Talking Points

RI Medical Assistance Claim Reimbursement Guidebook for Early Intervention Services (eff. 7/1/2022)

The 2022 revisions to the Rhode Island Medical Assistance Claim Reimbursement Guidebook are summarized here. Changes and updates are effective July 1, 2022. A version that highlights new changes is being sent out along with this guidance; the final revised version of the manual is posted online at:

http://www.eohhs.ri.gov/ProvidersPartners/GeneralInformation/ProviderDirectories/EarlyInterventionProgram.aspx

Summary of Changes

Rates

• All codes have increased by 45% effective 7/01/2022.

Section II General Requirements for Early Intervention Reimbursement

- Language has been added to clarify that prior to submitting any activity for reimbursement, Providers must first review the Procedural Safeguards and Funding booklet with all families and, for families with private insurance, Providers must complete the Health Insurance Consent to Release Information form with the family.
- Language related to "shared billing" using the shared billing function between instances has been changed since this functionality is no longer available in the upgraded system. Codes developed for the shared billing function T1016 TFU1, T1016 TFU2 for team coordination activities have been eliminated. Shared cases may still occur between Providers utilizing contracted arrangements and existing codes T1016TF and T1016TG.
- 990s This section has been updated to include the new ways in Welligent to record multiple staff in codes that require more than one staff, and to capture staff time spent on flat rate codes. The Session Note will capture additional staff and their time in the Additional Providers section of the note. Activities related to flat rate codes can be recorded under the Eligibility Determination service using the non- billable primary actions: "Other intake activity" and "Other evaluation activity".

Section III: Evaluation/Assessment & Plan Development

 Eligibility/IFSP Meeting (to annually review the IFSP) T1023TL The code for this activity has been changed to Family Training Education and Support T1027/24 (with applicable modifiers). The Annual Eligibility/IFSP meeting is reimbursed as a treatment planning activity in alignment with IFSP Meetings to update the IFSP and Periodic Review.

T1023TL is still used for all **Initial** Eligibility/IFSP meetings.

Section IV: Assistive Technology (Devices and Services)

• Language has been added to include the Welligent Session Note and entering the invoice amount in the upgraded Welligent. Assistive tech in the new system is configured with an unbillable T5999 to accommodate the Session Note (what the device is; which outcome the device will address; why it is necessary to meet the specific child/family outcome; and the anticipated cost) and also a billable T5999 to enter the actual invoice amount on the employee charge form.