Individualized Family Service Plan (IFSP) and Service Authorization (SA)
Information and Frequently Asked Questions

Background Information:
The Individualized Family Service Plan section of NYEIS records the IFSP decisions for an eligible child that will apply for the next six month IFSP period. This includes the child’s level of functioning in all five developmental domains, functional outcomes, any updates for the child/family demographics and service details (e.g., Frequency, Type, Duration, Location, Co-Visits and Make-Up Visits) which are captured on service authorizations (SAs) associated with the IFSP. In accordance with EI regulations, the NYEIS IFSP workflow also allows the EIO/D to approve waivers for services that will potentially break EI billing rules.

The IFSP Demographics sections include: Details, Parental Consent, Outcomes, IFSP Delay Reason, Clinically Appropriate Visits, Natural Environments, Transition, and Late Services. These IFSP sections are completed prior to creation of the Service Authorizations.

As the IFSP/SA workflow proceeds in NYEIS, the status field will indicate where in the process the IFSP or SAs are for users.

General IFSP Questions

Question:
Must detailed data entry be entered in an IFSP in NYEIS?
Response:
NYEIS allows for detailed data entry for the IFSP. Not all fields are required to be completed. There are certain fields marked with an asterisk that require data to be entered; these fields must be completed in NYEIS in order for the IFSP to be submitted. For non-required fields, the municipality has discretion on what they will require to be entered in the NYEIS IFSP, as well as the detail of the data entered.

Question:
How are the initial IFSP effective dates generated?
Response:
For the initial IFSP six month period, the effective start date is calculated as one day after the initial IFSP meeting date and the end date is calculated as six months after the effective start date.

Question:
How is the required parent signature captured on the IFSP in NYEIS?
Response:
The NYEIS IFSP includes a signature page which can be printed and signed by the parent/guardian. Some municipalities and service coordination providers have portable printers and they are able to print the entire IFSP and have the parent and team sign it at the meeting and then scan the signature page and attach it into NYEIS. Other municipalities have elected to use an existing signature page and scan that into NYEIS. The original signed copy must be maintained in the child’s paper file. In addition, when creating the IFSP in NYEIS, there is a field to indicate a signed copy of the IFSP is on file.

Question:
Can a hard copy of a child’s IFSP be attached in NYEIS?
Response:
Yes, a hard copy of the child’s IFSP may be attached in NYEIS using the attachment feature. The attachment link is available from the IFSP Navigation Bar and is used to attach documents that provide additional information related to the child’s IFSP in NYEIS.
Creating an IFSP

Question:
What does the parental consent obtained field indicate?

Response:
Responding “yes” in the parental consent obtained field indicates that the parent has consented to services as indicated on the IFSP. This indicates that the parent is in agreement with the IFSP and with sharing information with all of the IFSP team members. Parental consent must be obtained and indicated in NYEIS before the IFSP can be submitted for approval.

Question:
What does the signed copy of the IFSP on file field indicate?

Response:
Responding “yes” in the signed copy of the IFSP on file field indicates that the parent/guardian signed the IFSP and the original signature page is in the child’s paper file.

Question:
When is an IFSP delay reason required?

Response:
An IFSP delay reason is required when the initial IFSP meeting was held more than 45 days from the child’s date of referral to EI (referral date). Please see Appendix B in the NYEIS User Manual for additional information on use of these delay reasons. The NYEIS User Manual can be located in the NYEIS folder on the Health Commerce System.

Question:
How should the clinically appropriate services per day must not exceed field be completed?

Response:
The value for the clinically appropriate visits per day must not exceed field should be reflective of the discussion at the IFSP meeting and should indicate the maximum visits per day appropriate for the child. For example, it may be appropriate for a child with autism to receive multiple visits per day, whereas it may only be appropriate for a medically frail child to receive one visit per day. If the IFSP team agrees/recommends it is clinically appropriate for the child to receive more than 3 basic and extended visits combined on a single day and this is entered in this field, the EIO/D will still need to approve this during the upfront waiver process.

Question:
Must the family strengths cluster be completed in NYEIS?

Response:
No, however, Early Intervention Program (EIP) regulations state that the IFSP includes, with parental consent, a statement of the family's strengths, priorities and concerns that relate to enhancing the development of the child. The NYEIS IFSP captures that this consent has been obtained and the related family strengths cluster captures the information on the family’s strengths, priorities, and concerns. The information written into this section of the IFSP can be obtained from the family assessment, but may also be obtained from other sources, including a discussion with the service coordinator, EIO/D, or other service provider, either prior to or during the IFSP meeting. The EIO/D should obtain the parent’s verbal consent for inclusion of this information in the IFSP. The parent’s signature on the IFSP then confirms in writing the parent’s agreement with the contents of the IFSP.

