

# A Family Guide



## *Funding Early Intervention Services*



**Early Intervention Colorado**  
*for Infants, Toddlers & Families*

[www.eicolorado.org](http://www.eicolorado.org)



## ***Framework for Funding Principles:***

- 1. There are a variety of funding sources in Colorado.***
- 2. Many times multiple funding sources are used to pay for needed services.***
- 3. Even when accessing different types of funding sources, families can still have services provided at no cost to them.***
- 4. Systems need to make efficient use of resources so that all eligible children can be served.***
- 5. All children must have equal access to services.***

All early intervention services that are included in your child's Individualized Family Service Plan (IFSP) must be provided at no cost to you. In order to ensure that all eligible children receive the services they need, a variety of funding sources may be accessed to pay for early intervention services. These include federal, state and local funds, as well as private and public health insurance plans.

You participate in determining what services are going to be included in the IFSP and what payment sources may be available to cover the early intervention services outlined on your child's IFSP. Your service coordinator (the person who is helping you organize your child's services) makes sure that all early intervention services on your child's IFSP are funded using the appropriate funding sources. The order in which sources for payment will be accessed follows a funding hierarchy established in Colorado in order to help ensure that all appropriate and available funding sources are used for your child's benefit.

## ***How Are Your Early Intervention Services Paid For?***

There are several ways early intervention services are paid for, depending on whether you:

- have a qualifying private health insurance plan (these insurance plans are obligated by state law to cover early intervention services),
- have a non-qualifying health insurance plan (some insurance plans are not required to cover early intervention services, such as self-funded by your employer or out-of-state employer or individual plan),
- have a public insurance plan (Medicaid or Child Health Plan Plus [CHP+]), or
- do not have health insurance.

You may also volunteer to participate financially, but this is not required. You must tell your service coordinator which of the above represents your situation so that appropriate arrangements can be made to pay for your IFSP early intervention services. If you are unsure if your health insurance plan is a "qualifying or non-qualifying" plan, ask your insurance carrier which category represents your type of coverage. **With your written consent, your service coordinator can contact your insurance carrier and assist you with answering this question.**

## ***If you have a qualifying private health insurance plan...***

your early intervention services will be paid for by your health insurance plan. It is important to know that a law amended in 2009 (C.R.S. 10-16-104) protects families with qualifying private health insurance.<sup>1</sup> This law is referred to as the “Coordinated System of Payment” and requires the Early Intervention Colorado program to **first** use a child’s available health insurance coverage for IFSP early intervention services **prior to using state or federal monies**. There are four ways this law protects you:

### **1. You will not have to pay co-pays.**

While most insurance plans require co-pays for many types of services, the Coordinated System of Payment law says that co-pays do not apply to early intervention services. This means there will be no out-of-pocket expense to you for early intervention services included in your child’s IFSP. You may still have co-pays for other medical services covered by your insurance plan.

### **2. You do not need to meet an annual deductible before early intervention services will be paid for in full.**

The Coordinated System of Payment law requires insurance carriers to pay 100% of the cost for early intervention services, regardless of whether your child or your family has met the annual deductible. This means there will be no out-of-pocket expense to you to receive the early intervention services included in your child’s IFSP. You may still have to meet a deductible for other medical services covered by your insurance plan.

### **3. The early intervention services that are paid for by your private insurance plan are not included in your total annual or lifetime benefit maximums.**

Most insurance plans have a total annual or lifetime benefit maximum (often called a “cap”) that they will cover, but the law says that your insurance plan’s annual and lifetime maximums do not apply to early intervention services. This means that having early intervention services paid for by your private insurance plan will not negatively impact you in the future since this amount cannot be applied to your annual or lifetime “caps”.

### **4. Once your health insurance carrier pays the total required amount for early intervention services each year, you still will not have to pay for these services yourself.**

The Coordinated System of Payment law requires qualifying private health insurance plans to pay up to \$5,935<sup>2</sup> per child per insurance plan year for early intervention services included on your child’s IFSP. If the annual cost of early intervention services specified on your child’s IFSP exceeds this amount, the Community Centered Board (CCB) and your service coordinator will ensure that needed early intervention services are paid through federal, state or other funds. Again, you will not have to pay for these services yourself.

<sup>1</sup> Remember, the law protects **only** those with a qualifying private health insurance plan. The law does not protect people with self-funded or out-of-state insurance plans. If your private health insurance carrier does not comply with the law (that is, you are being asked to pay for something related to your early intervention services), contact your service coordinator immediately to address this.

<sup>2</sup> 2009 benefit maximum amount. This amount will be adjusted each year.

## ***If you have a non-qualifying health insurance plan...***

some or all of your early intervention services may still be covered, depending on the benefits outlined in your policy. If early intervention services, such as occupational therapy, physical therapy or speech therapy are covered, then you may agree to have your early intervention services paid for by your insurance plan. If you choose to do this, your service coordinator can arrange for the Early Intervention program to cover the costs of any deductibles or co-pays that are required by your insurance plan. This will help make sure that there will be no out-of-pocket costs to you. Please be aware that most insurance plans include a total annual or lifetime benefit maximum or “cap”—meaning a total amount they will pay while your child is covered by the plan. Any early intervention services paid for using your non-qualifying insurance plan **will be** a part of your total annual or lifetime maximum unless you are successful in seeking a waiver for this.

You are not obligated to have your non-qualifying insurance plan pay for your child’s early intervention services. You must provide your written authorization before the Early Intervention Colorado program begins or discontinues billing your health insurance carrier to pay for early intervention services listed on your child’s IFSP. If you do not want your insurance plan to pay for your early intervention services, let your service coordinator know. Arrangements will be made for your services to be paid for by federal, state or other funding sources. Please keep in mind, however, Colorado does have limited state and federal funds to cover the cost of early intervention services. If other funding sources such as private health insurance are not accessed for those who have it available, then there will be fewer funds available to help ensure that all eligible children are served.

