Child Development Services Policy **DFC**

**Maine’s IDEA Part C System of Payments**

The Maine Department of Education (DOE) and Child Development Services (CDS), as the Governor appointed local lead agency, is responsible for the development and implementation of the state’s early intervention system for infants and toddlers, birth through two, who have disabilities or developmental delays and their Parents. The Maine DOE and CDS have established Procedures in accordance with Part C of the Individuals with Disabilities Education Act (IDEA). The policies set forth here apply to Child Development Services and all its contracted providers of early intervention services as defined in Part C of IDEA.

Early intervention services provided to eligible infants and toddlers and their Parents shall be financed through multiple funding sources. Sources which may be available to finance individualized services, as appropriate, may include, but are not limited to, the following:

* Title V of the Social Security Act
* Title XIX of the Social Security Act
* Head Start Act
* Part C and Part B of the Individuals with Disabilities Act
* Developmentally Disabled Assistance and Bill of Rights Act
* Public Insurance (such as Medicaid or MaineCare)
* Private Health Insurance
* Long Term Care
* Medical Day Care
* Any medical program administered by the Secretary of the United States Department of Defense
* State appropriation, Early Childhood Intervention Program

**Parent Definition**

For the purposes of this policy, parent means:

1. A biological or adoptive parent of a child;
2. A foster parent;
3. A guardian generally authorized to act as the child’s parent, or authorized to make educational decisions for the child (but not the State if the child is a ward of the State);
4. An individual acting in the place of a biological or adoptive parent (including a grandparent, stepparent, or other relative) with whom the child lives, or an individual who is legally responsible for the child’s welfare; or
5. A surrogate parent who has been appointed in accordance with Sec. 300.519 or section 639(a)(5) of the Act. Except as provided in the paragraph below, the biological or adoptive parent, when attempting to act as the parent under this part and when more than one party is qualified under paragraphs A-D of this section unless the biological or adoptive parent does not have legal authority to make educational decisions for the child.

If a judicial decree or order identifies a specific person or persons under paragraphs A through D of this section to act as the parent of a child or to make educational decisions on behalf of a child, then such person or persons shall be determined to be the parent for purposes of this policy.

**Payor of Last Resort**

Federal and state regulations require that any and all other financial resources be utilized toward the cost of services. CDS Part C funds must not be used to replace other sources of payment, including other governmental agencies. CDS Part C funds are to be used as a payer of last resort.

**Child Development Services has the following responsibilities:**

* Identify and coordinate all available funding resources for early intervention services from federal, state, local and private sources in Maine;
* Update the funding source information if a legislative or policy change occurs;
* Ensure it is the payor of last resort;
* Ensure that all CDS funding policies and procedures conform to federal regulations related to non-substitution of funds, interim payments and reimbursements, and non-reduction of benefits;
* Ensure that funds are permitted, but not required, to be used to pay for costs such as insurance premiums, deductibles, or co-payments;
* Ensure funds are used for activities that are reasonable and necessary for implementing Maine’s early intervention program; and
* Ensure Part C funds used for direct early intervention services for eligible infants and toddlers and their Parents are not otherwise funded through other public or private sources.

**Services Provided at Public Expense**

Early Intervention services which must be provided at public expense, and for which no fees may be charged to parents:

1. Implementing the Child Find requirements of IDEA.
2. Evaluation and assessment and the functions related to evaluation and assessment.
3. Service Coordination services.
4. Assistive Technology Services and Devices
5. Audiology Services
6. Family Training and Counseling
7. Health Services
8. Medical Services (for the purposes of diagnosis or evaluation only)
9. Nursing Services
10. Nutrition Services
11. Occupational Therapy
12. Physical Therapy
13. Psychological Services
14. Social Work Services
15. Special Instruction
16. Speech and Language Therapy
17. Transportation Services
18. Vision Services
19. Administrative and coordination activities related to:
	1. Development, review, and evaluation of IFSPs and interim IFSPs; and
	2. Implementation of the procedural safeguards.

Medicaid or other public funding source will be billed for these services as appropriate and with authorized family consent.

Private insurance will be billed for these services with authorized family consent. If authorized family consent is not provided, insurance will not be billed, and the family will still not be charged for the services listed above, as these services are provided at no cost to all Parents.

**Use of Public Insurance Benefits (such as Medicaid or MaineCare)**

1. Parents eligible for CDS Early Intervention services will not be required to sign-up for or enroll in public insurance as a condition for their child to receive Early Intervention services.
2. CDS will obtain consent of the parents to use their public insurance to pay for Early Intervention services and any time their child’s IFSP services are increased. Public insurance will not be used if access to public insurance will result in any of the following.
	1. A decrease in the available lifetime coverage or any other insured benefit for the child or parent;
	2. The child’s parents paying for services that would otherwise be paid for by the public benefits or insurance program;
	3. Any increase in premiums or cancellation of public benefits or insurance for the child or parents; or
	4. The loss of eligibility for the child’s parents for home and community-based waivers that are based on total health-related costs.
3. CDS will provide written notification to public insurance enrolled Parents for the purpose of informing them that personally identifiable information will be disclosed to public insurance for purposes of billing early intervention services provided to their child.
4. CDS will inform parents that they have the right to withdraw their consent to the disclosure of personally identifiable information for billing purposes at any time.
5. CDS will inform parents of any potential costs that the family may incur as a result of the use of public insurance.
6. CDS will not pay the cost of premiums for public insurance.