Question:
What information should be entered in the transition services cluster?

Response:
The transition services cluster on the child’s IFSP page in NYEIS must be completed for all children at each IFSP meeting. The Transition Services cluster captures details regarding required transition steps and services
for the child and family. Detail must be captured as a result of the IFSP meeting in which transition (either to CPSE or to other programs and services) is discussed with the family. When a new IFSP meeting is held, the date of the transition plan discussion should be entered into the fields of the IFSP in NYEIS. Each IFSP should reflect the date on which transition was discussed as a part of that IFSP meeting. The dates on previous IFSPs should not be changed or updated. The current date should be entered into the new IFSP for that child.

Enter information on any issues under “IFSP Comments” including all circumstances that explain reasons for delay in timely completion of any transition activity. Comments will not be taken into consideration during the calculation of the indicator but should be used for documentation purposes.

Transition should be discussed at all IFSP reviews/meetings and documented in the transition section of the IFSP in NYEIS. Additionally, all discussions regarding transition should also be documented in the service coordinator’s log notes.

**Question:**
Does capturing the transition plan information in the transition services cluster satisfy the transition plan requirements for the child?

**Response:**
No, the child’s transition plan information must be captured using the transitions link on the child’s integrated case homepage to indicate if the child will transition to CPSE or to other services.

**Question:**
Does completing the transfer cluster on the IFSP initiate the child’s transfer to another municipality?

**Response:**
No, completing the transfer cluster on the IFSP does not initiate the child’s transfer to another municipality. If it is known at the time of the IFSP that the child may transfer to another municipality, the details should be captured in this cluster. In addition, if a transfer will take place during an IFSP period, the IFSP should be amended to complete this cluster. To initiate a transfer for a child to another municipality, an authorized user can access the transfer link from the child’s integrated case homepage.

**Question:**
When must the late services cluster be completed when creating an IFSP?

**Response:**
The late services cluster of the IFSP must be completed when the IFSP team knows in advance if some or all services will be delayed beyond 30 days after the start date of the IFSP period. Please see Appendix D in the NYEIS User Manual for a listing of late reasons. In addition, if an individual service is delayed unexpectedly greater than 30 days from the authorizing IFSP, a task is generated to the provider’s service authorizations work queue to supply a late reason.

**Important Note:**
If a service begins more than 30 days from the date of the IFSP meeting, a task is sent to the provider in NYEIS to record the delay reason documenting why the service began late.

- The task to the provider to identify a delay reason for the start of services is not generated in NYEIS until the provider claims against the service authorization for the first service delivered to the child/family.
- It is important that provider claims be submitted in NYEIS chronologically, so that a late start of service is not incorrectly identified by the system.
- In the event that a provider is not a NYEIS user this task would be rerouted to the EIO/D.
- The reason entered by the provider for the late start of services is then stored on the service authorization in NYEIS.
It is strongly recommended that the municipality provide direction to providers regarding the importance of accurately and promptly completing this task in NYEIS to document the reason(s) for late start of services, as this data will be considered in future years as part of the municipality's local determination. The service coordinator should also fully document in their service coordination notes all circumstances that affect the timely start of services.

Creating Service Authorizations

Service authorizations are associated with and made part of an IFSP. In order for an IFSP to contain information about the services the child/family will receive, associated service authorizations must be created with the child’s relevant IFSP.

SAs can be created for the following seven categories:
- General Service (e.g., OT, PT, Special Instruction) - including basic, extended and facility-based
- ATD (Assistive Technology Device)
- Respite
- Service Coordination
- Supplemental Evaluation (physician or non-physician)
- Transportation

Question:
Must you select the qualified personnel that will deliver the service at the time of service authorization creation?
Response:
No, you do not have to select the qualified personnel that will deliver the service at the time of service authorization creation. However, you may select any or all of the qualified personnel if the type of qualified personnel is known. Appropriate personnel can also be added after the SA is created, but will require an amendment to the SA.

Question:
When creating a SA must a location type be entered to indicate where the service will take place?
Response:
Yes, a location type must be entered to indicate where the service will take place. If the service will take place in a location other than the child’s home or a provider location, an address must be entered.

Question:
When creating a SA do I need to enter information on the service intervention methodology that will be used?
Response:
No, entering a service intervention methodology is not required. However, this information should be captured especially if the service will be delivered using ABA by qualified personnel.

Question:
Whose responsibility is it to select the provider of record?
Response:
Amendments to Public Health Law effective 4/1/2013 require service coordinators to implement the IFSP which includes arranging for providers to deliver EIP services. Therefore, it is the responsibility of service coordinators to select the provider of record.
**Question:**
When creating a SA do I need to enter a provider of record?

