



# Provider Guide

**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 a Service Provider and Family Service Coordinator. Please review the guide carefully with your Regional Coordinator. After completion of the guide, you will initial the Provider Check List along with the Regional Coordinator stating that you have read and understand the information contained in this document.**

### **What is EarlySteps?**

EarlySteps is Louisiana’s Early Intervention System for children with disabilities and developmental delays ages birth to three and their families. By providing resources and support during these critical years, EarlySteps helps children get off to a great start.

EarlySteps is based on a developmental model of services, where the provider serves as a consultant to assist the parent in enhancing their child’s development during their daily routine. Although services are provided by therapists, early intervention services are different from the medical model of service delivery.

- Services are provided in the child’s natural environment such as the home, daycare, or in a park rather than in a clinic setting.
- The service provider works with the parent/caregiver rather than directly with the child.
- Services are based on the child’s need and are delivered during the daily routines of the family, unlike a medical model of services where services are based on the availability of the therapist to work with the child, generally in a hospital or clinic setting.

### **What is the role of an EarlySteps Provider?**

An EarlySteps service provider can perform many diverse duties. However, their primary role is to serve as a consultant to the family and enable them to enhance the development of their child. The family’s personal goals, concerns, and priorities are outlined on the Individualized Family Service Plan or IFSP. Service providers are responsible for empowering family to meet the goals stated on their IFSP. Listed below are some typical roles that service providers may engage in when participating in EarlySteps:

- Consult with families, service coordinators, other service providers, and representatives of appropriate community agencies to ensure the effective provision of service.
- Participate with multidisciplinary team’s assessment of a child’s family and in the development of strategies and outcomes for the Individualized Family Service Plan (IFSP).
- Attend IFSP meetings.
- Provide Assessment/evaluation (testing).
- Accurately represent the EarlySteps Best Practice Guidelines as an IFSP team member (details in Practice Manual).
- Adhere to all reporting requirements, including completion of a monthly report to the FSC that describes the child’s progress. (Please see practice manual for format)
- Maintain a clinical file with documentation of the service provided.

- Make referrals when a child is suspected to have a disability or developmental delay. (Federal law requires primary referral sources to contact the EarlySteps System Points of Entry (SPOE) within 48 hours. A list of the SPOEs is on the EarlySteps website).
- Complete self- assessments as defined in the Practice Manual.
- Will be measured on specific Performance Indicators.
- Adhere to all Federal and State policies and procedures.

### **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. If you are employed by an agency, you will receive the benefits that are offered by the agency. However, if you are enrolled as an independent, 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. FSC providers must be employed by a licensed Case Management Agency that serves infants and toddlers.

### **The Enrollment Process**

There are several components to completing a successful enrollment process. You must complete the following steps (as applicable) in order to be enrolled with the EarlySteps Central Finance Office and begin providing services.

1. Complete Mandatory Enrollment Meeting with Regional Coordinator
2. Complete EarlySteps Enrollment Forms
3. Obtain Statewide Criminal Background Check
4. Complete Medicaid PE-50 (only for Occupational Therapists, Physical Therapists, Speech Pathologists, Audiologists, and Psychologists)
5. Complete Online Orientation Training Module
6. Complete required information on the Service Matrix

### **Steps to Enrollment:**

#### **1. 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 on the web, click Who To Contact*) who will review the process with you. You will receive documentation of your attendance. Please contact your Regional Coordinator, who will review these forms and to answer any questions.

#### **2. Complete Enrollment Document**

Download the enrollment documents from the website. (Go to [www.oph.dhh.louisiana.gov](http://www.oph.dhh.louisiana.gov) and click on the EarlySteps icon). These forms must be completed prior to enrollment. You will need to download these forms prior to your meeting with the Regional Coordinator to review and to answer questions.

- Provider Agreement
- Service Provider Rider
- Family Service Coordinator Rider
- 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
- ❑ Medicaid Provider Assurance
- ❑ Center Based Assurance Form (center based agencies only)
- ❑ Statewide Criminal Background Check (must be updated every three years, form can be obtained from Regional Coordinator) the state police will process and mail to EarlySteps Central Office (please put your mailing address in the lower right hand corner to ensure receipt of results).
- ❑ Medicaid PE-50 (to be completed by Occupational Therapists, Physical Therapists, Speech Pathologists, Audiologists and Psychologists only, this form can be obtained from the Regional Coordinator). This form must be submitted to the CFO with the enrollment packet, which will be forwarded to the Medicaid office for processing. Once form is processed, Medicaid will assign a number and forward a Letter of Confirmation to EarlySteps Central Office. Central Office will mail the original Medicaid Letter of Confirmation to the CFO and a copy to Provider for confirmation of receipt. **Note: Service Coordination Agencies must include a copy of their Medicaid Letter with their enrollment forms.**
- ❑ Copy of current applicable professional license, diploma or its equivalent (must be updated yearly).
- ❑ Letter of supervision from a EarlySteps Provider (assistants only)
- ❑ Checklist

### **3. Orientation Module**

Providers who enroll after October 1, 2005 are required to complete the Orientation webbased Module prior to enrollment with the CFO. Providers who enroll prior to October 1, 2005, must complete the webbased Orientation Module two weeks after module is online. Providers will receive verification of completion of the Orientation Module to submit to the CFO to continue enrollment process. Additional required training must be completed in compliance with training standard established by DHH/OPH.

### **4. 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 days. The CFO will provide you with a password and instructions on how to enroll on the Service Matrix. The Service Matrix is your professional bio, as well as a way to share your contact information and availability. The family will select a provider by utilizing the Service Matrix.

