Authorization Tips for Providers

- Always review your dates.....don’t start before you have a valid authorization in hand and do not begin services prior to the start date reflected on the authorization.

- Review your authorization as soon as you receive it. Contact the child’s Service Coordinator if there are errors and before starting services, preferably within 2-business days of receiving the authorization. It is ultimately the provider’s responsibility to review all authorizations for accuracy and provide services as set forth within the authorization.

- Ensure you receive a new copy of the authorization from the Service Coordinator if you know it is revised for any reason.

- Deliver services following the stated frequency, intensity, and duration listed on the authorization. If not followed, the EI Provider could be cited with monitoring findings, and/or refunds during reviews.

- Do not provide services after the authorization ends; if the IFSP end date is extended you must get a revised authorization that reflects the updated end date. If there are changes to the IFSP changes, it could affect the authorization.

- EI Providers must attend IFSP meetings in full to receive an authorization.

- EI Providers delivering ongoing direct service should make sure they receive a corresponding authorization for ongoing IFSP development time. Please refer to the “Glossary” within the EI Provider Handbook for more information on IFSP development time.

- All authorizations will auto-terminate the day before the IFSP ends and/or the day before the case closes.

- Annual Assessment authorizations occurring the same day as the annual IFSP meeting will require new authorizations to be issued for the new IFSP.

- EI Providers have 14-calendar days from the receipt of the authorization to submit their Evaluation/ Assessment report to the Service Coordinator. Receipt of the authorization is considered the authorization start date unless otherwise noted.

- EI Providers may only provide authorized services with their authorization. If EI Provider documentation indicates the authorized service was used to deliver non-billable services, the claim will be denied or if paid then later discovered that the service delivered was a non-billable service, the EI Provider will be required to submit a refund the Central Billing Office (CBO).

- Non-Billable activities are defined in detail within the EI Provider Handbook located in Chapter 6.2.

- Interpreters may require different authorization types to ensure they are authorized for the different places that services are to be delivered. For example, an interpreter may require an offsite authorization to provide interpretation during a home visit with the EI Provider and an onsite authorization to make appropriate phone calls for scheduling EI visits 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.”*
Understanding your Authorization

**Start Date:**
Services are based upon functional outcomes with a Start Date agreed upon by the IFSP Team, which includes the family.

The Start Date may not be backdated.

It also may not begin prior to an Insurance Waiver Start Date (Authorization Start Date = Waiver Start Date); Direct Service, Assessments, and Assistive Technology Start Dates may not precede the IFSP begin date.

Authorization Types:
- **AS = Assessment:** Used with specific Assessment tool when a full Evaluation is not being performed. When eligibility is determined through diagnosis or at-risk conditions, no Evaluation tool is required but Assessment tool to determine the unique strengths and needs is still required. For initial eligibility – must be credentialed evaluator performing the Assessment.
- **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
- **EA = Evaluation/Assessment:** Used when full Evaluation with Assessment is needed. Could be initial eligibility, redetermination of eligibility at annual, including Interpretation, , and Transportation. For initial eligibility – must be credentialed evaluator performing the Evaluation/Assessment.
- **IM = IFSP Meeting**

**Method:** *(Refer to the Glossary of the EI Provider Handbook for additional details)*
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 4 children or multiple families (parent groups).

**IFSP Development:** See full definition “IFSP Development,” within the Glossary of the EI Provider Handbook

**Place of Service:** Providing services in the natural environment is not only a guiding principle in Illinois and an evidence-based practice, but is also a requirement of all 50 states and reporting territories which is defined in Federal Law, Part C of the Individuals with Disabilities Education Act (IDEA). Under Section 303.26 of Part C Regulations, *Natural Environments* is defined as *settings that are natural or typical for a same aged infant or toddler without a disability...* Natural environments are far reaching and could include settings such as the child’s home, playground, childcare center, grandma’s house, library, or any other setting or activity that is a part of that child and family’s life.

**Offsite:** where the child/family typically spends their day (aka-natural environment)

**Onsite:** where the provider of service is located during the work day that a family must travel to

**El Place of Service Codes**
- **12 Home (Offsite):** The principal residence of the child’s family or primary caregiver(s)

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• **03 Regular Nursery School (Offsite):** Program designed for and regularly attended by typically developing children. Most of the children in this setting do not have disabilities. Regular nursery schools and child care centers are examples. *Please note that in order for this place of service to be considered a natural setting for the child that services must be delivered within the context of the daily routine at the day care. It is not a natural setting if the child is removed from the room to meet with the interventionist in a separate location.*

• **11 Service Provider Location (Onsite):** An office, clinic, or hospital where the child goes for short periods of time to receive services.