**Response:**
No, you do not need to enter a provider of record when creating a service authorization, unless you know who the provider will be. A service authorization may be submitted to the EIO/D without the service provider being identified. Once approved by the EIO/D, the SA will have a status of awaiting provider/vendor assignment until a provider is added, which will require an amendment.

**Question:**
When creating a SA how should prescriptions be documented?

**Response:**
If the script/order has been received at the time of service authorization creation, the script/order information should be captured on the SA. If the script/order has not been obtained at the time the SA is created, the information should be entered when it is received. The information is recorded by creating an SA amendment and selecting the Data Entry Error reason. This action will create a task for the EIO/D to review and approve the amendment, and informs the EIO/D that the script has been received.

**Important Information:**
The script/order must be kept on file in the child’s paper record and can be attached to the child’s record in NYEIS using the attachment feature. The script/order must match the services as listed on the IFSP and must cover the IFSP dates of service.

**Question:**
When creating a SA how should the number of “visits per” specific service be entered?

**Response:**
The IFSP should be individualized to reflect the needs, priorities, and concerns of the child and family. It should include specifics about the number of service visits per day, week, month, or IFSP period that are agreed to by the IFSP team. The specific number of visits authorized must be entered on the SA.

**Question:**
When creating a SA must the number of “minutes per visit” be indicated on the SA?

**Response:**
Yes. The requirement to define the length of the session in minutes on the IFSP is a regulatory requirement; therefore, it is also a requirement in NYEIS. The number of minutes per visit should reflect what was decided by the IFSP team at the meeting and the specific minutes per visit must be entered on the SA.

**Question:**
When creating a SA what should be entered in the visits per day clinically appropriate for the SA must not exceed field?

**Response:**
The number of early intervention service visits of the same service type that can be provided in one day to one child/family must be based on the individual needs of the child/family, and include consideration of the number of visits per day the child/family can tolerate. Please refer to Early Intervention Program (EIP) regulations which provide clarification on the service limits/billing rules, and the EIO/D’s authority to approve waivers if the IFSP team determines that additional visits are appropriate. NYEIS provides information regarding the approval of visits/services, including any visits that violate billing rules. Please see Appendix J in the NYEIS User Manual for more information on billing rule violations.
**Question:**
When creating a SA what should be entered in the **child shall receive no more than “X” number of all types of services in one day** field?

**Response:**
The **child shall receive no more than “X” number of all types of service in one day** field is pre-populated from data entered in the demographic section of the IFSP homepage.

**Co-Visits**
Co-visits are periodic sessions provided by two or more qualified personnel providing services to a child/family at the same time, for a defined purpose. The focus and purpose of a co-visit includes: providing for co-treatment of a child during a single intervention session; enabling professionals to collaborate in providing education, training, and instruction to the parent/designated caregiver; and enabling professionals and parents/designated caregivers to work together to assess child progress and problem-solve on emerging issues related to child and family need. There must be EIO/D approval and documentation in the IFSP as to why a co-visit may be deemed by the IFSP team to be necessary and appropriate for a child.

**Question:**
How should co-visits be authorized in NYEIS?

**Response:**
Each provider involved in a co-visit must have a service authorization for the service they will provide and the service authorization must also indicate that co-visits are permitted. If it is agreed upon that during the course of the first six months of the IFSP, the child and family should receive one home- and community-based visit each week from a physical therapist and one from a speech-language pathologist, and a monthly co-visit by the two professionals for the purpose of co-treatment, the IFSP must authorize each service for each professional, and indicate the number of home- and community-based visits that will be delivered in collaboration with the other professional. For all co-visits, the SA must indicate the frequency agreed upon for co-visits (total number of co-visits during the time period covered by the IFSP and whether these co-visits will occur weekly, monthly, or other specified periodicity), each professional involved in the co-visit, and the location of the co-visit.

**Question:**
If co-visits are not authorized will NYEIS allow for two providers to have an overlap in visit times?

**Response:**
A brief overlap (up to nine minutes) with two providers is not considered a co-visit and NYEIS will not reject billing. It is considered part of the municipality’s oversight role to determine the degree of overlap time that is felt to be acceptable without the authorization of a co-visit. If co-visits are not authorized on the SA in NYEIS and an overlap of more than nine minutes occurs, the claim(s) will be denied.

