TO: Early Intervention Developmental, Occupational and Physical Therapy Evaluating Providers

FROM: Ann M. Freiburg, Chief
Bureau of Early Intervention

DATE: December 21, 2018 Addendum to December 18, 2018 Corrected Memo

RE: Additional clarification about Evaluation/Assessment Code Changes for EI Developmental, Occupational and Physical Therapy

As stated in the corrected Provider Informational Notice on December 18, 2018, The Illinois Department of Human Services, Bureau of Early Intervention (EI) has received the federal CMS updates to codes effective January 1, 2019.

You were informed that all EI Developmental (DT), Occupational (OT), and Physical (PT) Therapists performing evaluations/assessments to begin using procedure code 96112 for dates of service performed after December 31, 2018 and discontinue the use of 96111 with dates of service beginning January 1, 2019. Billing for dates of service after December 31, 2018 using the 96111 (with previously associated modifiers) code will result in a denial of payment. The adjustments to the Cornerstone data system have been completed which will allow correct authorizations to be created if necessary.

One point of clarification is that new authorizations are not necessary if the current authorization crosses the calendar year AND if you, the provider, submit your claims to the EI CBO correctly, based on the information below.

Example:
Evaluation/Assessment Authorization Start Date 12/15/18 – End Date 01/15/19.

- If the evaluation/assessment is performed prior to 01/01/19, submit the claim using the code 96111 (with appropriate modifier).
- If the evaluation/assessment is performed after 12/31/18, submit the claim using the code 96112 (with appropriate modifier).

Claims
- The claims submitted to the Central Billing Office (CBO) for dates of service prior to January 1, 2019 must be billed as follows.
  - 96111 (no Modifier) for DT evaluation/assessment
  - 96111 Modifier GO for OT evaluation/assessment
  - 96111 Modifier GP for PT evaluation/assessment
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- The claims submitted to the CBO for dates of service **beginning January 1, 2019** must be billed as follows:
  - 96112 (no Modifier) for Developmental Therapy evaluation/assessment
  - 96112/Modifier GO for Occupational Therapy evaluation/assessment
  - 96112/Modifier GP for Physical Therapy evaluation/assessment

- As all EI claims must include, remember to enter the number of 15-minute units utilized for the process of performing the approved instrument, scoring the approved instrument and writing the required *Illinois Early Intervention Evaluation/Assessment Report Format*.

- Remember that documentation must support the time utilized and the therapist must only bill for time **actually used** regardless of the time allowed on the authorization. If additional time is needed, the therapist must always contact the EI Service Coordinator to discuss potential adjustments.

The Bureau of EI reminds all EI providers that the Payee Agreement specifically states compliance with HFS is required and that the claim should reflect the time utilized to perform all activities of the evaluation/assessment. All EI providers are reminded that submitting claims to third-party funding sources for evaluation/assessment is prohibited.

Additionally, only the time spent that can be supported by documented activities of the evaluation/assessment process should be billed, as it is against EI policy to round-up time to bill. A timely, written report of the findings of the EI DT, OT, and PT evaluation/assessment must continue to be submitted to the CFC office using the required report format and in the required 14-day time-frame.

Finally, it is also important to know these codes with modifiers listed for use in this memorandum are strictly specific to the use of EI program evaluations/assessment.

Thank you for your continued service to Illinois’ EI infants/toddlers and their families!