

Welligent 2024

Re-referrals and Transfers

Children and families with prior Early Intervention involvement return to EI for a variety of reasons. They may return to the same EI program or transfer to a different EI program. This guidance document describes several re-referral/transfer scenarios and their associated procedural steps.

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It is important to note that every referral, including a re-referral or transfer, must be documented as its own call in the Welligent Call Center, and children who are referred more than once to the same agency will have more than one “call” in their record. Once the call is entered and saved, the program determines previous EI involvement by speaking with the parent/guardian.

For children who had a previous EI program episode in Welligent, their prior enrollment status will determine whether the prior episode is resumed, or a new episode is added. The general overview below is clarified in more detail on the subsequent pages of this document.

Resume Previous Episode

- Child previously determined eligible (within the past 12 months) and exited without an IFSP
- Previous IFSP is still current (<12 months since IFSP Start Date or Annual Review)

Add New Episode

- Child exited prior to eligibility
- Child previously determined ineligible AND the EI program has determined that re-evaluation is warranted
- Child was previously determined eligible (more than 12 months ago) and exited without an IFSP
- Previous IFSP is not current (>12 months since IFSP Start Date or Annual Review)

1. Children previously referred who exited prior to eligibility

- If a prior referral was Closed in Call Center and did not progress to a program episode, add the new referral as a new call in Call Center. This call can be linked to the previous call if desired (in the Call Center record, click “Other” and select “Link Calls”). Proceed the same way as you would with a new referral: create client/add program episode, conduct Intake, Evaluation, Eligibility/IFSP Meeting, etc.
- If a prior referral did progress to a program episode in Welligent but exited the program prior to an eligibility determination (i.e., unable to contact or family declined), add the new referral as a new call in Call Center and link the call to the existing client record. In the client record, confirm Demographics and Family/Contact information, and reactivate the client on the Demographic screen if needed. Add a new program episode - this is considered a “second episode”. Make sure that the new referral date appears in both referral date fields on the Intake Tile. Proceed the same way as you would with a new referral: conduct Intake, Evaluation, Eligibility/IFSP Meeting, etc.

2. Children previously determined ineligible

- If a previously ineligible child is re-referred at any point, and the program determines that there are new concerns that warrant re-evaluation, add the new referral as a new call in Call Center and link the call to the existing client record. In the client record, confirm Demographics and Family/Contact information, and reactivate the client on the Demographic screen if needed. Add a new program episode - this is considered a “second episode”. Make sure that the new referral date appears in both referral date fields on the Intake Tile. Proceed the same way as you would with a new referral: conduct Intake, Evaluation, Eligibility/IFSP Meeting, etc. Note that some assessment tools specify timeframes in which the tool should not be re-administered, and providers may need to select a different tool.

3. Children previously determined eligible and exited without IFSP

Add the new referral as a new call in Call Center and link the call to the existing client record. In the client record, confirm Demographics and Family/Contact information, and reactivate the client on the Demographic screen if needed.

- If the previous eligibility determination occurred **within the last 12 months**, reactivate the previous program episode by deleting the previous discharge date/reason and changing status to Active on the Intake Tile. Record a Case Note to capture previous discharge date/reason and to note that the episode is resuming. Proceed with IFSP development.
- If the previous eligibility determination was **more than 12 months** ago, the intake/eligibility process must be conducted again. Add a new program episode - this is considered a “second episode”. Make sure that the new referral date appears in both referral

date fields on the Intake Tile. Proceed the same way as you would with a new referral: conduct Intake, Evaluation, Eligibility/IFSP Meeting, etc.

4. Children previously enrolled with an IFSP

Add the new referral as a new call in Call Center and link the call to the existing client record. In the client record, confirm Demographics and Family/Contact information, and reactivate the client on the Demographic screen if needed.

- If the previous **IFSP is still current** (<12 months of the IFSP Start Date or Annual Review), reactivate the previous program episode on the Intake Tile by deleting the previous discharge date/reason and changing status to Active. Record a Case Note to capture previous discharge date/reason and to note that the program episode is resuming. Conduct an IFSP Meeting within 2 weeks of referral and determine if any changes are needed to outcomes or services. All services must begin within 30 days of the IFSP Meeting.
- If the previous **IFSP is no longer current** (>12 months of the IFSP Start Date or Annual Review), add a new program episode - this is considered a “second episode”. Make sure that the new referral date appears in both referral date fields on the Intake Tile. Proceed the same way as you would with a new referral: conduct Intake, Evaluation, Eligibility/IFSP Meeting, etc.

5. In-state transfers for children with IFSPs

The original EI Provider must:

- Establish a last date of service with the family.
- Remind the family that the child’s record will be sent to the new program. (Written consent is not required to transfer the early intervention record to another Rhode Island Early Intervention provider.)
- Discharge the child using the *day after the last service* as the discharge date, the discharge reason “Discharge – Family switched providers”, and the agency name of the new EI provider.
- Provide a copy of the EI record to the new provider within 5 days of discharge.

The new EI Provider must:

- Record the referral in Call Center, using the *day after the original provider’s discharge date* as the referral date, and referral source type “EI Transfer (RI in state)”.
- Create client record and add an Early Intervention program episode.
- Conduct an initial home visit to complete a new RI EI Consents form and review the original Family Intake, updating as needed (this can be billed as T1023).
- Convene an IFSP meeting within 2 weeks of the referral date, to review the existing IFSP, including the Multidisciplinary Evaluation/Assessment Summary, IFSP Present

Levels of Development, IFSP Outcomes, IFSP Services, and Transition Steps if applicable.