**Make-Up Visits**
Since early intervention services are individualized for children and families, there will be instances when services are missed due to illness or unavailability of the child, family member, or provider staff. EIP regulations state that missed visits may be rescheduled and delivered to the child and family by the provider, as clinically appropriate, agreed upon by the parent and in conformance with the child's and family's IFSP. Make-up visits must be discussed with the IFSP team. Information to be discussed and deliberated includes therapist and family vacations and illnesses. The number of make-up visits allowed and when they will be delivered must also be discussed. The IFSP should be individualized to reflect the needs, priorities and concerns of the child and family. Therefore, municipalities should have a make-up policy which will guide the discussion at the IFSP meeting and the operational aspects of making up a visit when necessary and appropriate. The make-up policy needs to also include information about completing make-up visits within the IFSP authorization time frame.
Question:
How should make-up visits be authorized in NYEIS?

Response:
When creating a service authorization in NYEIS, the IFSP team must agree on a maximum number of make-up sessions that will be allowed and whether the maximum applies per week, per month, or per IFSP period. When an IFSP is constructed in this manner, all participants are aware of the service details and how to proceed in the event occasional services are missed. If the number of make-up visits authorized on the SA is exceeded by the provider or the make-up visit is provided outside of the authorized dates, NYEIS will not allow the provider to bill for those make-up sessions.

Question:
Will provider claims be denied if an authorized make-up visit is provided and breaks one of the EI billing rules?

Response:
As long as the provider indicates at the time of invoicing that the claim is for a make-up visit, NYEIS will allow the claim to pass the billing rules.

Important Information:
If the physician orders a specific number of visits per week (i.e. 2 PT sessions per week), professionals must follow the script/order and should not provide additional visits during the week.

Submitting an IFSP
Question:
Once an IFSP has been submitted where does it go?

Response:
If a service coordinator submits an IFSP, a task to review the submitted IFSP is generated and sent to the child’s EIO/D’s assigned tasks. If an EIO/D submits an IFSP, the IFSP is automatically approved.

Reviewing an IFSP
Question:
Who is responsible for reviewing a submitted IFSP?

Response:
It is the responsibility of the EIO/D to ensure that all required regulatory components of an IFSP are documented and that all service authorizations have been entered accurately and is a direct reflection of the IFSP discussion and agreed upon services. The IFSP must be reviewed thoroughly before it is approved.

Question:
Can the EIO/D make changes to an IFSP they are reviewing?

Response:
Yes, if the EIO/D identifies information that needs to be corrected, they can make the necessary changes prior to approval of the IFSP. The IFSP must be reviewed thoroughly before it is approved.

Question:
Do “upfront waivers” need to be managed before approving an IFSP?

Response:
Yes. Prior to approving an IFSP and SAs, the EIO/D will select the “check upfront waiver rules” link in the IFSP manage cluster. This will advise the EIO/D, which EI billing rules could potentially be violated, excluding co-visits or make-up visits. After viewing the potential billing rule violations for each service, the EIO/D can issue a waiver for the affected service by clicking on approve or can decline issuing a waiver by clicking on
If the waiver is issued (approved), the claim for this service will bypass certain NYEIS edits that check the claim against the appropriate EI billing rule(s).

**Important Information:**
Early Intervention regulations contain billing rules that restrict payment for early intervention services based on the quantity of services delivered to a child on a given day. Some eligible EI children with complex needs may require a combination of services that exceed amounts allowed under these EI billing rules. The EIO/D will issue necessary waivers using NYEIS during creation and approval of an IFSP and its associated service authorizations.

**Question:**
What happens when an IFSP is approved?

**Response:**
Service authorizations that were created on the approved IFSP are sent to the provider of record to accept/reject.

**Question:**
What happens if a provider rejects a service authorization?

**Response:**
If a provider rejects a service authorization, the EIO/D will receive an assigned task to re-assign the service authorization to another provider. The EIO/D can re-assign the provider for the service authorization and a task to accept/reject the SA will be sent to the newly assigned provider. The EIO/D may choose to delegate the responsibility of re-assigning a provider to the service coordinator by forwarding them the task. A user with appropriate access rights may view the SA to find out if the assignment was accepted by the provider.

**Question:**
When does an IFSP become active?

**Response:**
After the EIO/D approves the IFSP, it must be activated in order for the IFSP to be available to all NYEIS users. NYEIS allows for all IFSPs in the approved status to automatically be activated overnight. However, there may be instances where an EIO/D may have an exceptional need to activate an IFSP immediately, prior to the automatic nightly batch process. Should this need arise, the EIO/D can click the “activate online” link and the IFSP status will change to active immediately.

**Important Information:**
Activation of the IFSP allows the service coordinator to access the child’s case via “my cases. An IFSP cannot be activated if any of the service authorizations are in “awaiting provider assignment” status. Therefore, until the IFSP is active, the service coordinator will have to access the child’s case by completing a child search.

**IFSP Amendments**
IFSP data can only be edited (a change is made to the data entered) prior to the IFSP being submitted for approval. After an IFSP has been submitted for approval, changes that are related to data entry errors or that require a change to a service authorization (e.g., frequency, duration, new provider of record, etc.) or demographic portion of the IFSP, must be made by initiating an amendment to the IFSP.

