
The Early Intervention (EI) Program has reviewed and revised its policies and procedures to ensure that Illinois is in compliance with the new Part C regulations, the program is making changes to its Child and Family Connections (CFC) procedure manual and sent out a provider notice. Over the next year, we will work to assure the state statute and administrative rule will be amended to bring them into compliance with the new federal regulations.

**Service Requirements**

The IDEA Part C regulations require early intervention services to be based on scientific research, to the extent practicable. Services must be available to all infants and toddlers with disabilities, and their families, including infants who are homeless.

**Procedure Manual**

The CFC Procedure Manual has been updated in several areas that will affect how CFC offices interact with families. Forms used to inform parents and obtain consent have been modified and new policies have been written in areas that include the use of public and private insurance, family fees, transition, confidentiality, record keeping, and procedural safeguards for families.

**Other Changes**

What changes might you expect to see as the new procedures are rolled out?

- Policies have been updated so that a voluntary family-directed assessment of family resources, priorities, and concerns is completed during intake and provided to evaluators through a new Intake Social History Summary Sheet.
- In some cases, the 45-day timeline (between referral and IFSP) will not apply until documented exceptional family circumstances are resolved or parental consent has been obtained for the initial evaluation/assessment.
- Families will need to provide consent prior to using private insurance to pay for EI services, both initially and anytime an increase in frequency, length, duration, or intensity is made to existing services.
- Families will not be required to submit an All Kids application (if not enrolled and potentially eligible) to receive EI services, but CFC offices will continue to inform and encourage families to do so.

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Part C Final Regulations

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- Clarification of transition steps for children referred to the program less than 90 days prior to their third birthdays will help quickly direct a family to Part B services, if the child may be eligible.

Please monitor Provider Connections and Early Intervention Training Program websites for additional information. You are encouraged to review the updated CFC Procedure Manual when it is posted and to participate in provider meetings and trainings sessions concerning changes to EI policies and procedures.◆

Jennifer Kepner Retires

June 1, 2012, marked the retirement of Jennifer Kepner from the Bureau of Early Intervention. Jennifer spent more than nineteen years in Early Intervention, and she has been responsible for the development and implementation of numerous aspects of the EI Program. Some of these include Provider Connections, the Central Billing Office, the EI Monitoring Program, Medicaid reimbursement to EI, and the Provider Handbook. In addition, she has provided technical assistance to therapists and agencies with enrollment and billing questions. Thank you, Jennifer, for your commitment to infants and toddlers with special needs as well as your many contributions to Early Intervention in Illinois.◆

Post Office Boxes and Zip Codes

New HIPAA Standards for the 5010 format require that the Payee address be a street address. All payee addresses must include the nine digit ZIP code. Providers may still use a PO Box, but they must also include a street address. Please remember that when billing, to include the address in the same way it was submitted to Provider Connections. Claims will be rejected if the address is different and if the nine digit ZIP code is not included.◆

Did You Know ……
You can receive early intervention updates by subscribing to the RSS Feed for Updates on Provider Connections’ website.

For Questions Concerning Billing
Please Call
The Central Billing Office
(800) 634-8540
In response to identified system needs and in line with recommendations from the Illinois Part C Early Intervention (EI) Taskforce in its June 2010 report to the Illinois General Assembly, the Early Intervention Program is announcing its plans to implement a new comprehensive Early Intervention data system.

Work with data system architects is already well underway. Recommendations from the EI Taskforce report as well as recommendations from other EI stakeholders, including an Illinois Interagency Council on Early Intervention (IICEI) workgroup, have been referenced as work has progressed.

Illinois' Early Intervention data system will be a real-time web-based EI data and billing system, accessible online 24/7. IFSP teams will use the EI data system for data collection, recordkeeping, communication and billing activities. Management and reporting tools will be available at the service provider, CFC and State levels.

The EI Bureau is early in this process and is looking forward to updating the field on its progress on a regular basis.

Most credentialed providers need to have the live-scan fingerprint done only once. It is not necessary to have this done each credential period since the Illinois State Police have a rap-back feature that will alert Provider Connections to any state convictions. Only people who had poor-quality prints are required to be reprinted and will generally have to have a name check done due to the low quality of their prints. These people will receive a separate renewal notice with a fingerprint form enclosed.

All credential providers need to complete the Department of Children and Family Services Authorization for Background Check for Child Abuse and Neglect Tracking System (CANTS) each credential period. While these are being processed more quickly, we still ask that this form be included with the renewal application at least 60 before your credential expiration date. We will not process the CANTS without the renewal application.

Provider Connections staff will conduct the Sex Offender Registries check on providers each credentialing period.

That Provider Connections has a Facebook page…
Follow the link from Provider Connections homepage:
http://www.wiu.edu/ProviderConnections/
Authorization Tips for Providers
Submitted by the EI Training Program

