

## *Early Intervention Targeted Case Management Reimbursement Fact Sheet*

Discipline	Early Intervention (EI) Case Manager, will be called Service Coordinator.
Service	Targeted Case Management (TCM) / Service Coordination.
Case Manager/SC Qualifications	Education, Knowledge, Skills and Abilities' requirements as defined in Chapter 12 of the Infant & Toddler Connection of Virginia Practice Manual. Certification as an Early Intervention Case Manager by DBHDS.
Provider Qualifications	<ul style="list-style-type: none"> <li>• All TCM providers must complete the EI TCM Provider Agreement Form and fax or email to Jeff Beard at DMAS. This must be done prior to the provider billing for TCM services.</li> <li>• Current providers will receive a new Specialty Type of 119. New providers will be assigned a Provider Class Type of 108 and Specialty Type 119.</li> <li>• Local Lead Agencies may provide TCM and/or contract with another provider to perform and bill for TCM for their locality.</li> </ul>
Procedure Code	T2022
Reimbursement Category 1 or 2	NA
Rate / Frequency	<ul style="list-style-type: none"> <li>• \$120.00 Flat Rate Per Month.</li> <li>• Service dates for billing may be listed as a single day of the billing month (10/1/2011) or as a range of dates within the billing month (10/1/2011 – 10/31/2011).</li> </ul>
Billing Form	<ul style="list-style-type: none"> <li>• CMS 1500</li> <li>• Electronic Billing and Direct Data Entry is Allowed</li> </ul>
Limits	<ul style="list-style-type: none"> <li>• One Charge per Month / Per Child</li> <li>• EI enrollees are required to receive EI TCM. Therefore, if a child is receiving ID or MH TCM prior to 10/1/2011, the child must begin receiving EI TCM as of 10/1/2011. ID and MH TCM cannot be billed to DMAS for EI Enrollees as of 10/1/2011.</li> </ul> <p>The only possible exception to an EI enrollee receiving EI TCM is Therapeutic Foster Care (TFC). If a EI enrollee is receiving TFC, the EI case manager should review the child's needs and services with the TFC case manager to determine if the child's services are better monitored and coordinated by the EI case manager or the TFC case manager. The two case managers are responsible to make the determination of which TCM is better suited for the child's particular needs and services.</p> <ul style="list-style-type: none"> <li>○ Exception: EI TCM can be billed even if a child is also receiving BabyCare.</li> </ul>
Minimum Requirements of Case Manager for Billing	<p>DMAS may be billed for a monthly Service Coordination/Case Management when the following minimum requirements are met:</p> <ul style="list-style-type: none"> <li>• At least one of the allowable activities, as listed below, documented appropriately, by the SC/CM during the month with the child, the family, service providers, or other organizations on behalf of the child/family. The contact must be relevant to the child/family needs and the Individualized Family Service Plan (IFSP). The service may not duplicate any other Medicaid service;</li> </ul>

	<ul style="list-style-type: none"> <li>• The contact or communication is documented completely and correctly, as outlined in requirements for acceptable Contact Notes;</li> <li>• At a minimum a phone, or email, or a face-to-face contact with the family every three calendar months, or documented attempts of such contacts. Such contacts shall be person-centered with the choice of contact method determined by the family. The contacts shall begin the next month after the month that the IFSP is signed;</li> <li>• For reimbursement for the initial development of the IFSP and the annual IFSP a face-to-face contact is required and documented. <ul style="list-style-type: none"> <li>○ There must be documentation that the Service Coordinator observed the child during the month of the IFSP meeting in order to bill for that month.</li> <li>○ Subsequent months cannot be billed unless or until there is documentation that the Service Coordinator has observed the child.</li> </ul> </li> </ul>
Required Billing Documentation	<ul style="list-style-type: none"> <li>• IFSP completed and signed by required parties, including IFSP reviews and annual IFSPs;</li> <li>• Contact notes of all allowable activities;</li> <li>• Documentation of rights and procedural safeguards and Medicaid right to appeal; and</li> <li>• Contact notes written within five business days of service rendered.</li> </ul>
Special Exception	<p>EI Service Coordination is the only EI service that is reimbursable by Medicaid prior to determination of EI eligibility. EI SC may be billed from the date of the initial intake visit and may continue up to one of three dates, depending on the outcome of the child's Part C eligibility determination. The Intake visit cannot be billed until after the Initial EI Service Coordination Plan form is signed and dated.</p>
Allowable Activities	<ul style="list-style-type: none"> <li>• Coordinating the initial Intake and Assessment of the child and planning services and supports, to include history-taking, gathering information from other sources, and the development of an Individualized Family Service Plan, including initial IFSP, periodic IFSP reviews, and Annual IFSPs. This does not include performing medical assessments, but may include referral for such assessment;</li> <li>• Coordinating services and supports planning with other agencies and providers;</li> <li>• Assisting the child and family directly for the purpose of locating, developing, or obtaining needed services and resources;</li> <li>• Enhancing community integration through increasing the child and family's community access and involvement;</li> <li>• Making collateral contacts to promote implementation of the Individualized Family Service Plan and allow the child/family to participate in activities in the community. A collateral contacts is defined as "Contacts with the child's significant others to promote implementation of the service plan and community participation, including family, non-family, health care entities and others related to the implementation and coordination of services";</li> <li>• Monitoring implementation of the Individualized Family Service Plan through regular contacts with service providers, as well as periodic Early Intervention visits;</li> <li>• Instruction and counseling which guides the family in problem-solving and decision-making and develops a supportive relationship that promotes implementation of the Individualized Family Service Plan. Counseling in this context is defined as problem-solving activities designed to enhance a child's ability to participate in the everyday routines and activities of the family within</li> </ul>

	<p>natural environments where children live, learn, and play;</p> <ul style="list-style-type: none"><li>• Coordinating the child/family's transition from Part C early intervention services; and</li><li>• Contacts (face to face, phone, email) with the family (see requirements above for minimum requirements).</li></ul>
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