If a change is required, the service coordinator needs to initiate an IFSP amendment which subsequently creates a task for the EIO/D to review and approve the amendment. If the EIO/D submits an amendment, the amendment will automatically be approved.
Amendments can be created for the IFSP demographic section (Details, Parental Consent, Outcomes, IFSP Delay Reason, Clinically Appropriate Visits, Natural Environments, Transition, and Late Services) or for service authorizations (services). IFSP amendments can be used in one of two ways; to truly change the terms to the IFSP or to correct data entry errors. The user will select either Amendment for a true change to the terms of the IFSP or Data Entry Error if the user is correcting data errors.

**Important Information:**
Child data cannot be edited through the IFSP amendment process. The ability to change child information on the child homepage is limited to certain user roles in NYEIS. If a user is not authorized to edit child information, they must submit a demographic data change request. The link to create the request is located on the navigation bar on the child’s homepage.

**Question:**
When is it appropriate to select “data entry error” as the reason for modification to the demographic portion of the IFSP?

**Response:**
It is appropriate to select “data entry error” as the reason for modification when you need to correct a true data entry error to the demographic portion of the IFSP. For example, a misspelling or mistake in the one of the IFSP clusters.

**Question:**
When is it appropriate to select “IFSP Amendment” for the modification reason to the demographic portion of the IFSP?

**Response:**
It is appropriate to select “IFSP amendment” as the reason for modification when the user needs to change the content of the IFSP demographic portion of the IFSP. For example, the child is making progress and the outcomes in the IFSP need to be modified to reflect the progress.

**Question:**
When is it appropriate to complete a “data entry error” amendment to an existing service authorization?

**Response:**
It is appropriate to complete a “data entry error” amendment to an existing service authorization to correct a true data entry error, such as the frequency or duration of the services were entered incorrectly when creating the service authorization or to add script information.

**Question:**
When is it appropriate to complete an “IFSP amendment” to an existing service authorization?

**Response:**
It is appropriate to complete an “IFSP amendment” to an existing service authorization when adding or changing SA information (such as frequency or duration) after a claim on the SA has been submitted and approved.

**Question:**
When amending a service authorization what are the reasons for modification?

**Response:**
1. Amendment to Add Service Authorization – do not select. To add a SA click on the add SA link from the manage cluster on the IFSP.
2. Data Entry Error – select when adding or changing Script Information, Service Details, Frequency and Duration Details, Make-Up Visits, Co-Visits, Respite Details, ATD Details, Delivery Details, Evaluation Details, and Transportation Details.

3. Provider / Vendor Modification – **do not select**. This reason is automatically assigned by the system when the user changes the Provider of Record on the Service Authorization homepage.

Service Authorization Amendment – always select when adding or changing SA information **after a claim on the SA has been submitted and approved**.

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<td>When the EIO/D is reviewing and approving an amendment with a reason of “Data Entry Error” and NYEIS determines that the change will actually require to be processed as a “Service Authorization Amendment”, NYEIS will automatically change the modification reason to “Service Authorization Amendment” when the EIO/D approves the request.</td>
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**Question:**
What occurs when a service authorization amendment is approved and the modification type is “service authorization amendment”?

**Response:**
If approved, and the modification type is Service Authorization Amendment, the current service authorization will be closed and a new service authorization with the changes will be created with an effective date entered by the EIO/D. The new service authorization can be viewed by clicking the IFSP homepage and navigating to the service authorizations list.

**Question:**
What happens when a service authorization amendment is approved and the modification reason is “data entry error”?

**Response:**
If approved, and the modification type is Data Entry Error, the changes will be made to the current service authorization. The Service Authorization status is changed to approved.

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<td>Amending an approved IFSP service authorization or adding a SA may cause new potential billing rule violations, which will need to be managed. NYEIS does not generate a notification of these new potential billing rule violations. After approving an amendment or the addition of a SA to an approved IFSP, a cluster labeled IFSP notification(s) will appear on the IFSP homepage. If waivers need to be managed, the EIO/D must go to the waivers link from the manage cluster on the IFSP homepage and manage each potential billing rule violation.</td>
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**Question:**
How do I change the provider of record on a service authorization?

**Response:**
To change the provider of record on a service authorization service coordinators can navigate to the service authorization homepage and click on the change/assign provider and location button.

**Question:**
How do I change the rendering provider on a service authorization?

**Response:**
To change the rendering provider on a service authorization, authorized users can navigate to the service authorization homepage and click on the change/assign rendering provider button.
Important Information:
When the rendering provider is changed on a service authorization the service authorization does not maintain a history of the previous provider, however, the rendering provider will be captured on submitted claims.

