Summary of Updates for Illinois Early Intervention Provider Handbook
Last Revised 07/2022

NOTE: There are several clarifications that may not have been noted in this summary. Due to the large amount of changes made, it is recommended that all providers/payees take time to re-read the entire Handbook.

- EI Central Billing Website links were revised throughout handbook
- New Provider Connections website link was also updated throughout handbook
- Also rates for each category of service have been edited to include the increase that went into effect 07/01/19
- This handbook will go into full effect on 07/01/22

Foreword
New language for all providers/payees to become knowledgeable of the contents and explanation of other details within handbook. Also includes contact information for notifying the Bureau of corrections or comments.

Table of Contents
3.4 - Addition of Student Observations and Placements in Early Intervention
Included Attachment 6 for Student Observations and Placements in Early Intervention Guidance and Consents
Revised numbers of Attachments

Chapter 1
- Included link to NAEYC regarding EI Service Delivery
- Revised service description
- Revised Principles of Early Intervention to include approved updates from January 2021 Illinois Interagency Council on Early Intervention meeting

Chapter 2
2.2 Revised Bureau of EI contact information
2.3 Revised language in several of the EI Partner sections including updating Provider Connections new website address
2.5 EI Monitoring Reviews
   - Administrative Directive - Revised last paragraph, 2nd sentence to clarify Monitoring staff’s role in the review of privacy notice
   - Documentation to Support Services Provided and Billed to the CBO – This section has been updated to include additional details of what is necessary in daily documentation and IFSP development time
   - Review of Authorizations – included language regarding occurrences of service frequency
   - Physician’s Prescription – Removed language that referenced all licensed providers and a clarification that regarding alternate timeframes for the need
   - Evaluation/Assessment Reports – Included language related to dating and billing of reports. Also, information added regarding providers must attend the entire IFSP meeting for IFSP discussion and development to be paid, no partial authorizations are to be requested or granted.
   - Associate-Level Provider & Supervision Documentation – Revised to say every 30 days from date of services
   - Private Insurance Refund section added
2.5.8 Included language of items to make available for monitoring reviews
Chapter 3
3.1 Included FERPA to compliance with HIPAA regulations dot-point
3.3 Revised to be consistent for all associate-level providers
3.3.1 Included additional language on IMPACT requirements
3.3.3 Included language about single enrollment inactivations
3.3.5 Removed reference to RSS feed, no longer available
3.3.7 Revised timeline to renew application to 60 days and timeframe for background checks has lessened
3.3.9 Included language regarding license inactivation or suspension
3.3.10 Included language regarding protocol of DCFS investigations of providers
3.4.3 Revised to be consistent for all associate-level providers
3.4.5 Included additional language on IMPACT requirements
3.4.7 Included language about single enrollment inactivations
3.4.9 Revised timeline to renew application to 60 days and timeframe for background checks has lessened
3.4.11 Included language regarding license inactivation or suspension
3.5 Revised to be consistent for all associate-level providers
3.5.2 Included additional language on IMPACT requirements
3.5.4 Included language about single enrollment inactivations
3.5.6 Revised timeline to renew application to 60 days and timeframe for background checks has lessened
3.5.8 Included language regarding license inactivation or suspension
3.6 Revised 3.3.6 regarding enrollment requirements
3.6.2 Included additional language on IMPACT requirements
3.6.4 Included language about single enrollment inactivations
3.6.6 Revised timeline to renew application to 60 days and timeframe for background checks has lessened
3.6.8 Included language regarding license inactivation or suspension
3.7 Revised to be consistent for all associate-level providers
3.7.2 Included additional language on IMPACT requirements
3.7.4 Included language about single enrollment inactivations
3.7.6 Revised timeline to renew application to 60 days and timeframe for background checks has lessened
3.7.8 Included language regarding license inactivation or suspension
3.8 Revised to be consistent for all associate-level providers
3.8.2 Included additional language on IMPACT requirements
3.8.4 Included language about single enrollment inactivations
3.8.6 Revised timeline to renew application to 60 days and timeframe for background checks has lessened
3.8.8 Included language regarding license inactivation or suspension
3.9 Revised to be consistent for all associate-level providers
3.9.2 Included additional language on IMPACT requirements
3.9.4 Included language about single enrollment inactivations
3.9.6 Revised timeline to renew application to 60 days and timeframe for background checks has lessened
3.9.8 Included language regarding license inactivation or suspension
3.10 Revised to be consistent for all associate-level providers
3.10.2 Included additional language on IMPACT requirements
3.10.4 Included language about single enrollment inactivations
3.10.6 Revised timeline to renew application to 60 days and timeframe for background checks has lessened
3.10.8 Included language regarding license inactivation or suspension
3.11 Revised to be consistent for all associate-level providers
3.11.2 Included additional language on IMPACT requirements
3.11.4 Included language about single enrollment inactivations
3.11.6 Revised timeline to renew application to 60 days and timeframe for background checks has lessened
3.11.8 Included language regarding license inactivation or suspension
3.12 Revised to be consistent for all associate-level providers
3.12.2 Included additional language on IMPACT requirements
3.12.4 Included language about single enrollment inactivations
3.12.6 Revised timeline to renew application to 60 days and timeframe for background checks has lessened
3.12.8 Included language regarding license inactivation or suspension
3.13 Revised to be consistent for all associate-level providers
3.13.2 Included additional language on IMPACT requirements
3.13.4 Included language about single enrollment inactivations
3.13.6 Revised timeline to renew application to 60 days and timeframe for background checks has lessened
3.13.8 Included language regarding license inactivation or suspension
3.14 Revised to be consistent for all associate-level providers
3.14.2 Included additional language on IMPACT requirements
3.14.4 Included language about single enrollment inactivations
3.14.6 Revised timeline to renew application to 60 days and timeframe for background checks has lessened
3.14.8 Included language regarding license inactivation or suspension

