

Local Early Intervention System (LEIS) Meeting

Location(s): Richland

Date: November 2024

Agenda:

Welcome and Introductions

Members Present:

BabyNet Eligibility	Beyond Early Intervention	Prisma Health
SC School for the Deaf and Blind	Carolina Behavior & Beyond	Epworth
Newberry DSN	Rich/Lex DSN	Justice Works
Aging with Flair	Play 2 Learn	A Divine Beginning
About Play	Easter Seals of SC	Richland County First Steps
Department of Disabilities and Special Needs	Family Connection of SC	

Agenda Items:

Presentations

- **Early Hearing Detection & Intervention Presentation – Tara Carroll.** A presentation was provided by Tara Carroll, Program Manager with Early Hearing, Detection & Intervention (EHDI). Tara provided information and resources on the First Sound process, Communication Begins at Birth brochure in English and Spanish, and Risk Factors for hearing loss. Her contact information was shared for brochure requests and for newborn hearing screening follow-up.
- **SC Infant Mental Health Association (SCIMHA) Presentation - Katrin Wood.** A presentation was provided by Katrin Wood, Infant Early Childhood Mental Health (IECMH) Endorsement and Training Manager. Katrin explained how the Infants Mental Health (IMH) endorsement maps out trainings, education and work experience and demonstrates the expertise of professionals for children birth – age 6. She announced an opportunity for BabyNet contracted providers to register for a cohort that launches January 16, 2025 for a guided process to obtain an IMH endorsement. Other professional development opportunities were discussed such as Reflective Supervision and Facilitated Attuned Interactions (FAN) that are available. Katrin's contact information was shared if participants have questions.

Teaming and Collaboration

- The Division of Early Childhood (DEC) Recommended Practices: Teaming & Collaboration topic was discussed and an activity was completed to learn how to turn a challenge into an opportunity for the team to learn and grow.
- DEC Recommended Practices with Examples document was shared with attendees.
- Resources from Teaming & Collaboration:
 - DEC Recommended Practices
 - https://www.dec-sped.org/files/ugd/95f212_26fd2a7b804c40ea908fe5f58a65ec52.pdf
 - DEC Recommended Practices with Examples
 - <http://www.dec-sped.org/recommendedpractices>
- Local Resources: Participants were asked to bring two of their favorite local resources and 1 resource that is not local to the February LEIS meeting. The list of local resources will be compiled and shared through the local LEIS distribution list.

Demographic Updates

- If the county for a new referral is incorrect when the record is received, please submit a request to BabyNet@scdhhs.gov with the correct county.
- When submitting address request updates, please include the correct county and send to BabyNet@scdhhs.gov.

Record Closures

- If attempts to contact a foster family are unsuccessful, or if the foster parent says the child has new foster care placement, please do not close the record. You can contact Lonnie “Trey” Koon and he will be able to provide assistance in locating the child.
- Please be sure to clarify the services a family is interested in receiving prior to closing a record. Some families have reached out to state office because they are still interested in receiving Service Coordination and therapy services, but they no longer want Family Training. Families can decline one service without jeopardizing other services.

Medicaid & BabyNet Issues

- If a family tells you they were told by their pediatrician, dentists office, Medicaid office, or any other provider that they are no longer eligible for Medicaid because they are receiving BabyNet services, please gather as much information as possible. This information will be emailed to your Regional Coordinator, and will then be escalated to determine what has happened.
- A family can have Medicaid and receive BabyNet services and should not be told they have to choose between the two.

Finalizing IFSP's-Dec 1 Count

- IFSP's should be finalized within 14 days.
- December 1 data count for federal reporting will occur at the end of November. All IFSP's should be finalized by the end of November.
 - If you have children on your caseload who are 3 years old, please be sure to complete the Exit COS, if needed, save/finalize the IFSP's and get those records closed.

General Supervision

- **Findings Overview**
- A 10% sample of data for Indicators 1, 7 and 8 w analyzed on September 1, 2024 for the months of July 1, 2023 – June 30, 2024. Service Coordinators were given one month to work with their IFSP team to determine if the data was accurate, or if corrections needed to be made. Possible corrections: missing data, typos, errors, incorrect delay reasons, and missing service logs.
- **The Richland district received the following number of findings for each indicator:**
 - Indicator 1 – 6 findings; 97.6% – No Corrective Action Plan (CAP)
 - Indicator 7 – 29 findings; 81.76% – No CAP
 - Indicator 8C – 2 findings; 98.4% – CAP
- The breakdown of each indicator is as follows:
 - **Indicator 1** – Timely Services – service begins within 30 days of identification of the service on the IFSP. Total timeliness should be 100%.
 - Examples of the services for Indicator 1 are Family Training, Speech Therapy, Physical Therapy, Occupational Therapy, etc.
 - All seven districts received findings for Indicator 1.
 - Richland received 5 findings for this indicator.
 - All previous non-compliance for the Richland district was cleared prior to September 1, 2024, so no CAP is required for Indicator 1.
 - **Indicator 7** – Initial IFSP is completed within 45 days of referral to BabyNet. Total timeliness should be 100%.
 - 45-day timeline requirements are divided amongst BabyNet Eligibility & Ongoing Service Coordinators (SCDDSN & SCSDb). Total timeliness should be 100%.
 - Intake Coordinator has 25 days to process the referral, determine eligibility, and transfer the record to the SC.

