



Provider Guide

August, 2021

Thank you for your interest in EarlySteps, Louisiana's Early Intervention System. This document is designed to guide you through the enrollment process and introduce you to your role as an early interventionist-Service Provider or Family Service Coordinator. Please review the guide carefully with your Regional Coordinator. After the review, you and the Regional Coordinator will initial the Provider Checklist verifying that you have read and understand the information contained in this document as well as the rest of the enrollment packet.

What is EarlySteps?

EarlySteps is Louisiana's Early Intervention System for infants and toddlers with disabilities and/or developmental delay ages birth to three and their families. By providing resources and support to families during these early years, EarlySteps hopes to "enhance the development of infants and toddlers with disabilities, to minimize their potential for developmental delay, and to recognize the significant brain development that occurs during a child's first 3 years of life (IDEA, 2004)."

The EarlySteps service delivery system is a team-based interdisciplinary model which consists of the components listed below. This interdisciplinary model refers to providers from multiple professional disciplines that represent specific areas of expertise working together with families to accomplish the IFSP outcomes. Transdisciplinary service delivery is supported in this model in the specific ways that team members interact. This interaction requires that the team members collaborate and provide integrated, routines-based interventions in the child's natural environments.

The *Division of Early Childhood Recommended Practices (2014)* identify Guiding Practice Principles supported in the EarlySteps System:

- Focusing on family practices that promote the active participation of family in decision-making related to their child and lead to a plan which supports families in achieving the goals they hold for their child.
- Using instructional practices that are intentional and systematic and embedded within and across routines, activities, and environments to provide functional learning opportunities which improve child outcomes.
- Working as a team member with other early interventionists and the family to build team capacity, implement interventions, and collaborate across disciplines to address family outcomes.

What is the role of an EarlySteps Provider?

An EarlySteps provider has many diverse roles. However, the primary role is to work collaboratively with the family, child, and IFSP team members so that the child can participate fully in the family and community. EarlySteps incorporates the family's information from the assessment of Concerns, Priorities, and Resources into the IFSP. This identifies the family's priorities and needs regarding their child's development, also called the *family assessment*.

Providers should align family priorities in the decision-making regarding their service delivery with the child and family.

Listed below are some of the typical roles in which a service provider will perform their roles:

- Adhere to all federal and state policies and procedures relative to this program.
- Consult with a family member, service provider, family support coordinator, and/or a representative of a community agency to ensure the attainment of identified outcomes.
- Support a family member/child care worker with different strategies necessary to attain an identified outcome based on their priorities for the child.
- Participate in team meetings including eligibility determination, IFSP reviews and revisions, IFSP development, quarterly meetings, etc. to support the team.
- Complete all required reports including the **Provider Contact Notes** and the **Monthly Progress Report** and submit them timely according to EarlySteps policy.
- Understand and adhere to the “Best Practice Guidelines” as developed by EarlySteps and accurately represent these guidelines in discussions at team meetings.
- Maintain a file for a minimum of five (5) years, which contains documentation of contacts with the family/child.
- Refer any child, who is suspected of having a disability or developmental delay, to the System Point of Entry office (SPOE) in the area where the child resides. A list of the SPOE agencies can be found on the EarlySteps website.
- Participate and fully cooperate with any quality improvement activities required by the State including but not limited to, chart reviews, self-assessments, interviews, corrective action plans, and professional development, etc.
- Verify the Medicaid status of each Medicaid eligible child on a monthly basis.
- Complete required professional development activities supporting your continuous improvement in using the DEC Recommended Practices.

Issues to be considered prior to enrollment

If you are willing to participate in a developmental program and support the mission of early intervention, there are some additional issues to consider before you enroll.

