**What is the RITA-T?**

RITA-T is the acronym for Rapid Interactive Screening Test for Autism (RITA-T) in Toddlers. The RITA-T is a screening test administered on young children identified to be at risk for ASD, or for those who scored positive on a Level 1 screening test (such as the M-CHAT). The RITA-T includes nine semi-structured play-based activities that examine constructs that have been identified as delayed in children with Autism Spectrum Disorders (ASD).

Scoring is based on a total of 30 points.

Score <12: Low risk range for ASD

Score 12-16: Moderate Risk for ASD and needs further testing

Score >16: High Risk for ASD

**For High-Risk Scores on RITA-T**

Providers should advise parents/caregivers of those children who score high risk for ASD of the opportunity to have their child evaluated for a Developmental-Behavioral Pediatric and/or Psychological Evaluation at **EITHER** the CNDC (Children’s Neurodevelopment Center) **OR**   
Brown Center for Children & Families.

**For Medium-Risk Scores on RITA-T**

Providers should advise parents/caregivers of the results of the RITA-T. Providers should have a conversation with parents/caregivers to discuss any concerns for ASD, and use their clinical judgment to determine if a referral for a Developmental-Behavioral Pediatric and/or Psychological Evaluation is needed. If parents/caregivers are interested in proceeding with an evaluation, follow protocol for what to do for “High-Risk Scores on RITA-T”. If the provider and parents/guardians choose to wait, continue to observe the child and discuss any concerns for ASD if they arise.

**For Low-Risk Scores on RITA-T**

Providers should advise parents/caregivers of the results of the RITA-T, continue to assess the child, and discuss any concerns for ASD with the parents/caregivers if they arise.

**For billing, please follow the following guidance:**

Billing practices for the RITA-T align with RBI billing practices. One person conducting the RITA-T uses T1027 or T1027HN, depending on qualifications. Two people conducting the RITA-T use T1024/T1024HN.

As providers are gaining experience with administering the RITA-T, it is advisable for 2 staff to conduct it together. Once staff have learned the protocol, this practice should shift to 1-person administration

**For referrals complete the following information:**

* **Cover page**- including the child’s name, date of birth, address, parent/caregiver’s phone number and preferred language, pediatricians’ information, insurance information, and provider notes.
* **Release designed specifically for CNDC/Brown Center to schedule Developmental-Behavioral Pediatric and/or Psychological Evaluation-** this release will allow Early Intervention to exchange information with both CNDC and Brown Center and will also allow sharing of referral information between CNDC and Brown Center.

**Sample script on explaining release to parent/guardian**

*“Based on your child’s RITA-T results and with your permission, we will send over the results along with a current copy of your child’s IFSP to (Brown Center OR CNDC) to schedule further testing. The referral can be sent to a center of your choosing, but know that based on the first availability, this may change. This release will allow Early Intervention to exchange information with both CNDC and Brown Center and will also allow the sharing of referral information between CNDC and Brown Center. The purpose of this is to identify the earliest available appointment at either neurodevelopmental center. You will be contacted by either the Brown Center or the CNDC once an appointment has been scheduled.”*

**What to send**

* Referral form cover page
* Signed release designed specifically for communication between EI, CNDC, and the Brown Center
* Updated copy of IFSP
* RITA-T results

**Where to send**

**The Brown Center**

Referrals can be emailed securely to Evelyn Medina [emedina@wihri.org](mailto:emedina@wihri.org)

or faxed to her attention at 401-453-7697

**OR**

**CNDC**

Referrals can be faxed to the attention of Naomi Snead at 401-444-1755