Chapter 4
Note added to refer families to their Service Coordinator in the event they have questions about their fee or insurance.
4.3 Included language #2
4.4 Included language that providers are to encourage families to look and complete surveys on Family Outcomes

R07/2022
Chapter 5
Throughout chapter, revised Transition Plan to say Transition Steps and Services
5.1 Provided clarification regarding IFSP Outcomes should be gathered from providers/family and
developed by the Service Coordinator
5.3 New Dot Point - Added information on IFSP Requirements
5.5.2 Included language regarding the importance of Child Outcomes
5.6 Dot point 7 - Removed DT from list of individuals able to develop a letter of developmental necessity
5.7 Clarification regarding IFSP development time requires detailed case notes
Included language on who could consult and the purpose
clarified that private insurance verification or recertifications are not billable not Included at bottom
of table in regard to allowable phone consultation is only to be used during Pandemic.
Included language on IFSP development activities
5.8 Included additional team members in EI provider consultation
Included a clarification of what IFSP provider consultation does not look like
Included row and language regarding consultation time with other early childhood partners
Included comment at bottom of chart regarding phone consultation

Chapter 6
6.3 1st dot-point – clarified waiver type
6.4.1 Added time frame for corrected claims
6.4.3 Included language that there is a limit seven (7) rendering service providers to utilize Insurance Billing
Unit

Chapter 7
• Moved policy and procedure for ordering eyeglasses to Chapter 22, Vision. Included reference of where
to find information on eyeglasses.
• Revised language throughout Chapter

Chapter 8
• Included information on Deaf Mentors, removed in error
• 1st page, last paragraph, language revised to provide clarification on how to authorize for DT-H and Aural
Rehab.
• Edited language on NOTE under Billable Activities with Authorizations
• Included procedure codes used for Deaf Mentors at the end of the Chapter
• Included language under billing notes regarding testing procedures
• Included language of what type of authorization will be provided to the Audiologist for a Hearing
Screening/Examination

Chapter 11
Language included that Interpreters are to never be alone in the family’s home, only when accompanied by the
EI Provider
Language included regarding when it is necessary to deliver interpretation services

Chapter 12
• Revised clinics to be clinician
• Included language that the final report from the clinician is to be shared with IFSP team, holding a
meeting with the IFSP team if changes to the IFSP are needed
• Included language information on non-medical professions
• Revised language in Standard Referral Process

Chapter 15
R07/2022
Provided language on evaluation/assessment authorizations
Updated Procedure Codes with added modifier

Chapter 16
Provided language on evaluation/assessment authorizations
Updated Procedure Codes with added modifier

Chapter 17
Included new procedure codes released in 2019

Chapter 19
Revised Note under Qualified staff to point to correct chapters
Revised evaluation/assessment code
Included language regarding licensure requirements

Chapter 20
• Revised language that global evaluations are not acceptable, similar to OT and PT disciplines
• Provided language on evaluation/assessment authorizations within Procedure Codes

Chapter 22
• Removed reference to Chapter 9.1 for eyeglasses procedure – inaccurate reference
• Included policy and procedure on how to order eyeglasses and included more details including contact information and form link for ordering. This information was previously located in the AT Chapter.

Chapter 23
• Included a new definition to identify how to document adjusted age
• Included language to include resubmitted and corrected claim timelines
• Included language regarding Arena Evaluations/Assessments
• Realigned Documentation definition, included revised language to provide minimum requirements, and that document translation should not be billed until after the documents have been delivered to the Service Coordinator
• Included a new definition explaining the requirement of using a tool to provide reports and procedures of how to submit a new tool
• Under Equally-Qualified Providers, included language that the Payee cannot allow same provider to provide services as two disciplines
• Included new definition of Evaluation and Assessment Instruments, Early Intervention Approved that includes that the use of a tool is mandatory, this is not a change but a clarification to prevent confusion
• Included language on Arena Evaluations/Assessments and reporting
• Information on percentages of delay needed in reports.
• Definition of letter of developmental necessity for AT devices added
• Make-Up Sessions definition Included seven (7) calendar days
• Included clarification language to secure electronic email
• Included EI/ES and references for information

Attachments
Attachment 1 - Assistive Technology Letter of Developmental Necessity Guidance and Report Format
Attachment 2 - Revised first paragraph on reporting timelines
  Report Format - Rearranged date, age, in Demographic Information
Attachment 3 - Included definition of Adjusted Age
  • Report Format - Rearranged date, age, in Demographic Information

R07/2022
• Included language on adjusted age
• Included language on billing date
• Included language on individual reports

Attachment 4 - Report Format - Rearranged date, age, in Demographic Information

Attachment 5 - Report Format - Rearranged date, age, in Demographic Information
  Included language that if using multiple tools, at least one of those tools must be on the list of approved evaluation and assessment instruments

Attachment 6 - New – Included Guidance and Consent for Student Observation and Placement in Early Intervention (EI) – adding this attachment shifted all remaining attachments causing the attachments to be different numbers

Attachment 7 - Updated guidance to include new handbook name and edits to Principles

Attachment 8 - IFSP – Revised Section 3, 6, and 7

Attachment 9 - Revised language in regard to Handbook

Attachment 10 – Reformatted chart

Attachment 11 - Included EI/ES Flowchart

Attachment 12 – Revised Comments section placement