EarlySteps has two enrollment options for service providers. You can enroll as the employee of an agency or as an independent provider. If you are employed by an agency, you will receive the benefits that are offered by the agency. When you enroll independently, you will not receive benefits and will need to purchase your own health and professional liability insurance. You will also be responsible for paying your federal and state income taxes. Payment is made on a “fee-for-service” basis, that is, providers are reimbursed for services provided only. Providers may also enroll as a “group,” in a group/practice arrangement where each provider enrolls independently and links to the group’s number. Payment goes to the group. FSC providers must be employed by a licensed Case Management Agency enrolled to serve infants and toddlers with disabilities.

The Enrollment Process

There are several components to completing a successful completion of the enrollment process in order to be affiliated with the EarlySteps Central Finance Office (CFO), Medicaid, if applicable, and to subsequently begin providing services.

1. Complete the required online Training Modules and other required training within guidelines outlined the Early Steps Practice Manual. The modules are located at <http://www.earlysteps.dhh.louisiana.gov>. Once you have completed them, you will provide the “tests” to the regional coordinator to verify completion and later receive a training certificate for your records.
2. Complete mandatory enrollment meeting with Regional Coordinator to review paperwork and obtain signature on the checklist and other forms.
3. Complete Early Steps Enrollment Forms and provide copies of licenses and supervision letter if necessary.
4. Obtain Child Care Civil Background Check.
5. Obtain a National Provider Identifier (NPI) at <https://nppes.cms.hhs.gov> or by calling 1-800-692-2326. This requirement is only specific to Physical Therapists, Occupational Therapists, Psychologists, Audiologists, and support coordination agencies.
6. Complete a Medicaid *Basic Enrollment Packet* and *EarlySteps Enrollment Packet (Individual)* or *Infants-Toddlers Case Management Packet* available at www.lamedicaid.com. Group enrollment also requires the *Enrollment Packet EarlySteps (Group)* and *Basic Enrollment Packet for Entities/Businesses*.
7. Complete required information on the CFO Service Matrix.

Steps to Enrollment:

1. Complete mandatory enrollment meeting with Regional Coordinator.

The first step in the enrollment process is to meet with your Regional Coordinator, (see *list of regional coordinators in your region* at www.laeikids.com or www.earlysteps.dhh.louisiana.gov, Contact your Regional Coordinator to establish the need to print enrollment forms and bring them to the meeting or if they will be available. Documentation of your attendance will be provided.

2. Complete Early Steps Enrollment Forms

Download the enrollment documents from the website: www.laeikids.com or www.earlysteps.dhh.louisiana.gov and click on Provider Enrollment Forms. It is helpful if the forms must be completed prior to enrollment. Unless the Regional Coordinator has indicated that the forms will be provided at the meeting, you can download these forms prior to the meeting to review and to answer questions. These include:

- ☐ Provider Agreement
- ☐ Durable Medical Equipment Rider
- ☐ Certification Regarding Lobbying, Debarment and Suspension
- ☐ Provider Online Forms: Certification, Online Access Enrollment Form, Electronic Signature
- ☐ Electronic Funds Transfer (EFT) Direct Deposit Authorization/Change Request
- ☐ IRS W-9
- ☐ Child Care Civil Background Check
- ☐ Medicaid Basic Enrollment Packets (Individual and/or Group)*
- ☐ Copy of current applicable professional license, diploma, transcript or its equivalent and update yearly to the CFO.
- ☐ Letter of supervision from a EarlySteps Provider (therapy assistants only)
- ☐ Enrollment Checklist

***NOTE: Service Coordination Agencies must include a copy of the LDH Health Standards license with their enrollment forms.**

3. Complete Child Care Civil Background Check (CCCBC)

Providers must complete required forms for the CCCBC to be completed. The forms include: Request Form with payment information (credit card), a consent form to give EarlySteps access to the CCCBC information, a separate consent form for those who have lived in another state within the past 5 years. In addition, you will upload a copy of your driver's license. You will obtain fingerprints at an approved location within 10 days of receiving a Transaction Control Number via email. Your regional coordinator will provide more details about successfully obtaining the CCCBC.