## ***If you have a public health insurance plan (Medicaid or Child Health Plan Plus [CHP+])...***

you may agree to have your early intervention services paid for by this plan. It is important to know that early intervention services covered by these funding sources must be deemed medically necessary. If for some reason they are not, the early intervention services identified in your child’s IFSP will be covered by other federal, state, or local funds.

## ***If you do not have health insurance...***

your service coordinator will help you arrange for payment for your child’s early intervention services using federal, state or other funds. Just let your service coordinator know that you do not have health insurance so that arrangements can be made. In addition, your service coordinator can assist you in accessing information regarding eligibility criteria for public insurance, such as Medicaid or CHP+, if appropriate for your family.

**Note:** You always have the option of seeking services independent of the Early Intervention Colorado program. Just remember that if you seek services outside of what is included on your IFSP, the protection provided by the Coordinated System of Payment law will not apply (i.e., you will need to pay co-pays and deductibles and the annual and/or lifetime caps will apply). **You should always contact the customer service number for your**

**insurance policy to discuss the options and limitations of the insurance coverage for therapy services for your child.**

## Frequently Asked Questions

### 1. What early intervention services are private health insurance carriers required to pay for under Colorado's Coordinated System of Payment law?

**Answer:** There are a total of ten (10) early intervention services that must be covered by qualifying private health insurance plans under the law.

Audiology Services	Physical Therapy
Developmental Intervention	Psychological Services
Health Services	Social Emotional Intervention
Nutrition Services	Speech Therapy
Occupational Therapy	Vision Services

There are four (4) additional early intervention services that are also available to all families, if needed by their child and identified in the IFSP. These services are funded through other sources and include assistive technology, respite care (as needed to enable a parent to be involved in early intervention services), service coordination (above and beyond what is already provided to all families) and transportation (to receive early intervention services). You can discuss this coverage with your service coordinator for more details.

The law also specifies that other therapies needed for an acute condition or medical services that your child might need that are not part of early intervention services included in your IFSP must still be covered by your private health insurance plan. Co-pays, deductibles and annual and/or lifetime caps would apply to these other services.

### 2. Are medical services like those provided by a physician or nurse practitioner covered under the law as an early intervention service?

**Answer:** As a general rule, services provided directly by a health care provider (physician, nurse, etc.) including special medical procedures, surgeries, treatment of illnesses, and prescription drugs are not considered to be early intervention services and would not be included in the coverage provided under the law.

### 3. If we change health insurance carriers after my child's early intervention needs have been identified, can my new insurance carrier deny coverage based on a "pre-existing condition"?

**Answer:** It depends on why a family is switching plans, what kind of coverage it is (group or individual) and if the new plan is subject to Colorado laws. If the new plan is subject to Colorado laws, through an employer plan, and the employer decides to switch carriers, then the answer is no. There are many variables so it would be best to ask your employer ahead of time.

### 4. If we have a qualifying health insurance plan, can the private health insurance carrier deny coverage of an early intervention service?

**Answer:** If an early intervention service is included in your child's IFSP, the

insurance carrier cannot deny coverage. Coverage can only be denied if an early intervention service is not included in your IFSP or if it is not one of the allowable early intervention services listed above.

### 5. If we change health insurance carriers in the middle of the insurance plan year, does the new insurance carrier cover only the remaining amount of what the previous carrier did not pay, or does the new carrier start at zero, as though we are starting a new year of coverage?

**Answer:** It depends. If you are covered by a group plan through your employer and the employer switches insurance carriers mid-year, then you would need to ask your employer if the remaining benefit is available or whether a new amount is established. If you switch to a new qualifying individual health plan, then you would start over and the entire annual benefit maximum would be available.

### 6. We have been receiving early intervention services under an IFSP, and also accessing clinic-based services covered by our health insurance plan that are not on our IFSP because they were being provided in a clinic-based setting. Can this combination be continued after May 2, 2009?

**Answer:** If your child has two different needs, one developmental (i.e., early intervention) and one to address an acute medical condition, then yes, it would be possible to have two different services paid for by your health insurance plan. For example, physical therapy could be provided in a clinic-based setting as rehabilitation for a surgery using private health insurance funding and in the family home for a child's developmental motor (movement) skills covered by the Coordinated System of Payment requirement of the health insurance plan.

If, however, you want to have the same type of service covered by two different funding sources in order to get more services, then the answer is no. Under the Coordinated System of Payment, your IFSP must identify the amount of service to be provided and the location, and then the appropriate funding source identified. **If you access early intervention services under an IFSP that are funded by your private insurance, the law specifies that a service provider cannot seek additional payment from the family or the insurance carrier. If a family uses the insurance coverage for additional early intervention services, this could present a liability to your family. Your health insurance carrier could either deny the additional services, stipulating that you already have early intervention services provided through an IFSP, or the carrier could later deny a claim for the same reason for services rendered, and then seek to recover the cost of those services from your family.**

You should contact the customer service number for your insurance carrier to discuss the options and limitations of the insurance coverage for therapy services for your child.

### 7. What should we do if we still have questions?

**Answer:** This information can feel complicated and overwhelming. Remember that your service coordinator is there to help you address your questions and to ensure you and your child receive the services that are needed and that they are paid for in the appropriate ways. Talk to your service coordinator about your questions and concerns.



---

**Early Intervention Colorado**  
*for Infants, Toddlers & Families*

---

For additional information on the funding for early intervention services and the Coordinated System of Payment law, call

**1-888-777-4041**

or visit

**[www.eicolorado.org](http://www.eicolorado.org)**



**Colorado Department of Human Services**

*people who help people*