**Use of Private Insurance Benefits**

1. CDS will obtain parental consent for:
	1. The use of the family’s private insurance to pay for the initial provision of early intervention services contained on the IFSP; and
	2. The use of private insurance to pay for any increase in frequency, length, duration or intensity of services in the child’s IFSP.
2. The use of private insurance will not be used if its use for Early Intervention services will result in any of the following:
	1. Count towards or result in a loss of benefits due to the annual or lifetime insurance coverage caps, to the parent or the child’s family members who are covered by the policy; or
	2. Negatively affect the availability of insurance to the child, the parent, or the child’s family members who are covered under the insurance policy, and insurance coverage may not be discontinued for these individuals due to the use of the insurance to pay for services; or
	3. Be the basis for increasing insurance premiums of the child, parent, or the child’s family members covered under the insurance policy.
3. CDS will not pay the cost of premiums for private insurance.
4. If a parent or family of an eligible infant or toddler does not provide consent to access their private insurance, the lack of consent may not be used to delay or deny any Early Intervention services to the child or family.

**Procedure for Resolving Disputes**

CDS is responsible for resolving payment disputes for provision of early intervention services. The CDS procedures for complaint resolution should be followed in any interagency payment or service provision dispute. While such a dispute is pending CDS must designate financial responsibility to an agency (financial designee) or to itself as the lead agency, in accordance with payor of last resort provisions. If during dispute resolution it is determined that the assignment of financial responsibility was inappropriately made, the responsibility will be reassigned to the appropriate agency and CDS will make arrangements for reimbursement of any expenditures incurred by the agency (financial designee) originally assigned responsibility. At no point will a dispute regarding the financial responsibility for provision of early intervention services result in a delay or denial of the provisions of early intervention services to a child and family.

The family must be informed of their rights and procedures for accessing dispute resolution options under CDS. The following procedures are available to assist Parents in resolving concerns and disputes:

* Parents are encouraged to first contact their case manager to request, as appropriate, an IFSP meeting to review and consider an IFSP changes or address concerns about services.
* Parents that disagree with any action or decision may:
	+ Submit a request for CDS administrative review to:

Child Development Services State IEU

attn: State Director

146 State House Station

Augusta, Maine 04333

* + Submit a request for Mediation, a Due Process Hearing, or administrative complaint through the Part C procedures to:

Maine Department of Education

attn: Due Process Consultant

 State House Station

Augusta, Maine 04333

Approved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_



**CDS State IEU**

146 State House Station

Augusta, Maine 04333

Phone: (207) 624-6660

Fax: (207) 624-6661

**PARENTAL CONSENT TO SHARE DATA AND SEEK PAYMENT**

**FOR INDIVIDUALIZED FAMILY SERVICE PLAN (IFSP) SERVICES**

**(Form DFC-F4)**

**Section 1: Complete if your child receives Early Intervention**

|  |  |
| --- | --- |
| Child’s Name:       | DOB:       |
| Address:       | City, State, Zip:       |
|  |  |
| Parent’s Name:       | Phone:       |
| Address:       | City, State, Zip:       |
|  |  |
| Parent’s Name:       | Phone:       |
| Address:       | City, State, Zip:       |

***For children who have both MaineCare and private health insurance, please complete both Sections 2 and 3.***

**Section 2: Complete if your child has MaineCare**

Child Development Services (CDS) will bill MaineCare for services your child receives. The type, amount and frequency of services are in your child’s IFSP. CDS needs your signature to share data with the Maine Department of Health and Human Services (DHHS) to bill for these services. The information includes your child’s name, date of birth, member ID number, dates of service and type of service codes. If audited by the Maine DHHS or the U.S. DHHS the data may also include your child’s IFSP, evaluation reports, documentation of service and attendance.

I understand:

* This is a release to share data with DHHS. It starts       and is good as long as my child is eligible for early intervention.
* This consent can be changed or stopped in writing at any time by me.
* The type, amount, and frequency of services are in my child’s IFSP.
* If I ask, I can get copies of all data shared with DHHS.
* I can get a copy of this consent.
* Laws that protect private data sometimes allow the data to be re-disclosed.
* If I do not give information or sign the release, my child’s IFSP services will not change or stop.

MaineCare ID#:       Please include a copy of the front and back of the insurance card.

My signature allows Child Development Services to release information to:

1. Maine DHHS to get paid from MaineCare, and
2. Maine DHHS or U.S. DHHS if there is an audit.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent / Guardian Signature Date

*~ Continued on next page ~*

**Section 3: Complete if your child has Private Health Insurance**

So that we can determine if your private insurance covers your child’s IFSP services, we need information about your private health insurance coverage. CDS will use this information to determine if the private insurance company covers the IFSP services your child receives. If your child is also on MaineCare and your private health insurance does not cover the IFSP services your child is receiving, CDS may bill MaineCare.

|  |
| --- |
| Private Insurance Company Name:       |
| Policy Holder:       | Relationship to Child:       |
| Member ID#:        | Group #:       |

Please include a copy of the front and back of the insurance card.

I understand:

* Child Development Services will use my private health insurance information to determine whether or not my private insurance covers the IFSP services that my child receives.
* If the private insurance does not cover the IFSP services my child receives, CDS can bill MaineCare (see Section 2.)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent / Guardian Signature Date

**Section 4: Complete if you do not want Child Development Services to bill MaineCare or any insurer for your child’s IFSP services.**

Release or Consent Denied: I choose to not let Child Development Services:

* Share information with the Maine Department of Health and Human Services to get paid for covered IFSP services.
* Ask my private health insurer if IFSP services are covered so, if the services are not covered, CDS can bill MaineCare.

I understand:

* By signing below, my child’s IFSP services will not change or stop; and
* I can get a copy of this form when I withdraw consent.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent / Guardian Signature Date