4. Obtain a National Provider Identifier Number

For the following providers only: physical therapy, occupational therapy, speech language pathology, psychology, audiology, support coordination, the NPI number is required. The NPI may be obtained at <https://nppes.cms.hhs.gov> or by calling 1-800-692-2326. The number is required to complete the Medicaid enrollment packet.

5. Complete the Medicaid Basic Enrollment Packet(s)

The Packets are downloaded from the <http://www.lamedicaid.com> website and consist of several forms which must be mailed to the Medicaid Fiscal Intermediary (Gainwell) at the address given (not to the CFO or to EarlySteps). A Medicaid provider number will be mailed to the provider indicating enrollment is complete. When the number is received by the provider via a notification statement from Gainwell, a copy must then be sent to the CFO to complete enrollment with EarlySteps.

6. Training Modules

EarlySteps has training modules posted to the EarlySteps website which must be completed prior to enrollment. Pre- and Post-tests must be completed and all embedded documents reviewed to complete the course and receive certificates. The Regional Coordinator will monitor your completion of the modules. Failure to complete any required training is grounds for disenrollment from EarlySteps.

7. Service Matrix

After CFO receives all the required enrollment documents and reviews them for accuracy and completeness, the CFO will send a confirmation letter of enrollment within 7 business days. The CFO will provide you with a password and instructions on how to enroll on the Service Matrix and obtain access to the online systems. The Service Matrix is a provider's professional representation to the community, as well as a way to share your contact information and availability. The family will select a provider by utilizing the Service Matrix and reviewing a provider's information.

Providers must review the Service Matrix and complete the following required additional information as well as check email at least weekly for program updates, notices, and system changes:

- Provider availability-On a monthly basis or as changes occur, you must review and update the matrix or you may not appear as an available provider nor will you be offered referrals.
- Zip codes-provide list of service area to be covered by zip code.

- Contact information-Must be current and include phone numbers, email addresses, mailing addresses etc
- Review and attest to Service Agreements annually online

Important: to maintain service availability on the matrix, you must update your matrix page monthly. Providers will not be offered as a choice to families if they do not appear with a current update on the matrix.

Medicaid providers will also establish an account on the www.lamedicaid.com website to check claims and payment information.

8. Online Access to data systems

The CFO will email your online access to LAEIKIDS for viewing authorizations and processing claims and payments and your online access to *EarlySteps Online* for reviewing child data and for viewing and submitting provider team information. The regional coordinator will review the systems with you and an online module is posted to the website for your review.

The Service Delivery and Payment Process

The SPOE enters authorizations for services in the Early Intervention Data System (EIDS). Providers will only begin service delivery after authorizations have been issued through the online web-based system. Authorizations should be checked weekly to assist in managing available service units. Providers are responsible for verifying availability of units throughout the service authorization period and managing them appropriately to meet IFSP requirements.

Online Authorizations

- ***Verify active authorizations prior to providing any services***
 - Print authorizations for hardcopy verification and record maintenance requirements
 - Track start and end dates of each authorization and the number of units
 - Search authorizations
 - Monitor unit utilization

Online Claims Submission for Part C Claims

- View payment information
- Submit claims online
- Search claims
- Review payment status of claims
- Correct billing errors

Medicaid Billing

Providers have several options for Medicaid billing: submission of claims on CMS 1500 paper claim forms, through submission of claims by a billing agent, or submission of claims through purchased software. Claims submitted electronically will be reimbursed more quickly than through paper billing. Information about billing is available at www.lamedicaid.com and at www.laeikids.com. An EarlySteps Medicaid Provider manual is available on the Medicaid website by clicking on Training, 2007 Provider Training, and scrolling to the *EarlySteps Provider Training*