- Create an IFSP Services form (using current date, IFSP type: Initial) based on the review with the family. IFSP Services must begin within 30 days.
- Additional minimum data requirements must be recorded as follows:
 - Intake Tile: Use the date of the new provider’s IFSP Review meeting for the “Eligibility/IFSP Meeting Date”, as well as the “IFSP Start Date.” The IFSP End Date for all children, including transfers, is typically the day before the child turns 3. However, if the child’s eligibility reason is time-limited (e.g., NAS, torticollis, etc.), the IFSP End Date is one year from the original provider’s IFSP Start Date. (See [Additional Considerations](#) for more information).
 - IFSP-Multidisciplinary Evaluation/Assessment Form: Enter the evaluation type, eligibility type and primary reason for eligibility from the original EI provider’s evaluation, using the date of the new provider’s IFSP Review meeting.
 - IFSP-Present Levels of Development (Entry) Form: Record the Entry ratings from the original EI provider, using the date of the new provider’s IFSP Review meeting.

6. In-state transfers for children without IFSPs

The original EI Provider must:

- Communicate with the family and new provider to establish a discharge date.
- Remind the family that the child’s record will be sent to the new program. (Written consent is not required to transfer the early intervention record to another Rhode Island Early Intervention provider.)
- Provide a copy of the EI record to the new provider within 5 days of discharge.
- Discharge the child using the agreed upon discharge date, with the discharge reason “Exit (No IFSP) – Family switched to another EI site”.

The new EI Provider must:

- Record the referral in Call Center, with referral source type “EI Transfer (RI in state)”
 - If an Intake was already completed with the original provider, use the day *after the original provider’s discharge date* as the referral date.
 - If an Intake was not already completed with the original provider, use *the original provider’s referral date*.
- Create client record and add the Early Intervention program episode. Complete an Intake and/or Evaluation if one was not done by the prior program and begin the process to determine eligibility.

7. Out-of-state transfers

Eligibility criteria for Early Intervention differ from state to state. The Rhode Island EI program should consider an out of state transfer to be a new referral and begin the process to determine eligibility within 45 days. The referral must be entered in Call Center with referral source type “Out of state referral”.

Information from the previous out-of-state EI program should be obtained and used as appropriate. Medical record review indicating a condition listed on the RI Established Conditions list, or a recent multidisciplinary evaluation (utilizing a standard tool with 2 standard deviations in at least one area, or 1.5 standard deviations in at least two areas), may be used to establish eligibility. A family directed assessment and child assessment must still be completed as part of the H2000 service.

8. Additional considerations

Resuming a previously discharged EI program episode in Welligent

Depending on program-level Welligent settings, Services may have been inactivated upon discharge. These will need to be individually reactivated on the Services Tile when the program episode resumes. (Program History > Early Intervention > Services Tile > Edit icon to the left of each service).

The screenshot shows the 'Program Episode Details - Early Intervention' page. At the top, there is a navigation bar with a settings icon, a dropdown menu for 'Program Status' set to 'Active', and a series of process steps: 'Intake', 'Diagnosis', 'IFSP/Outcomes', and 'Services'. The 'Services' tile is circled in red. Below this is a table of services. The first two rows are circled in red, highlighting the 'Edit' icons and the 'Inactive' status.

Edit	New	Schd	Note	Service	Status	Provider	Last Session	Completed	Scheduled	Can
	--	--		Vision Services	Inactive	Lowell, Sara		0	0	0
	--	--		Eligibility Determination	Inactive	Lowell, Sara		0	0	0

Re-referrals of children previously determined ineligible by another RI EI program

The new program must obtain and review the evaluation information from the original program and must also consider new child/family information to determine if a new eligibility determination is appropriate.

- If new information is presented, the EI program should proceed with the referral.
- If new information is not presented, then the EI program should share the eligibility determination already made with the family and assist the family with other community referrals for services if appropriate. It is important that families understand that eligibility determination is consistent across all RI EI programs. In Welligent, the client record/program episode are not created, and the call is closed out of Call Center.

The Intake code, T1023, is no longer limited to one per child

In the case of a new episode (with the same EI agency, or at another EI agency), the Intake code can be billed again. This will be updated in the next revision of the Rhode Island Medical Assistance Claim Reimbursement Guidebook for Early Intervention Services.

Changes to how the IFSP Start and End Dates are documented in Welligent

Previously, annual IFSP Start and End Dates were entered at the time of the Initial IFSP and then updated over time with each annual review. In the new Welligent system, these fields are used in a slightly different way and typically do not need to be updated at any point.

IFSP Start Date:

- The IFSP Start Date represents the start of the Initial IFSP, or in the case of a transfer, the date of the first IFSP Review meeting with the family and the new provider. When an annual review is conducted, the Annual Review date is now recorded under “Completed IFSP Reviews”. The IFSP Start Date field is kept **as-is** to reflect the date of the Initial IFSP (or first IFSP Review meeting).

IFSP End Date:

- The IFSP End Date will be one of two dates. For most children, it is the day before the child turns 3, in which case it does **not** need to be updated at any point during the program episode.
- For children whose eligibility is limited to one year (e.g., NAS, torticollis, etc.), the IFSP End Date should be one year from the IFSP Start Date, as the child’s eligibility needs to be re-determined at that time. If eligibility is re-established at the one-year mark, the

IFSP End Date should then be updated to either one year from that annual review, or the day before the child turns 3 (depending on the reason for continued eligibility).

This means that for *most* children who transfer, the IFSP End Date is the day before they turn 3. The IFSP review timeline (6-month review, annual review, etc.) for the new provider is based on the new provider's IFSP Start Date.

For children who transfer with a time-limited eligibility status (e.g., NAS, torticollis, etc.), the IFSP End Date must remain one year from the original provider's IFSP Start Date, at which point the child's eligibility has ended and the new provider must re-establish eligibility.