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## Clarification of Birth to 3 and the Individualized Family Service Plan

This is a follow-up to the August 1999 Wisconsin Medicaid Update: Birth to 3 and Natural Environments. This Update will highlight when an Individualized Family Service Plan (IFSP) must be submitted with a prior authorization (PA) request, what information is needed from the IFSP, and when the IFSP need only be referenced (refer to the August 1999 Update for more information on the IFSP). Travel time incurred when providing services in the natural environment is also addressed.

### **Individualized Family Service Plan is needed with *therapy* prior authorization requests for children who *are* Birth to 3 Program participants**

For children in the Birth to 3 Program, Wisconsin Medicaid therapy prior authorization (PA) procedures require either one of the following:

- A current Individualized Family Service Plan (IFSP).
- A reference to a previously submitted IFSP that is still current.

Submitting an IFSP with an occupational, physical, or speech therapy PA request assures that:

- Services are individualized and based on the family's concerns related to their child's development.
- Multiple service providers are integrating their services for each child and family.

- Plans for carryover or follow-through with the child's parents and other caregivers are present in the IFSP.

### **Timely copies of the Individualized Family Service Plan to team members**

According to Birth to 3 Program requirements, the child's and family's IFSP service coordinator is responsible for facilitating the development of the IFSP, based upon team decision and consensus. The service coordinator is expected to assure IFSP development in a timely manner and provide all team members with a full copy of the completed IFSP.

### **Individualized Family Service Plan documentation to be submitted**

A current IFSP needs to be submitted with the therapy PA request. Only the following components of the IFSP need to be included:

- Child's health history and current medical status, including hearing and vision screening.
- Summary of the child's development in the following five areas:
  - √ Cognition.
  - √ Physical development (fine and gross motor skills).
  - √ Communication development.
  - √ Social/emotional development.

√ Adaptive development (including self-help skills).

- Concerns, priorities, and resources as identified by the family and other team members.
- Functional outcomes for each child, including the strategies (this will include the follow-through plans for the child's family) and evaluation criteria.
- Summary of services.

### **Determination of who will need to include the Individualized Family Service Plan with their prior authorization request**

Only one team member needs to submit the IFSP with his or her PA request. Therefore, the team should discuss who will attach the IFSP to their PA request, and the other therapists should then reference this PA number and the date the PA with the attached IFSP was submitted. The team member designated to submit the IFSP should receive an additional copy from the service coordinator.

After the IFSP has been submitted, only the sections of the IFSP that change significantly will need to be submitted with future PA requests. This will typically be the annual update on developmental status, or changes in outcome that may be developed at either six-month or annual reviews.

### **Information does not need to be repeated**

Information does not need to be reiterated on the PA Therapy Attachment (PA/TA) if the IFSP has an appropriate level of detail on the child's:

- Health history.
- Current medical status.
- Developmental status.

Providers can write "see attached IFSP" or "see IFSP submitted with previous PA request (indicate specific previous PA number and date submitted)" on the PA/TA. Individual therapists still need to include additional detail and information if necessary to substantiate the request for therapeutic services.

### **Individualized Family Service Plan not needed for children ages birth to 36 months who *are not* Birth to 3 Program participants**

If no IFSP is referenced or submitted with a PA request, then the provider should indicate on the PA/TA the reasons why the child is not a Birth to 3 Program participant. Some children are not eligible for the Birth to 3 Program. One example would be a child without developmental delays who needs therapy to recover from an accident or injury. Also, families may choose not to participate in the Birth to 3 Program, even if their child is eligible.

Providers are reminded that if they think a child will meet Birth to 3 Program eligibility criteria that child should be referred to the Birth to 3 Program within *two days of identification* (refer to October 1998 *Wisconsin Medicaid Update: Wisconsin Birth to 3 Program* for more information).

### **Travel time**

Travel time incurred to provide services in the natural environment can be included in the calculation of the rate billed to Wisconsin Medicaid as it is considered an overhead cost. Providers who do not include travel in the overhead cost may be able to negotiate separate payment with the county agency for travel time, without it being considered duplicate billing for the same service.

This *Update* applies to fee-for-service Medicaid providers only. If you are a Medicaid HMO network provider, contact your managed care organization for more information about its billing procedures. Wisconsin Medicaid HMOs are required to provide at least the same benefits as those provided under fee-for-service arrangements.

The *Wisconsin Medicaid and BadgerCare Update* is the first source of program policy and billing information for providers.

Although the *Update* refers to Medicaid recipients, all information applies to BadgerCare recipients also.

Wisconsin Medicaid and BadgerCare are administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For questions, call Provider Services at (800) 947-9627 or (608) 221-9883 or visit our Web site at [www.dhfs.state.wi.us/medicaid/](http://www.dhfs.state.wi.us/medicaid/).