

Welcome to the
February 28, 2023
AzEIP
Programmatic
Meeting!
We will begin
shortly.

A FEW REMINDERS:

- ❑ Please place your phone on **mute** when you are not talking
 - ❑ Please turn camera on when you are talking, if possible
 - ❑ Please turn camera off when you're not talking
 - ❑ Please do not place this call on hold
 - ❑ Please do not answer a second line during the call as this sometimes creates a disruption
 - ❑ To Mute/Unmute your phone dial ***6 (star 6)**
 - ❑ Please enter questions by clicking on the Activities Icon (circle, square, triangle) Q&A section so we can be sure to answer your questions
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AzEIP Programmatic Meeting

February 28, 2023

- ★ Recordings available in the calendar invite and may also be in your Google Drive under “Shared with Me”.
- ★ This meeting includes interpretations and a deep dive into policy and procedure. Please consult AzEIP Policy and Procedures to ensure your program is implementing local procedures appropriately.
- ★ For guidance on specific situations or families, please contact your program’s assigned CQIC.
- ★ AzEIP Procedures are under continual improvement. Please consult the AzEIP office for the most up-to-date information if you are watching this after the live session.
- ★ This recording will be available to view for up to 6 months after the recording date.



AzEIP Programmatic Meetings

will have a different topic each month that will provide technical assistance around AzEIP Policy and Procedure.


This month's topic will target discuss the topic will be around obtaining the family's consent to use their health insurance.



Why Do We Need To Obtain Consent?

IDEA Part C 303.500: Use of funds, payor of last resort, and system of payments

Each statewide system must include written policies and procedures that meet the requirements of the—

- (1) Use of funds provisions in §303.501; and
 - (2) Payor of last resort provisions in §§303.510 through 303.521 (regarding the identification and coordination of funding resources for, and the provision of, early intervention services under part C of the Act within the State).
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IDEA Part C Sec. 303.520 Policies related to use of public benefits or insurance or private insurance to pay for Part C services

A State may not use the public benefits or insurance of a child or parent to pay for part C services unless the State provides written notification, consistent with §303.520(a)(3), to the child's parents, and the State meets the no-cost protections identified in paragraph (a)(2) of this section.



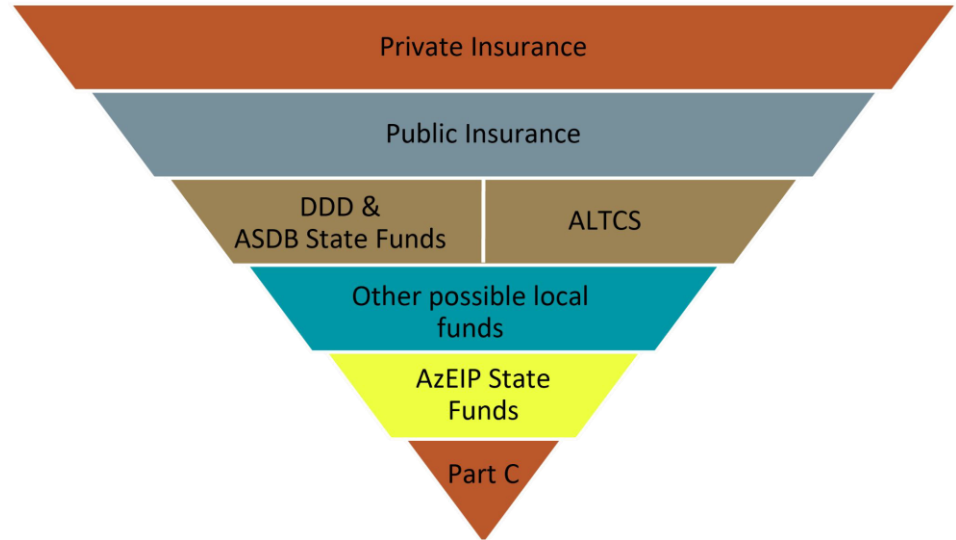
Payor of Last Resort

Consent to Bill Insurance


Families are not required to use public or private insurance, but AzEIP encourages the use of insurance to reduce the burden on state and federal resources.

