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

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

DATE: December 19, 2018

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

The Illinois Department of Human Services, Bureau of Early Intervention (EI) has received the federal CMS updates to codes effective January 1, 2019. This memorandum serves to inform 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 once the 96111 code is inactivated in the EI system.

We anticipate the adjustments to the Cornerstone data system will be in place before the end of December 2018. It is important to recognize that you must have a valid authorization in hand prior to delivering these services. While we are striving to get the new codes implemented as quickly as possible, the actual release may impact scheduled services for the first week of January 2019. Please ensure your Child and Family Connections (CFC) provides a new authorization utilizing the correct code based on the date of service for the evaluation/assessment you are wanting to perform in case you had previously received pre-generated authorizations from the CFC who utilizes an un-preferred practice of creating future authorizations at the initial or annual Individualized Family Service Plan (IFSP). Working closely with the CFC to ensure compliance of current and correct authorizations will limit issues of denial for the valuable service you are performing.

**Based on guidance from the Illinois Department of Healthcare and Family Services (HFS), the Bureau of EI is notifying all EI DTs, OTs, and PTs that they must follow the guidelines below with respect to all dates of service beginning January 1, 2019 for the purpose of evaluations/assessments.**

**Authorizations**

- EI Service Coordinators will provide authorizations for EI DT, OT, PT evaluations/assessments performed (dates of service) prior to January 1, 2019 using the existing code of 96111 for DT, 97003 for OT and 97001 for PT.

- EI Service Coordinators will provide an authorization for an EI DT evaluation/assessment using code 96112 for dates of service beginning January 1, 2019.
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- EI Service Coordinators will provide an authorization for an EI OT evaluation/assessment using code 96112 with Modifier GO for dates of service beginning January 1, 2019.

- EI Service Coordinators will provide an authorization for an EI PT evaluation/assessment using code 96112 with Modifier GP for dates of service beginning January 1, 2019.

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

- 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!