Question:
How do I amend a service coordination service authorization to increase the units?
Response:
Select edit on the SA and select "Service Authorization Amendment" as the reason for modification. Enter the new start date as the first date additional units are needed and enter the amount of additional units needed in the “units” field. It is also recommended that SCs use the comments field to indicate the date that additional units were needed and the reason they are requesting additional units. Once saved, a task will go to the child's EIO/D who will be able to see the requested start date that was entered as well as any comments. The EIO/D must enter an effective date which should match the new start date entered by the SC. Once the EIO/D approves the amendment, the original SC SA will be closed as of the day before the effective date of the amendment and a new SC SA will be created with the requested additional units needed from the effective date forward. This is the correct way to add units to a SC SA in order to ensure that there are not overlapping SC SAs.

Question:
When adding a new service SA as an amendment why is the SA not listed on the service authorization list on the IFSP?
Response:
When adding a new SA, the SA may not be listed on the SA list on the IFSP when it is in submitted status. The status of the IFSP will be “EIO/D review required” and the user may view the IFSP history in terms of initial submission and subsequent amendments by clicking the events link from the IFSP navigation bar and clicking the view list button. The events page lists each event associated with the selected IFSP, including the date that the IFSP is first approved and activated, and all subsequent amendments.

Question:
Why is there a service authorization in submitted status when the IFSP has a status of approved?
Response:
If an amendment to a service authorization has the potential to violate billing rules, although the EIO/D approves the amendment making the IFSP approved, the service authorization will remain in submitted status until the EIO/D manages the potential billing rule violations. This situation is indicated by the presence of the IFSP notifications cluster indicating the IFSP has unmanaged billing violations and a SA with a status of submitted. Once the EIO/D manages the potential billing rule violations from the waivers link, the SA will have a status of approved and the IFSP notifications cluster will no longer be present.

Extending an IFSP
IFSP meetings should be scheduled prior to the end date of the current IFSP period. If this is not possible, the EIO/D and parent may agree to extend the current IFSP period, with no changes so services can continue without interruption. An extension can occur only on an active IFSP or when the IFSP is in its grace period. An active IFSP and associated SAs may be extended for up to 30 days at a time. When the IFSP is extended, the visits are updated proportionally for that extension period and all associated service authorizations are automatically extended.
**Question:**
If an IFSP has been extended should the current IFSP be closed as of the IFSP meeting date?

**Response:**
In circumstances where the parent and EIO/D have agreed to an IFSP extension it is recommended that the current IFSP remain active for the duration of the extension. The subsequent IFSP will be have a reduced time frame based on the extension.

**Extending an IFSP for a Child Transitioning**
In NYEIS, an IFSP will only be effective until the day before the child’s third birthday. If the child is determined to be eligible for services through the CPSE and will remain in the EIP past their 3rd birthday, the IFSP can be extended through what would be the current IFSP period end date and/or until the child’s last EI eligible date if within 60 days of the IFSP end date with parental consent. However, the user must first record the CPSE eligibility in the transition section, in order for NYEIS to allow the extension of the IFSP. As always, if additional concerns for the child’s development either arise or are resolved during this time period, an IFSP review can be scheduled at any time to consider amending the IFSP.

**Question:**
Will NYEIS allow an IFSP to be extended past the day before a child’s third birthday without CPSE eligibility being documented?

**Response:**
No. When a child’s third birthday falls within an IFSP period, NYEIS automatically populates the end date of the IFSP and all associated SAs as the day before the child’s third birthday. NYEIS will not allow the IFSP/SAs to be extended beyond this date until the child’s eligibility for CPSE has been documented on the transition page in NYEIS.

**Question:**
Once the child’s eligibility for CPSE has been documented on the transition page in NYEIS, how is the IFSP extended?

**Response:**
Once the child’s eligibility for CPSE has been documented in NYEIS, the IFSP may be extended by selecting the “extend” link in the manage cluster of the IFSP. NYEIS automatically extends the IFSP in 30 day increments. As the end of each 30 day extension nears, the IFSP may continue to be extended until what would have been at least the end of the original 6 month IFSP period. Since NYEIS extends only by 30 day increments, an extension may pass the end date of a six month IFSP period. In this instance the municipality may (with parental agreement) continue with the IFSP until the populated extension end date, or close the IFSP at the appropriate end date of the 6 month IFSP period and create a new IFSP to start the next IFSP type.

**Question:**
If a child’s last EI eligible date is close to the original 6 month end date of an IFSP, can the IFSP continue to be extended to the child’s last eligible date?