- Ongoing Service Coordinator has 20 days to complete the child and family assessments and conduct the initial IFSP meeting.
- Findings can be attributed to BN Eligibility, ongoing SC's or the State (staffing shortages).
- All 7 districts received findings for Indicator 7.
- Richland received 29 findings for this indicator.
- The State (Intake Coordinators) experienced staffing shortages throughout FFY 2023, but implemented several strategies to improve the intake and eligibility timelines.
- Due to the improvements, Indicator 7 compliance improved from a statewide average of 58.55% to 82.45%.
- All previous non-compliance for the Richland district was cleared prior to September 1, 2024, so no CAP is required for Indicator 7.
- **Indicator 8C – Timely Transition Conferences**
 - Timely transition conferences must occur when the child is between 2 years 3 months (27 months old) and 2 years 9 months (33 months old). Total Timeliness should be 100%.
 - Two of the 7 districts received findings for Indicator 8C.
 - Richland received 2 findings for this indicator.
 - All previous non-compliance was **not** cleared prior to September 1, 2023 so the Richland district will be required to complete a CAP.
- **Subsequent Data**
 - In January 2025, subsequent data reports will be run for Indicators 1, 7, 8C. We will analyze services, initial IFSP's and transition conferences that are due in November 2024.
 - If correction of the findings is found, the findings will be cleared.
 - All findings will be reported in the APR.
 - Correction is a 2-prong approach:
 - Prong 1 – although there was a finding, did the event eventually occur?
 - Prong 2 – Were there any additional findings? Need 100% to clear the finding.

Transition Updates/LEA

- **LEA's to Share Updates/Ask Questions**
 - No updates were shared at this time.

Service Coordinators & Service Providers

- **Payor Sources**
 - Service Coordinators must:
 - Have families complete a Consent to Use Insurance form at the initial IFSP, Annual IFSP, and any time there is a change in payor source or consent.
 - ✓ If the family does not have Private Insurance AND Medicaid/MCO, they can choose if they want to bill their private insurance to help meet their deductible.
 - ✓ Consent to bill private insurance on Planned Services of the IFSP must match the Consent to Use Insurance form.
 - Inform Service Providers of the family's payor source at the time of referral, including which MCO the child is enrolled.
 - A copy of the Consent to Use Insurance form should be provided to the Service Provider at the time of referral and any time one is completed with the family.
 - Service Providers:
 - Prior to accepting a referral, verify payor source.

- The Consent to Use Insurance form is completed and signed by the family, providing their decision to bill private insurance. Request the form if the Service Coordinator has not provided a copy.
 - ✓ When a family has private insurance AND Medicaid/MCO, private insurance must be payor 1.
 - ✓ Service Providers must be contracted and credentialed with the MCO the child is enrolled in order to accept the referral.
 - ✓ Do not have to be in-network with the private insurance the child is enrolled, but will need to receive a denial from either the parent or insurance company prior to submitting Accounts Payable, if the family has given consent to bill private insurance.
- Verify payor source on planned services is correct prior to entering service logs. If not, notify the Service Coordinator so updates can be made.
 - ✓ Supervisors must track the Consent to Use Insurance form, financial support page/active coverage, payor sources on planned services.
- Ensure everything reflects the family's decision on the consent form. Each line of service on planned services of each IFSP should match the Consent to Use Insurance form.
- **End of Year Submission**
 - Service Provider must submit and approve any pending claims by the end of December.
 - If there are pending claims due to a payor source error:
 - submit a help desk ticket to request a service log deletion
 - contact the Service Coordinator so a change review can be made to correct the payor source.
 - Re-enter the service log under the correct payor source.
- **Service Log Entry**
 - Service Coordinators and Service Provider must enter service logs within 7 days. This is important for record reviews, data clean-up, parent complaints, problem-solving billing errors and to keep the record updated.
 - Service logs should be entered regardless of the payor source. If a child is enrolled in an MCO, service logs must be documented in BRIDGES since it is the child's educational record, it is important for IFSP teaming, and encounters with the child need to be documented.
- **Natural Environment**
 - All Part C/BabyNet services should be provided in the natural environment of the family/child during their daily routines.
 - Our goal is to empower families to feel confident and competent in helping their child develop and learn so they can teach their child new skills in between visits, advocate for their child and become familiar with community resources.

BabyNet Eligibility Updates

- See above under BabyNet State Office updates → Demographic Updates

Community Partner Updates

- SC Infant Mental Health
 - A six-month Endorsement Cohort launches January 16, 2025. It will include Endorsement 101, 30-minute individual meeting, EASY Overview, Four monthly coworking meetings, Individual support meetings available as needed.
- The Power of Play – November 13, 2024, 6:30pm – 7:30pm
- DDSN 101 – November 19, 2024, 12:00pm – 1:00pm
- The SC Summit on Early Childhood: Where We Begin – December 5, 2024, 9:00am – 4:00pm

Next LEIS Meeting: February 2025