Packet. Medicaid or the fiscal intermediary (Molina) generally provides training to Medicaid providers which would be of interest to EarlySteps Medicaid providers. In addition, joint training is conducted with EarlySteps when changes occur. Once claims have been submitted, the provider is responsible for reviewing the Remittance Advice (RA) at www.lamedicaid.com once an account has been established. The provider must verify Medicaid-eligibility monthly for each authorized child by the 5th of each month. If a provider bills the CFO on a Medicaid eligible child the claim will be denied. If a claim is paid on a Medicaid-eligible child by the CFO and Medicaid eligibility is subsequently determined by the CFO, that payment will be recouped by the CFO from the following month's reimbursement. The provider must then submit a claim to Medicaid for payment for that service. Claims should be submitted at least weekly for timely payment and to meet "timely filing" guidelines. Payments are made by the fiscal intermediary and reimbursed through Electronic Funds Transfer (EFT). Providers are responsible for reconciling Medicaid claims denials and payment problems directly with the Medicaid Fiscal Intermediary, not EarlySteps staff or the CFO.

Claims Payment Schedule

The CFO pay schedule is posted on the EarlySteps website as well as on the CFO website at <https://www.eikids.com/la/matrix/help/>. Billing must be submitted within 60 days of the date of service. If billing is not received within this time frame, the CFO will deny payments because service dates are more than 60 days old. EarlySteps central office will not override these denials. All claims should be submitted weekly and by the submission time schedule to meet the monthly payment date. Claims must be received by the CFO by Monday at midnight for the provider to be paid that month.

Administrative Requirements for EarlySteps Providers

Administrative requirements are outlined in the Early Steps Practice Manual. Providers will sign the *Provider/Payee Agreement* guaranteeing their adherence to these requirements. Each provider will participate in continuous quality improvement activities to verify that the standards required by EarlySteps and Medicaid and expected by families are met. It is a provider's responsibility to be knowledgeable about and implement all standards and requirements *and* to participate fully in EarlySteps and to be aware of changes as they occur.

Additional Information/Resources

- ***The State Performance Plan--*** approved by the US Department of Education, Office for Special Education Programs. The plan establishes the assurance that the state will operate within Federal Regulations and is found on the EarlySteps website at www.earlysteps.dhh.louisiana.gov. The Annual Performance Report is posted annually to provide updates in the state's performance in meeting these requirements.
- ***Practice Manual*** provides information on procedures and policies that pertain to the EarlySteps system found on the EarlySteps website. Providers should become familiar with all of the content in the Practice Manual and specifically Chapters 9 and 10 related to support coordination and service delivery. Chapter 12 includes useful resources for all early interventionists including Fact Sheets for each service which give information on provider roles and recommended practices.
- ***Regional Coordinators*** provide technical assistance related to policy, procedures, and general EarlySteps information. A list of coordinators is on the EarlySteps website.

Continuous Quality Improvement

EarlySteps uses a Continuous Quality Improvement (CQI) process for identifying and maintaining the identified practice components that align with the DEC Recommended Practices. The process is identified in the State Performance Plan and reported annually in its Annual Performance Report

and State Systemic Improvement Plan. EarlySteps Central Office and Regional Coordinators conduct CQI activities to implement the process. These reviews consist of:

- Record audits for completeness and accuracy of documentation
- Data system monitoring of provider service delivery and billing
- Provider self-assessments
- Interviews with families
- Monthly Explanations of Benefits mailed to families
- Complaint Policies and Procedures
- Corrective Action Plans
- Technical Assistance and other professional development activities

All providers participate in a formal chart review process at least once during the current State Performance Plan period (usually a five-year period). In addition, providers may be monitored by Medicaid, LDH Internal Audit, and/or the Legislative auditor. Any findings of noncompliance for any provider will require resolution as outlined and agreed to in the *Provider/Payee Agreement*, the EarlySteps Practice Manual, and the appropriate Medicaid Provider Manual(s).

Thank you again for your interest in EarlySteps. We look forward to working with you. If you have questions, please contact your Regional Coordinator.

EarlySteps:

- ✓ *Improving Child Outcomes*
- ✓ *Supporting Family Priorities*
- ✓ *Teaming for Success*