

Early Intervention Financial Resources

The Early ACCESS statewide system includes written policies and procedures for the use of funds which state:

- Evaluation and needed early intervention services provided for children birth to 21 at no cost to families since Iowa is a birth mandate state.
- Available federal and local funds are to be used fund Early ACCESS services and coordination of services (e.g. Medicaid; special education; state allocations; Title V).
- Federal Part C funds are considered as *payer of last resort*, which means they are utilized when all other funding options are exhausted.

Private Insurance

Since evaluation and needed early intervention services are provided at no cost to families, Early ACCESS cannot require payment of services by billing private insurance. Area education agencies currently do not have procedures that ensure families do not incur costs such as deductibles, co-pays, or lifetime limits, therefore service coordinators do not access the family's private insurance to pay for needed early intervention services.

Children at Home Program

The Children at Home program is designed to assist service coordinators and families in securing the services and supports that are necessary to help children remain at home. Additional information on the Children at Home program is available on the [Iowa Family Support Network](#) website.

Infants and Toddlers Medicaid

Area education agencies and Child Health Specialty Clinics participate in Medicaid reimbursement under the Individuals with Disabilities Education Act, Part C for services that include:

- Audiology
 - Audiological Screening
 - Individual Audiological Assessment
 - Audiological Services to an Individual
 - Audiological Services to a Group
 - Contracted Audiological Therapy Services
- Developmental Services (also known as special instruction in Iowa Administrative Rules for Early ACCESS)
 - Screening
 - Assessment
 - Developmental Services to an Individual
 - Developmental Services to a Group
 - Contracted Developmental Services
- Family Training
 - Screening and Assessment
 - Family Training to an Individual Family
 - Family Training to Family Groups
 - Contracted Family Training
- Health and Nursing
 - Screening
 - Individual Assessment
 - Nursing Service to an Individual
 - Direct Nursing Service to a Group

- Consultation
- Nursing Care Procedures
- Interpreter Services
 - Documentation of the Service
 - Qualifications
- Medical Transportation and Escort
- Nutrition Counseling
- Occupational Therapy
 - Occupational Therapy Screening
 - Individual Occupational Therapy Assessment
 - Direct Occupational Therapy Service to an Individual
 - Direct Occupational Therapy in a Group
 - Contracted Occupational Therapy Services
- Physical Therapy
 - Physical Therapy Screening
 - Individual Physical Therapy Assessment
 - Direct Physical Therapy to an Individual
 - Direct Physical Therapy Service in a Group
 - Contracted Physical Therapy Services
- Psychological services
 - Psychological Screening
 - Individual Psychological Assessment
 - Direct Psychological Service to an Individual
 - Direct Psychological Service in a Group
 - Consultative Services
 - Contracted Psychological Services

- Service Coordination (Medicaid refers to this service as targeted case management in its Rules and other documents)
 - See [Medicaid Matrix guiding document](#) for service coordination billable activities.
- Social work services
 - Social Work Screening
 - Social Work Assessment
 - Direct Services to an Individual
 - Direct Services in a Group
 - Contracted Social Work Services
- Speech-language therapy
 - Speech-Language Screening
 - Individual Speech-Language Assessment
 - Speech-Language Services to an Individual
 - Speech-Language Therapy Service in a Group
 - Contracted Speech-Language Services
- Vision services
 - Vision Screening
 - Vision Assessment
 - Services to an Individual or Group
 - Contracted Vision Services
 - Orientation and Mobility Services

See the Department of Human Services guiding document [Iowa Department of Human Services Infants and Toddlers Program Provider Manual](#) for more Medicaid details.

Services Excluded from Reimbursement

The following services shall not be covered by the Infants and Toddlers Medicaid program:

- Administrative functions that are purely Individuals with Disabilities Education Act (IDEA) functions, such as scheduling IFSP team meetings and providing the required prior written notice
- Administrative activities that are required by IDEA but are not needed to assist children in gaining access to needed services. Service coordination can cover services where IDEA and Medicaid overlap
- Administrative activities required by IDEA includes activities such as writing an IFSP, providing required notices to parents, preparing for or conducting IFSP meetings, or scheduling or attending IFSP meetings
- Services that are provided but are not documented in the child's IFSP or linked to a service in the IFSP
- Services provided to anyone other than the eligible child or the child's family on behalf of the eligible child
- Canceled visits or appointments that are not kept
- Sessions that are conducted for family support, education, recreational or custodial purposes, including respite or child care
- Consultation services that are not specific to an eligible child or are not consistent with the IFSP
- Two Medicaid services provide simultaneously
- Child Find activities

Activities that are allowable as Medicaid service coordination include taking the child's history, identifying service needs, and gathering information from other sources to form a comprehensive assessment. See [Medicaid Matrix guiding document](#) for service coordination billable activities.

Medicaid Provider Qualification Requirements

Service coordinators and providers must meet provider qualifications and/or licensure, certification, or endorsement in order to bill Medicaid.

Only qualified professionals (individuals licensed, certified or endorsed by their respective professional licensing boards) can bill Medicaid for audiology, health and nursing, interpreter services, nutrition counseling, occupational therapy, physical therapy, psychological services, social work services, speech-language therapy, and vision services including orientation and mobility.

Qualified professionals (individuals licensed, certified, or endorsed individuals) or paraprofessionals supervised by qualified professionals can bill for developmental services, family training, and service coordination.

In addition, service coordinators must have completed the [Early ACCESS Service Coordination Competency Training](#).

Information about the required licensure for each of the Medicaid services can be found under each service listed in the [Iowa Department of Human Services Infants and Toddlers Program Provider Manual](#).

Infants and Toddlers Medicaid Eligible with an IFSP

In order to seek reimbursement, all Infants and Toddlers Medicaid services must be specific to an Early ACCESS eligible child under age three who is also Medicaid-eligible and has an IFSP.

- An IFSP is required for direct services, based on a multidisciplinary comprehensive evaluation.
- The child's IFSP is the document authorizing services for Medicaid billing.
- The IFSP must indicate measurable outcomes and the type and frequency of service provided.

Medicaid Record and Documentation Requirements

All early intervention providers must maintain child records necessary to fully support the extent of services for a minimum of five years from the date service claim was made.

Documentation for Medicaid billing may be handwritten (if legible), typed, or entered in the IFSP data system and contain the following information:

- The date, time, location, and description of each service provided, including service coordination, and each entry must be signed and dated by the service provider. For service coordinators, document activities designed to locate, refer, obtain and coordinate service as needed by the child.
- The name and professional or paraprofessional designation of the individual providing the service.
- The professional or paraprofessional who provides the session must write notes summarizing the child's status and developmental progress as they relate to the IFSP goals, outcomes, and actions.
- Progress notes or block charting to reflect progress for each service date must be recorded and each entry must be signed and dated by the service provider during that week.
- Copies of the IFSP, including any changes or revisions to the IFSP.

Record-keeping is necessary for IFSP planning, service implementation, monitoring, and coordination. This includes the preparation of: reports, service plan reviews, notes about activities in the service record, and correspondence with the family and collateral contacts.

Consent to Release Information for Medicaid

Prior to billing, the parent or guardian must sign consent for release of personally identifiable information on their child's IFSP to the Iowa Department of Human Services Medicaid program or their contractor. For additional information on parent consent, click [here](#).