**Response:**
Yes. If the child’s last EI eligible date is within 60 days of what would have been the original IFSP end date, the IFSP may be extended to the child’s last eligible date. NYEIS will only allow an extension to the child’s last eligible date.

**Cloning an IFSP**
Cloning allows the user to create a copy of an IFSP. The cloned IFSP will have a start date set to the day after the end date of the IFSP that is being cloned. Each service authorization that is cloned gets the start and end date of the new IFSP, but may be edited if appropriate. Cloning an IFSP brings all data from the previous IFSP in the cloned IFSP. Every field within the cloned IFSP needs to be reviewed and discussed with the IFSP team to
ensure the information continues to be accurate. The user can change information in the cloned IFSP as appropriate for the next IFSP period.

**Important Note:**
Do not clone an IFSP when receiving a transferred case. You must create a new IFSP by clicking on the “new” button located on the IFSP link on the child’s integrated case homepage. This will ensure that the correct “type” of IFSP with the correct dates is generated. NYEIS will maintain the six month cycle based on the previous IFSP of the same type in the transferring county. Thus, the IFSP will not be created for an entire six month time period. The system will automatically set the IFSP end date to the last active IFSP’s original end date thus, maintaining the appropriate six month cycle. If appropriate, you may copy and paste information from the previous IFSP into the new IFSP you are creating.

**Question:**
When is it appropriate to clone an IFSP?
**Response:**
It is appropriate to clone an IFSP to prepare for an upcoming IFSP meeting, thus decreasing the amount of data entry required to complete the IFSP in NYEIS by the user.

**Question:**
Can an interim IFSP be cloned?
**Response:**
No, an interim IFSP may **not** be cloned. If appropriate, you may copy and paste information from the previous IFSP into the new IFSP you are creating. An interim IFSP may be extended if necessary.

**Backend Waivers**
A waiver is needed if a claim is submitted and it violates a billing rule for which an upfront waiver has been denied and requires the submission of a justification from the provider. A claim can violate one or more billing rules for which an upfront waiver has been denied and the claim appears as pending. For each claim in pending status, a task is created for the provider in the financials workqueue to provide a justification for each of the billing violations for which an upfront waiver has been denied on the claim.

**IFSP Status**
As the IFSP/SA workflow proceeds in NYEIS, the status field will indicate where in the process the IFSP or SAs are for users.

**Question:**
What are the different statuses an IFSP may be assigned?
**Response:**
The status of an IFSP may be any of the following: Draft, Submitted, Approved, Active, Extended, EIO/D Review Required, Pending Closure and Closed.

- **Draft Status** is assigned when the IFSP has been created and data entry is still in process. The IFSP has not been submitted to the EIO/D for review.
- **Submitted Status** is assigned when the IFSP has been submitted to the EIO/D for review and approval.
- **Approved Status** is assigned when the IFSP has been reviewed by the EIO/D and has been approved. Service authorizations with a provider of record assigned are sent to the provider to accept/reject.
- **Active status** is assigned when the approved IFSP has reached its start date and has gone through the overnight batch process to become active. Once the IFSP is active, the service coordinator will see the child in their “my cases” list.
Extended Status is assigned when the IFSP end date is extended 30 days from the end date of the original IFSP. When an IFSP is extended, the visits are updated proportionally for that extension period and all associated service authorizations are automatically extended.

EIO/D Review Required Status is assigned when a service coordinator has submitted an IFSP or service authorization amendment. The EIO/D needs to review the IFSP or amendment and approve them.

Pending Closure Status is assigned when the associated IFSP has been closed as of a future date.

Closed Status is assigned when the current date is 10 days past the displayed IFSP end date.

IFSP Reviews

Question:
When creating an IFSP review do the IFSP dates need to remain in six month cycles?

Response:
Yes, the IFSP dates must remain on a six month cycle whenever possible. SAs associated with an IFSP may have different date ranges within the IFSP period. For example, a service authorization may not have the same start and end date as the IFSP.

Question:
When creating an IFSP review should the current IFSP be closed when the IFSP review meeting is held?

Response:
No, it is important for IFSP dates to stay on the original six month review cycles whenever possible. When the IFSP review meeting is held, the review is completed for the start of the next six month cycle and any changes to services will have an effective date of the start date of the next IFSP. Any immediate service changes needed require an amendment to the current IFSP. For example, if the initial IFSP period is from 6/10/2011 – 12/9/2011 and an IFSP review meeting occurs on 11/20/2011 and the child will now receive a new service such as occupational therapy (OT), the addition of OT will be effective for the next IFSP period of 12/10/2011 – 6/9/2012. Should OT services need to begin immediately and are agreed upon by the IFSP team; the current IFSP must be amended to add the OT SA.

Closing a Service Authorization

Question:
When is it appropriate to close a service authorization?