• **62 EI Program – (Onsite):** Program designed for children with developmental delays or disabilities. Services are directed toward the facilitation of one or more developmental areas.

• **99 Other Setting (Offsite):** Other offsite service location *that is a natural setting for the child and family (a place that the child/family typically spends time at)*. For example, a McDonalds restaurant, library, park district program, or church.

**Payee**

- The legal entity designated to receive payment for services provided by an Individual Provider.
- May be an individual, an individual who has incorporated himself/herself, or a provider agency.
  - More information on the EI Payee can be found within the *Illinois Department of Human Services Payee Agreement for Authorization to Provide Early Intervention Services* on the Provider Connections website.

**Individual Provider**

- Each EI Provider whether their own Payee or working for EI Agency qualified to deliver the authorized service. Equally-qualified, enrolled providers under the same Payee may be substituted.

**Frequency and Duration**

- The number of occurrences during a given time period and the given time period *(For example: 1 time per week, 4 times per month)*
- Frequency and duration must mirror the agreement of the IFSP team *(For example: 1 time per week versus 52 times per year)*

**Intensity**

- The length of time of per occurrence *(For example: 60 minutes for an individual session with child/family or 180 minutes for an evaluation/assessment)*
- Must be authorized in 15 minute increments

**Status and Status Date**

- Reflects recent adjustments *(For example: if the Service Coordinator extends an authorization end date the status and status date will be updated also.)*
- Authorization numbers also get updated when adjustments are made to the authorization.

**Authorization Number**

- This is automatically generated when a Service Coordinator saves an authorization and is required for billing to the CBO.
- Includes the child’s EI number

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• Is updated if the authorization is revised; therefore, EI Providers must obtain a new copy of an authorization from the Service Coordinator if the authorization is ever revised.

• The only time an EI Provider delivers service without an authorization number in hand is when they attend an IFSP meeting. An authorization and corresponding authorization number should be generated by the Service Coordinator upon completion of an IFSP meeting so the EI Provider may leave the meeting with his/her authorization number in hand.

**Insurance Flags**

• If the authorization states “Bill Insurance First” EI Providers must verify insurance benefits prior to delivering services.

• If there is a Pre or Post-Billing Waiver or Exemption in place and the IFSP has been extended; check with the Service Coordinator to make sure the Waiver/Exemption has also been extended.

• Always verify with the family at visits that insurance has not changed. If the family’s insurance changes, verify the authorization is still accurate, in case new insurance instructions may apply. If changes are discovered, notify the Service Coordinator immediately to ensure reimbursement.

• Please review the *Early Intervention Central Billing Office Billing Information for Providers* for more information at [http://www.eicbo.info/providers/eicbo_provider_booklet.pdf](http://www.eicbo.info/providers/eicbo_provider_booklet.pdf) or contact the CBO at 1-800-634-8540 for more information related to billing insurance.
Sample Authorization with Descriptions

REPORT: HSP0071
STATE OF ILLINOIS
CORNERSTONE
EARLY INTERVENTION PROGRAM – AUTHORIZED PROVIDER SERVICES

CFC SITE: 999999  #30CFC - SUBURBIA
SERVICE COORDINATOR: 999999001 JOHNSON, ALBERT

TELEPHONE: (217) 555-1234

CHILD EI NUMBER: 123456
NAME: SMITH, JOHN
CATEGORY: EI EARLY INTERVENTION

RESIDENCE
123 HAPPY LANE
SPRINGFIELD, IL 62777
CONTACT: MARY SMITH
RELATIONSHIP: MOTHER

TELEPHONE: (217) 555-1235

AUTHORIZATION START DATE: 02/01/2016
END: 10/31/2016

AUTHORIZED PAYEE: ABC THERAPY COMPANY
123 MAIN STREET
SPRINGFIELD, IL 67777-7777
TELEPHONE: (217) 555-0001

AUTH TYPE: IFSP-DIRECT SERVICE
METHOD: INDIVIDUAL
PROCEDURE: 92507 / SPEECH THERAPY SERVICES
FREQUENCY: 2 PER WEEK FOR 60 MINUTE(S)
AUTH NUM: 123456-791-001-00
PRINT DATE: 01/30/2016

COMMENTS: JOANIE CUNNINGHAM, SLP
PRIVATE INSURANCE: 02/PRIVATE INSURANCE BILL

Please note, any and all errors must be corrected prior to providing the service to ensure payment.

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