As a provider you must review the Service Matrix and complete the following required additional information:

- 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.
- Zip codes-You must list where you are willing to travel to provide services.
- Contact information-Must be current and include phone numbers, email addresses, mailing addresses etc.

### **5. How Are Services Authorized and Claims Paid?**

The System Point of Entry (SPOE) enters authorizations for services in the Early Intervention Data System. Providers can view their authorizations and submit claims through the online webbased system. This feature of the EI Kids website, assist providers in managing their claims, communications, business information and authorizations and can be accessed @ [www.laeikids.com](http://www.laeikids.com). This feature includes:

#### **Business Information**

- Authorized users will be able to update information online.  
This information includes:
- Review CFO information online
- Elect to receive information via email
- Review and attest to Program Agreements online

#### **Communications**

- An online 'Bulletin Board' will be available. Pertinent information from the OPH will be posted and available to be reviewed and searched online.
- Emails may be generated and sent from OPH through the web site.

#### **Online Claims**

- View payment information
- Submit claims online
- Search claims

#### **Online Authorizations**

- Print authorizations online
- Search authorizations

#### **Medicaid Billing**

Providers of OT, PT, ST, Audiology & Psychology , will have OPH's agent serve as Submitter to bill for Medicaid Claims. The provider is responsible for reviewing the Remittance Advice (RA) on the Medicaid website @ [www.laeikids.com](http://www.laeikids.com) and verifying status of Medicaid eligible children. We are suggesting that you submit your claims on a weekly basis to ensure timely receipt of OPH reimbursement from Medicaid.

#### **Electronic Funds Transfer**

All providers will be required to sign up for EFT payments instead of receiving checks. The paper Explanation of Payment (EOP) will be discontinued as of November 1, 2005. Providers will be able to access the EOP information on line through the Provider OnLine System. EFTs can only be transferred to checking accounts.

#### **Submission of Claims Schedule**

The revised claims due date schedule is posted on the website @ [www.oph.dhh.louisiana.gov](http://www.oph.dhh.louisiana.gov) . 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. Central office will not override these denials.

### **6. What are the Administrative Requirements for EarlySteps Providers?**

Effective documentation is critical to the early intervention process. It serves as a blueprint for service provision as well as a means for accountability. The terms below indicate which types of documentation are necessary to maintain in order to be provider for EarlySteps.

**A contact progress note** is defined as a document used daily to specify care coordination, interventions, and progress toward functional outcomes for every child, and to review the individual clinical plan. The provider documents every individual service contact.

This is retained in the provider's clinical record for each child and is not sent to the Family Service Coordinator (FSC). EarlySteps has created an optional form that providers can use for this purpose (see Service Provider Contact/Progress Report in practice manual). All providers must maintain progress reports for all children served in the EarlySteps system. All providers should follow Medicaid documentation requirements—whether or not Medicaid covers the service. This documentation is required for audit purposes by various funding sources utilized by the Part C system. If contact was scheduled and did not occur, a progress note should be completed noting the missed contact and the reason.

**The Service Provider Monthly Report** is a form completed by the provider and sent to the FSC on a monthly basis. This form summarizes the progress made on IFSP Outcome(s) that the provider is working on with the family and others. The information requested is a broad view of how the child and/or family are progressing toward an outcome—not a detailed report of progress for each short-term objective. The FSC receives a copy of each monthly progress report by the provider. The FSC reviews these progress reports and works with the family and individual provider(s) should problems arise, or in the event that the IFSP needs an inter-periodic review. The FSC, in his or her clinical file, maintains the original monthly progress report. FSCs should ask the family about progress report on “other services”, but they are not required to track or collect formal reports about these “other” services.

**Parent Signature Requirement** is to document that services were provided. Parent/caregiver must sign service authorization forms as documentation that the service was provided.

## **7. What are the Administrative Requirements for FSCs?**

**Contact Progress Note** is the way that the FSC documents every individual service contact. This is retained in FSC's clinical record for each child.

All FSCs must maintain progress reports for all children served in the EarlySteps system. All FSCs should follow Medicaid documentation requirements—whether or not Medicaid covers the service. This documentation is required for audit purposes by various funding sources utilized by the Part C system. If contact was scheduled and did not occur, a progress note should be completed noting the missed contact and their reason. . EarlySteps has created an optional form that FSCs can use for this purpose.

**Quarterly Report** is the report given to the family summarizing the monthly progress of the child. The FSC is required to send the report to family and SPOE.

**Parent Signature Requirement** is to document that services were provided. Parent/caregiver must sign service authorization forms as documentation for the service provided.

#### **8. Where Can Providers/FSCs Find Additional Information?**

**State Plan** is approved by OSEP. The plan establishes that assurance that the state will operate within Federal Regulations (which can be found on the EarlySteps website @ [www.oph.dhh.louisiana.gov](http://www.oph.dhh.louisiana.gov) and click appropriate icon).

**Practice Manual and Procedural Clarifications** provide information on procedures and policies that pertain to the EarlySteps system, (which can be found on the EarlySteps website @ [www.oph.dhh.louisiana.gov](http://www.oph.dhh.louisiana.gov) and click appropriate icon).

**Regional Coordinators** provide technical assistance as it relates to policy, procedures and general EarlySteps information. A list of coordinators is on the EarlySteps website @ [www.oph.dhh.louisiana.gov](http://www.oph.dhh.louisiana.gov) and click Contact.

#### **9. How are Providers Evaluated?**

**Formal Complaints** are written complaints involving providers, which are received and reviewed by Central Office and investigated by a Quality Assurance Specialist (QAS). Providers may be contacted to provide documentation and /or information.

**Responsive Monitoring** are complaints that are received on various issues, which result in an investigation of the complaint.

**Onsite Monitoring** is a site visit with a provider to review records for adherence to various areas of compliance.

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