AzEIP's payor of last resort requirement under IDEA Part C requires that we exhaust other fund sources first, including insurance.

Funding Sources



The Consent to Bill Health Insurance Form is not just about obtaining written consent to use the family's health insurance

- ❑ Obtaining health insurance plan details
 - ❑ Ensuring the family understands:
 - ❑ Their fiscal responsibilities
 - ❑ Declining to use health insurance does not affect AzEIP services
 - ❑ Consent to disclose the family's personally identifiable information to the health plan
 - ❑ Confirmation family has received and understands the Family's Guide to Funding
 - ❑ Consent for AzEIP and DDD to collaborate with public health plan
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Private Insurance

AzEIP service providing agencies must obtain the parent's **written informed consent** to use the parent's or child's private insurance to pay for:

- Evaluation
- The initial provision of early intervention services on the Individualized Family Service Plan (IFSP)
- Each increase in frequency, length, duration, or intensity of an early intervention service on the IFSP.

*Review IDEA Part C Sec 303.420 and 303.520 for more details



Why do I need to complete a Consent to Bill Health Insurance form at initial visit and Initial IFSP????

Initial Visit

- Opportunity for thorough discussion
- DDD Eligibility Application
- Sharing of information with Health Plan

Initial IFSP

- Revisit Decision
 - Date Alignment
 - Avoid Gaps
 - Prevent Reversals
- 



A Family's Guide to Funding Early Intervention Services in Arizona

It is your federal responsibility to


Provide a copy of the Arizona system of payments which means spending time with the family to fully explain the family guide to funding.

The Arizona system of payments is the Family Guide to Funding.

Refer to IDEA Part C 303.520(b)(1)(iii) for more details.




A Family's Guide to Funding Highlights

- FERPA protections
 - Use of all available funding sources
 - System of Payments: no cost protections (other than existing insurance premium)
 - Consent is voluntary
 - AzEIP services will still be provided even if insurance denies
 - Family may contact their insurance company with any questions about their child's coverage
- 



Updated Consent to Bill Health Insurance Form

What is changing on the Consent to Bill Health Insurance Form?

- SC adds their name to top of the form identifying they were responsible for explaining the funding guide to the family
 - Form collects the parent initials to confirm the family understands:
 - SC reviewed A Family's Guide to Funding
 - Information to support the family's decision to use their insurance
 - Parent acknowledgment of their responsibilities
 - Updated wording: I consent or I decline
 - PCP info is included on page with insurance details
 - Added QR code at the bottom of the consent that links to the AzEIP Videos for Families on the AzEIP website.
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High Deductible Health Plans

High Deductible Health Plan (HDHP)

A private health insurance plan that may be offered with a Health Savings Account (HSA) or Health Reimbursement Arrangement (HRA)

Health Savings Account (HSA)

A medical savings account owned and controlled by you as the policy owner allowing you to determine how these funds are spent or saved

Health Reimbursement Arrangement (HRA)

Consists of funds set aside by employers to reimburse employees for qualified medical expenses, just as a health insurance plan will reimburse covered individuals for the cost of services incurred





Conversation Tips for Explaining why it is beneficial for families to Consent



Reminders around Health Insurance

Reminders: Entering Consent Forms into I-TEAMS

- Only complete forms can be entered into I-TEAMS:
 - Family initials (on the new form)
 - Consent decision
 - Parent's signature
- The consent date is the date the form was signed by the parent
- The coverage end date should be left blank*, it is not the date the CBI form expires.
- Review form as you enter it in I-TEAMS
- Every new form is entered into I-TEAMS
 - Within 10 calendar days
 - Even if the insurance or consent decision has not changed

*Coverage end date would be completed if family knows the end date of their insurance or if the SPA has looked the information up.



