New Regulations: Questions and Answers

Infant & Toddler Connection of Virginia Statewide Meeting September 25, 2012

Eligibility Determination

- Update from OSEP Review
 - Screening Tool Okay
 - But must evaluate in all areas

Participants for IFSP Reviews

- Parent, other family members if requested
- Advocate if requested
- Service coordinator
- Providers only if conditions warrant

Annual IFSP

- Eligibility determination by records, or multidisciplinary
- Assessment by ongoing assessment, or multidisciplinary
- IFSP parent plus two or more individuals, two disciplines, one must be service coordinator

IFSP Team – Blended Model

- 2nd individual can participate by phone or in writing
- During or ahead of IFSP meeting

Example

- Child with Down syndrome, receiving developmental services and SC (in blended model)
- Eligible by records
- Assessment info available from contact notes
- IFSP Family, SC/DS, one other individual (family + 2 individuals)

Request for Chart

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	A	В	c	D	F	F	G	н	1	
1	Activity	Who?	How?	Where?	_					-
	Initial Eligibility	i nerson	SC reviews medical records/report which includes	Office or						
2	Determination		medical diagnosis conferring Part C eligibility	Home						
-	Initial Eligibility Determination	2 Disciplines	El Professional(s) representing 2 different disciplines							
		(can be one	may determine eligibility thru review of reports or face	Office or Home						
		person	to face meeting with child & family. If targeted							
		qualified in 2	assessment is needed to determine eligibility, an							
3		disciplines)	assessment tool is not required.							
	Initial Eligibility Determination		1 El Professional may review medical records or							
		1 El Professional	written report (may be same discipline) as long as the	Office or Home						
			info reviewed can determine child meets eligibility							
4			criteria.							
5	Annual Eligibility	1 person	SC reviews medical records/report which includes	Office or						
	Determination		medical diagnosis conferring Part C eligibility	Home						
	Annual Eligibility Determination	1 Discipline	1 El Professional may review contact notes and then	Office or Home						
6			complete eligibility determination form (this may be the							
			same person providing services to the child).							
	Annual Eligibility Determination	2 Disciplines	El Professional(s) may review written reports or receive							
		(can be one	information verbally & then complete eligibility	Office or						
		person	determination form. Can also be done face to face with	Home						
		qualified in 2	child & family, if other info not sufficient. Formal	Home						
7		disciplines)	testing is not recommended or required.							
			If family or another IFSP team member believes child							
•	> > Sheet1 / Sheet2 / Sh	eet3 /	na landa na sta silalikilika shitaria dhan an IECD andan	•		III				

Transition: Notification and Referral

At least 90 days before transition
To LEA and SEA
Notification = Referral

Transition Plan and Conference

- At least 90 days, up to 9 months before transition
- May be combined
- Must be IFSP meeting

Purpose

- Notification child find and referral
- Plan transition steps and services
- Conference to discuss any services child may receive under Part B

Options

Expected date of transition - 9/4
Conference and Plan - February
Notification - March



- Expected date of transition 9/4
- Plan January
- Notification March
- Conference April

Joint Part C – Part B Meetings

In all regions
State reps from Part C and Part B
Opportunity to plan specifics

Tools of the Trade: Checklist



What makes a referral? When you call to schedule a transition conference if you give Part B the address etc is this then considered a referral?

When does the 65 day timeline begin? Is it the day that the school receives the referral or the date the parent signs consent for testing?

Do new page 7s need to be placed in old IFSP or just use new page 7 from July/August forward?

How do we document 2 disciplines at the transition conference if it is only the family, SC and school system folks?

Will the family fee procedures be reviewed given the new health care act since some are no longer applicable - financial hardship for using insurance

- What happens when a family always has an excuse for not applying for Medicaid or getting you information you need for billing?
- What happens when the family comes to us with Medicaid from another state and does not want to apply for Virginia Medicaid?

IFSP Page 9 - I'm so worried that we'll forget to check the box. Can we make it assumed that the family is still allowing us to bill private insurance unless the box is checked that they don't want us to continue billing?

Differences in the flexible benefit programs