple Start and Deep Dive strategies consistently for several weeks, and the intensity or frequency has not meaningfully changed.

IT IS BIGGER THAN THE MOMENT

Meltdowns, shutdowns, or refusals last much longer or hit much harder than what you see in kids the same age.

DEVELOPMENT HAS STALLED OR SLID BACK

Speech, play, sleep, or skills your child had are getting harder instead of easier, or milestones feel clearly behind.

BEFORE YOU CALL: WRITE IT DOWN

Clinicians work from specifics, not memory. For a week, jot down what happened, when, where, and what came right before it. “He melts down most days after school, usually around homework” gets you further, faster, than “it’s been rough.” Your ABC Behavior Pattern Tracker pages already collect exactly this. Bring them with you.

You do not need permission to ask. You can request an evaluation directly, from your pediatrician, from your child’s school, or from early intervention. You never have to wait for someone else to bring it up first.

How an evaluation actually works

The path differs a little by age, but the shape is the same everywhere in the US. Knowing the steps ahead of time makes each one less confusing.

1**Start the conversation**

Tell your pediatrician, or your child's school, exactly what you are seeing and where. Bring your written notes. Ask directly: "I would like my child evaluated."

2**Get referred to the right door**

Under age 3: ask for "early intervention" or "Part C." It is free by federal law and you can refer yourself, no diagnosis or doctor's note required. Age 3 and up: ask your school district for a "Child Find" evaluation (also free), or see a developmental pediatrician, psychologist, or neuropsychologist privately.

3**Expect a real wait**

In much of the country, developmental and behavioral evaluations run six to nine months or longer. Private testing is often faster but costs more out of pocket. The wait is a supply problem, not a judgment on your family or how serious your child's needs are.

4**Sort out coverage while you wait**

Call your insurer to confirm the evaluation and any resulting therapy are covered, and what diagnosis codes trigger that coverage. Early intervention and school evaluations are free regardless of insurance.

5**The evaluation itself**

Expect questions about your child across home, school, and social settings, direct observation, and sometimes standardized testing. Good evaluators ask you and your child's teachers separately, not just you.

6**The results meeting**

Ask for findings in writing. You are allowed to ask questions, request time to think it over, and disagree. A diagnosis or eligibility decision is a starting point for a plan, not the end of the conversation.

Ask about the people, before the program

Not all centers with similar names or brochures deliver similar care. These questions surface who is actually accountable for your child's plan.

“Who is licensed or board certified, and how often do they personally supervise the person working with my child?”

A Board Certified Behavior Analyst (BCBA) or licensed clinician should design and regularly oversee the plan, even if a technician runs the daily sessions.

“What training does the staff member with my child day to day actually have?”

Ask about certification, hours of training, and how new hires are supervised before working independently.

“What is your staff turnover been like this year, and how do you handle a therapist leaving?”

Consistency drives progress. High turnover, or no plan for transitions, is worth a second thought.

“What population do you have the most experience with?”

Nonverbal children, highly verbal children, aggression, school age transitions: experience with your child's specific profile matters more than years in business alone.

“How will you involve me, and what will you teach me to do at home?”

Caregiver coaching is one of the strongest predictors of progress. A center that keeps you at arm's length is missing its most important ingredient.

Write the answers down during the tour or intake call. You will be comparing more than one place, and memory blurs fast once you are exhausted.

Ask about the approach, then watch for these

QUESTIONS WORTH ASKING

“How do you measure progress, and how often will I actually see the data?” Ask for a sample report before enrolling.

“Walk me through what happens when my child doesn’t do what’s asked.” Listen for calm, respectful redirection, not punishment.

“Can I observe a session, in person or by video, before I commit?” A confident program says yes without hesitation.

“What does a typical day look like?” Ask about schedule, breaks, meals, and outside time, not just therapy blocks.

“Is there a plan to eventually reduce services?” Good programs work toward more natural settings over time, not indefinite enrollment.

RED FLAGS: SLOW DOWN

- Leans heavily on food or token rewards, or any form of punishment
- Won’t let you observe or ask about methods
- Can’t produce real progress data on request
- High, unexplained staff turnover
- Pressures you to sign a long contract on the first visit
- No plan matches your child’s specific concerns, just a generic packet for everyone

Paying for it, and knowing your rights

PRIVATE INSURANCE

Most plans require a diagnosis code before covering therapy like ABA. Call your insurer directly to confirm coverage and ask the center to verify your specific benefits before you start.

MEDICAID

A federal provision called EPSDT requires state Medicaid programs to cover medically necessary treatment for eligible children, even if it isn't named in the state plan. Ask your state Medicaid office about it by name.

THROUGH SCHOOL: FREE EITHER WAY

An IEP (special education) or a 504 plan (accommodations) can provide real support at no cost, and does not require a medical diagnosis first, only an educational evaluation.

IF YOU DISAGREE WITH A DECISION

You have the right to request an independent evaluation, to dispute a school's refusal to evaluate in writing, and to appeal. These are called procedural safeguards. Ask for a copy in plain language.

None of this requires a lawyer. Parent centers (next page) exist specifically to help families navigate these steps for free.

Where to find help: national resources

Every entry here is free to call or visit, and works anywhere in the US.

RESOURCE	WHAT IT DOES	HOW TO REACH IT
211	Free, confidential helpline connecting families to local therapy, childcare, and financial help	Dial 211 or 211.org
CDC: Learn the Signs. Act Early.	Free milestone checklists and clear guidance on what to do next, by age	cdc.gov/actearly
Your state's Part C early intervention	Free evaluation and services for infants and toddlers with delays; you can refer yourself	Ask your pediatrician, or search "early intervention" plus your state
Your school district's Child Find office	Free evaluation for children age 3 and up, for an IEP or 504 plan	Call your school district's special education office
ECTA Center	National directory of every state's Part C coordinator, useful if you cannot find your local office	ectacenter.org
Center for Parent Information and Resources	Connects you to your state's free Parent Training and Information Center, which walks families through IEP and evaluation rights	parentcenterhub.org
Autism Speaks Resource Guide	Searchable directory of diagnostic, ABA, and support providers by zip code	autismspeaks.org/resource-guide
CHADD	National support and information line for ADHD, run by parents and professionals	chadd.org , 866 200 8098
Understood.org	Plain language explanations of learning and thinking differences, and how to advocate at school	understood.org
Wrightslaw	Plain language explanations of special education law and parent rights	wrightslaw.com
NAMI HelpLine	Free support and referrals for family mental health concerns	1 800 950 6264

Your call & waitlist tracker

This process runs on phone calls, forms, and waiting. Keep every call in one place so you never have to explain your child’s story from memory twice.

DATE	WHO YOU CALLED	WHAT THEY SAID	NEXT STEP	FOLLOW UP BY

Tip: ask every office for a direct line and a name, not just a general number. If a wait is longer than you were told, call back and ask to be placed on a cancellation list.