Fiscal Monitoring Indicators

Fiscal Monitoring Indicator	Compliance Criteria
C1 - % of records reviewed containing a signed and complete Consent to Bill form	Compliant if the Consent to Bill Insurance Form is available, completely filled out, signed and entered accurately.
C2 - % of records reviewed containing Consents to Bill Insurance, indicating parent's receipt of the System of Payments (SoP) policies	Compliant if the Consent to Bill Insurance Form is available and form identifies that the family received the Family Guide to Funding document
C6 - % of records with private/public insurance indicating a new consent was obtained when there was a change in insurance or previous consent expired	Compliant if the Consent to Bill Insurance Form was obtained and signed prior to the Consent Expiration Date of the previous consent on file or within 30 days of the Coverage End Date of the previous consent.
C7 - % of records with public/private insurance indicating the insurance was updated "timely" following consent form signed	Compliant if Consent to Bill Insurance Form was first entered in data system within 10 days of date signed (Primary Insurance Consent Date)
C8 - (Private Insurance Only) % of records reviewed where there is an increase in the provision of services as indicated on the IFSP, and new consent was obtained	Compliant if a new consent to bill insurance was obtained when an IFSP service increase occurred and the child has private insurance

General Compliance Reminders

- The Child Contract Report can be used to determine when CBI forms will be expiring
- SCs should be speaking to families frequently regarding any changes in insurance coverage
- Billing personnel should collaborate with SCs to obtain a new CBI form as soon as possible when notified of termination of coverage by a health plan
- The expectation would be that when there is a change in the family's insurance a new signed CBI Form is obtained within 30 days



Resources we would like to share

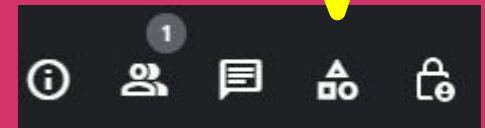
- [AzEIP Family Guide to Funding](#)
 - [Consent to Bill Health Insurance
GCI-1041A](#)
 - [AzEIP Consent to Bill Video](#)
 - [AzEIP Billing Manual](#)
 - [Use of Funds and Payor of Last Resort](#)
 - [ECTA Module 8: System of Payments](#)
 - [IDEA and FERPA Crosswalk](#)
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Reminders from the QI Team:

- Prior Written Notice must be provided **prior** to the activity
- Written consent must be obtained **prior** to beginning a screening, evaluation, assessment or providing services.
- Consents and IFSPs must **include the family's written consent** to be considered **complete/valid**.
- Only **complete/valid** consents and IFSPs should be **entered** into I-TEAMS.
- It is the SPAs responsibility to ensure all consents and IFSPs include the family's written consent **prior** to requesting a transfer.

Question Time!

Please put your questions in the Q&A.



Recording has Ended

- ★ Recordings available in the calendar invite and may also be in your Google Drive under “Shared with Me”.
- ★ This recording will be available to view for up to 6 months after the recording date.

Thank you for attending!

AzEIP Quality Improvement Team

- Erica Melies, AzEIP Quality Improvement Manager
- Tanya Goitia, AzEIP Continuous Quality Improvement Coordinator
- Lidia Gonzales, AzEIP Continuous Quality Improvement Coordinator
- Anissa Albert, AzEIP Technical Assistance Specialist
- Chantelle Curtis, AzEIP Professional Development Coordinator
- Amanda Honeywood, AzEIP Administrative Assistant

Next Meeting Topic: Documenting Contact with Family

Send your questions around the topic to AzEIPQualityImprovement@azdes.gov prior to 3/21/23.

Date/Time: 3/28/23 3pm-4pm

Video call link:

<https://meet.google.com/wkk-oxzv-qfk>

Call In: (US) +1 530-487-5062 PIN: 733 700 198#