- Watch your dates….don’t start before you have an auth and don’t start before the start date.
- Proof the auth as soon as you get it and contact the service coordinator before starting services if it is incorrect (preferably within 2 business days of receiving the auth). Ultimately, it is the provider’s responsibility to review the authorizations for accuracy and to provide services as set forth in the authorization.
- Make sure you receive a new copy of the auth if it is updated or changed for any reason.
- Provide services as indicated by the authorization frequency, intensity, and duration. If the authorization is not followed, the provider could have findings and/or refunds during monitoring reviews.
- Don’t provide services past the end date of the auth. If the IFSP end date is extended you must get an updated auth reflecting the new end date. If the IFSP changes, the auth changes.
- Providers must attend IFSP meetings in full to receive an authorization.
- Providers delivering ongoing direct service should make sure they receive a corresponding authorization for ongoing IFSP development time. Please refer to the “Definitions” section of the Provider Handbook for more information on IFSP development time.
- All authorizations auto-terminate the day before the IFSP ends and/or the day before the case closes.
- Annual assessment auths…if they occur the same day as the annual IFSP meeting new auths will need to be issued on the new IFSP.
- Providers have 14 days from the receipt of the authorization to submit their Evaluation/Assessment report to the CFC. Receipt of the authorization is considered the authorization start date unless otherwise noted.
- Providers may only provide billable services with their authorization. If documentation indicates the authorized service was used to deliver non billable activities the claim will be denied. If the claim is processed and it is later discovered that the service delivered was not a billable activity then the provider will be required to reimburse the Central Billing Office.
- Non Billable activities (refer to full list in Provider Handbook)
  - No shows
  - Travel time
  - Prep for sessions
- Interpreters may require different authorization types to ensure they are authorized for the different places that services may be delivered. For example, an interpreter may require an offsite authorization to provide interpretation during a home visit with the early interventionist and an onsite authorization to make appropriate phone calls for scheduling early intervention visit with the family.

For more information on reading and proofing your authorization, please continue on to review the tips provided in “Read/Proof Your Authorization.”
Read/Proof Your Authorization

Start Date:
- Services are based upon functional outcomes and the start date should be agreed upon by the IFSP Team, including the family
- Should NEVER be backdated
- May not precede an Insurance Waiver begin date (Auth Start Date = Waiver Start Date)
- DS, AS, AT Start Dates may not precede IFSP Begin Date

Auth Type:
- EA = Evaluation/Assessment (Used for ALL pre-IFSP activities, including Interpretation, eligibility (IFSP) meetings, and Transportation)
- AT = Assistive Technology Used for post-IFSP AT services only
- DS = Direct Service: Used for post-IFSP direct services and IFSP time including IEP meeting if prior to age three
- AS = IFSP Assessment: Used for post-IFSP assessments (i.e. 6 mo., annual)
- IM = IFSP Meeting (includes transition meetings)

Method: Please refer to the definitions section of the Provider Handbook for full definitions
- Individual: Authorization to provide services to a single child/family or to attend an IFSP meeting. Some services, like Medical Diagnostic Services or Health Services, may only be authorized as “Individual.”
- Group: An authorization to provide direct services to two or more children during the same period of time. One provider can serve up to 3 children or multiple families (parent groups).
- IFSP Development: For a description of plan development activities included under “IFSP Development,” see its definition in the Provider Handbook

Place of Service:
- Offsite where the child/family typically spends their day (a natural environment)
- Onsite: where the provider of services is located during the work day that a family travels to
- Place of Service Codes used in EI
  - 12 - Home - Offsite
  - 03 - Regular Nursery School/Day Care - Offsite
  - 11 - Service Provider Location - Onsite
  - 62 - EI Program - Onsite
  - 99 - Other Setting - Offsite

Payee:
- The legal entity designated to receive payment for services provided by an Individual Provider.
- May be an individual, an individual who has incorporated him/herself, or an agency.
- More information on the Payee can be found in the Provider Agreement on the Provider Connections website: [http://www.wiu.edu/ProviderConnections/pdf/CBOEnrollmentApp12-10.pdf](http://www.wiu.edu/ProviderConnections/pdf/CBOEnrollmentApp12-10.pdf)

Frequency and Duration:
- The number of occurrences during a given time period and the given time period (i.e., 1 time per week, 2 times per month)
- Frequency and duration should reflect the discussion of the IFSP team (i.e., 1 time per week vs. 52 times per year)
Authorization Tips for Providers

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Individual Provider:
- The provider or a provider at the agency qualified to provide the authorized service.
- Equally qualified, enrolled providers under the same Payee may be substituted

Intensity:
- The length in time of a given occurrence (i.e., 60 minutes for an individual session with child/family or 180 minutes for an evaluation/assessment)
- Must be authorized in 15 minute increments

Status & Status Date
- Reflect recent adjustments
- For example: if the service coordinator extends an authorization end date the status and status date will be updated
- Auth numbers also get updated when adjustments are made to the authorization

Authorization Number:
- Is generated when a service coordinator saves the authorization
- Is required for billing to the central billing office
- Reflects the child’s EI number
- Is updated if the authorization is changed/modified and therefore service providers must obtain a new copy of an authorization from the service coordinator if the authorization is ever modified
- The only time a service provider provides services without an authorization number in advance is when they attend an IFSP meeting. An authorization and corresponding auth number should be generated by the service coordinator upon completion of an IFSP meeting so the provider may leave the meeting with his/her authorization number

Insurance:
- If it says “bill insurance first” providers must verify insurance benefits prior to delivering services
- If there is a waiver or exemption in place…and the IFSP has been extended…check with the service coordinator to make sure the waiver/exemption has been extended
- If the family’s insurance changes, the auth may need to be updated to reflect new insurance instructions
- Please contact the Central Billing Office for more information related to billing insurance ([http://eicbo.info/](http://eicbo.info/))

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Provider Connections
staff hopes you have a fun summer!
Health Race

In their spare time, Provider Connections staff members, Amy Betz and Carrie Woodside trained for a 10k walk. Here they are before the Bridge the Gap to Health Race in Quincy on May 12th. Proceeds went to the Quincy Catholic Charities MedAssist Program.

Questions or Concerns?
Please Call Provider Connections’ Toll Free Number
800- 701-0995

http://www.wiu.edu/providerconnections

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