



## EARLY INTERVENTION SERVICES

**Policy number: 200907-0001**

**Original effective date: 04/90**

**Revision date: 07/01/10**

### **Overview**

Early Intervention (EI) is a service available to children from birth to three years of age and their families. A child and his/her family may be eligible for EI services if the child:

- Is not reaching age-appropriate milestones in one or more areas of development.
- Is diagnosed with a physical, emotional, or cognitive condition that may result in a developmental delay.
- Is at risk for developmental delay due to various biological and/or environmental factors.

To determine eligibility for EI services, an EI team will conduct an evaluation of the child and family. The evaluation will focus on specific areas of child development, including areas related to cognitive, language, motor, social, emotional, behavioral, and self-help skills. If the child is determined to be eligible for EI services, an Individualized Family Service Plan will be written based on the individual needs of the child and family. Early intervention services are provided by an EI team. Depending on the child's needs, the EI team may include a developmental specialist, physical therapist, occupational therapist, speech-language pathologist, psychologist, social worker, nurse, and/or other specialty provider.

Anyone (a parent, physician, caregiver, teacher, or friend) can refer a child for an EI evaluation. For a listing of early intervention programs serving a particular city or town in Massachusetts, call 1-800-905-8437 or visit [www.massfamilyties.org](http://www.massfamilyties.org). For information about the early intervention programs in other U.S. states and territories, click the following link maintained by the National Early Childhood Technical Assistance Center: <http://www.nectac.org/contact/ptccoord.asp>. (Because this information is subject to change, FCHP cannot ensure the accuracy of this contact list.)

### **Definitions**

#### **Massachusetts Department of Public Health Early Intervention Operational Standards –**

The Massachusetts Department of Public Health is the designated lead agency for Part C of the Individuals with Disabilities Education Act of 2004. Operational Standards are developed based on Part C of Public Law 108-446 34 CFR Part 303 Early Intervention Program for Infants and Toddlers with Disabilities and Massachusetts General Law Chapter 111G. The Operational Standards are available for download at: [http://www.mass.gov/Eeohhs2/docs/dph/com\\_health/early\\_childhood/operational\\_standards.pdf](http://www.mass.gov/Eeohhs2/docs/dph/com_health/early_childhood/operational_standards.pdf).



**Policy**

FCHP covers early intervention services provided by certified early intervention specialists, for children from birth to three years of age and their families.

**Exclusions**

1. Early intervention programs may charge an annual fee based on family size and income. FCHP does not cover the fee assessed to families receiving early intervention services.
2. FCHP does not cover transportation and/or other costs that may be necessary to enable a child and/or the child’s family to receive early intervention services.
3. FCHP does not cover mediation (dispute resolution) services, interpreter services, or parental liaison services.

**Codes**

FCHP requires that claims for early intervention services be submitted with an appropriate modifier identifying the servicing provider type. FCHP reimburses early intervention services at rates set forth by the Department of Public Health in the Commonwealth of Massachusetts.

Codes	Number	Description
HCPCS	H2015	Comprehensive community support services, per 15 minutes
	T1015	Clinic visit/encounter, all-inclusive
	T1023	Screening to determine appropriateness of consideration of an individual for participation in a specified program, project, or treatment protocol, per encounter
	T1024	Evaluation and treatment by an integrated, specialty team contracted to provide coordinated care to multiple or severely handicapped children, per encounter
	T1027	Family training and counseling for child development, per 15 minutes
CPT	96153	Health and behavior assessment, each 15 minutes face-to-face with the patient; group (2 or more patients)

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**Products to Which This Policy Applies**

- ⊕ FCHP Direct & Select Care
- ⊕ Fallon Preferred Care (PPO)
- ⊕ Major Medical
- ∅ Companion Care
- ∅ Commonwealth Care
- ⊕ MassHealth
- ∅ Fallon Senior Plan™
- ∅ Navicare



## References

1. Massachusetts Department of Public Health Early Intervention Operational Standards Revision July 2006. Available at: [http://www.mass.gov/Eeohhs2/docs/dph/com\\_health/early\\_childhood/operational\\_standards.pdf](http://www.mass.gov/Eeohhs2/docs/dph/com_health/early_childhood/operational_standards.pdf).
2. Massachusetts Office of Health and Human Services. MassHealth Provider Manuals. Early Intervention Program Manual.
3. Massachusetts General Laws Chapter 175. Insurance; Section 47C. Dependent Coverage for Newborn Infants or Adoptive Children; Inclusion in Policies of Accident or Sickness, and Chapter 176G. Health Maintenance Organizations, Section 4. Required Coverage for Certain Conditions and Groups.

## Committee review dates:

Benefit Committee: 04/90, 05/90, 09/96, 03/02

Benefit Oversight Committee: 12/02/09, 07/14/10

### **IMPORTANT NOTE:**

**Not all services are covered for all products or employer groups.** This medical policy expresses FCHP's determination of whether certain services or supplies are medically necessary, experimental or investigational or cosmetic. FCHP has reached these conclusions based upon the regulatory status of the technology and a review of clinical studies published in peer-reviewed medical literature. Even though this policy may indicate that a particular service or supply is considered covered, this conclusion is not based upon the terms of your particular benefit plan. Each benefit plan contains its own specific provisions for coverage and exclusions. Not all benefits that are determined to be medically necessary will be covered benefits under the terms of your benefit plan. Members and their providers need to consult the Evidence of Coverage to determine if there are any exclusions or other benefit limitations applicable to this service or supply. If there is a discrepancy between this policy and the plan of benefits, the provisions of the benefits plan will govern. However, applicable state mandates will take precedence with respect to fully insured plans and self-funded non-ERISA (e.g., government, school boards, church) plans. Unless otherwise specifically excluded, Federal mandates will apply to all plans. With respect to Medicare and Medicaid members, this policy will apply unless Medicare and Medicaid policies extend coverage beyond this medical policy.