Response:
It is appropriate to close a service authorization when the child/family will no longer receive a service that is on the IFSP. For example, a child receiving speech services who makes significant progress and no longer needs to receive speech services. It is not appropriate to close a service authorization and create a new one for changes (e.g., due to frequency, duration). These changes require an amendment.

Question:
Who can close a service authorization?

Response:
The EIO/D or the service coordinator can initiate the closure of a service authorization. When a service coordinator initiates the action to close a service authorization, NYEIS initiates workflow for the child’s EIO/D to approve the closure. If the child’s EIO/D initiates the action to close the service authorization, NYEIS sets the service authorization status to ‘closed’.

Question:
What documentation is necessary to indicate that SAs are cancelled in NYEIS?

Response:
Early Intervention Program regulation states providers should maintain "any other documentation relevant to activities performed and services rendered related to the child’s and family’s participation in the Early
Intervention Program." It is recommended that providers maintain, for audit purposes, documentation in the child record of the cancellation of any service authorizations. In NYEIS, the provider receives a notification of the closed/cancelled service authorization. The provider can print the notification by clicking "view" under the action column on the "my alerts" page and then printing the "view alert" page by using their browser's print button. In addition, the closed/cancelled service authorization will indicate a status of "closed" and can be printed as well.

**Suspending a Service Authorization**

**Question:**
When is it appropriate to suspend a service authorization?

**Response:**
It is appropriate to suspend a service authorization if a child is going to be away on vacation or in the hospital for a significant period of time. Each service authorization must be suspended separately. Once suspended, services cannot be delivered during this time. If a service coordinator submits the suspension, then workflow is created for EIO/D to approve the suspension. If EIO/D submits the suspension, additional approvals are not needed. The Department recommends keeping the service coordination service authorization open during the time that other services are suspended. This allows the service coordinator access to the child’s case to communicate with the family and to un-suspend services when appropriate to do so.

**Question:**
Can suspended service authorizations be un-suspended?

**Response:**
Yes, suspended SAs can be un-suspended. Each service authorization must be unsuspended separately. If a service coordinator submits the request to un-suspend a service authorization, workflow is created for EIO/D to approve the change. If the EIO/D submits the request to un-suspend a service authorization, additional approvals are not needed.

**Closing an IFSP**

**Question:**
When will NYEIS close an IFSP?

**Response:**
NYEIS will automatically close an IFSP and associated SAs when the IFSP end date is reached.

**Question:**
Who can close an IFSP?

**Response:**
Only an authorized municipal user may close an IFSP. If someone other than the EIO/D initiates an IFSP closure then workflow is created for the EIO/D to approve the closure. If an EIO/D initiates a closure, additional approvals are not needed.

**Question:**
Is it possible to close a child's IFSP, which will close the associated service authorizations, effectively, closing the child's case without closing the NYEIS 'integrated' case?

**Response:**
In NYEIS, it is possible to close a child's IFSP, which will close the associated service authorizations, effectively closing the child's case, without closing the NYEIS 'integrated' case. It is recommend, for eligible children, that the county allow the integrated case to remain open for a period of time approximately three months from the MDE, or, if services have started, from the last date of service provision, in the event that a family who has not been responsive or refuses services re-establishes contact with the county. If contact is not
re-established during that three month period, a user with appropriate access rights can then close the integrated case with a closure date that is back-dated to the date of IFSP/service authorization closure.

If contact is successfully re-established with the family, a 'new' IFSP can be created by the municipality within the child's integrated case in NYEIS. The closed IFSP should not be cloned; a 'new' IFSP must be created. Please remember, when closing a family's case due to refusal or lack of contact, the municipality must have a procedure for closure, which includes documented outreach to the family and the provision of written notice to the family of due process rights and procedures 10 days prior to the case closing. This written notice should be provided prior to closing the child's IFSP and related service authorizations.

**Grace Period**

If not manually closing the IFSP as of a specific end-date as outlined above, IFSP’s that reach their end dates will also be set to ‘Closed’ status. However, despite the IFSP end date having been reached, the system leaves the IFSP in its current status for 10 days past the displayed end date, so that the IFSP can still be extended if needed. This period of time is referred to as the ‘Grace Period’. Extending is the only allowable edit that can be performed during the grace period. If the end date of the IFSP is extended such that the IFSP is again ‘current’ (its end date is a future end date from the date the record is being viewed), the IFSP is treated like any current IFSP.

**Important Note:**

When considering whether or not to extend an IFSP that is in its Grace Period, if the next IFSP for the child has already been created and has a start date that immediately follows the end date of the IFSP in the grace period, you should **NOT** extend the IFSP that is in its grace period. Instead, proceed to work with the next IFSP in the child’s cycle.