

STATE: MINNESOTA

ATTACHMENT 4.19-B

Effective: July 1, 2021

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TN: 21-12

Approved:

Supersedes: 19-10,17-06,14-08

4.b. Early and periodic screening, diagnosis, and treatment services.

Effective for services provided on or after July 1, 2015, payment for **Early Intensive Developmental and Behavioral Intervention (EIDBI)** services is the lower of:

1. Submitted charge, or
2. The resource based relative value scale (RBRVS) calculated rate (if available);

For all other services, payment is the lower of

1. Submitted charge, or
2. the following state agency established rates:
 - Comprehensive multi-disciplinary evaluation (CMDE) conducted by a CMDE provider doctoral prepared professional: \$43.58 ~~\$35.67~~ per 15-minute unit ~~(if the service is provided by a masters level trained provider: \$28.53 per 15-minute unit)~~
 - Coordinated care conference, per provider per session: \$97.98
 - EIDBI intervention with two providers, per 15-minute unit: \$21.04

For the following services, the agency established rate is based on the service being provided by a qualified supervising professional or Level I provider; the agency established rate is reduced 20% when provided by a Level II provider, or; the agency established rate is reduced by 50% when provided by a Level III provider.

- Individual Treatment Plan (ITP) development: \$82.44 per session
- EIDBI intervention, per 15-minute unit: \$17.54
- Group intervention, per 15-minute unit: \$5.84
- Observation and Direction of EIDBI intervention, per 15-minute unit: \$17.54
- Family/caregiver training and counseling, per 15 minute unit: \$17.54
- Group family/caregiver training and counseling, per 15 minute unit: \$5.84

Necessary travel time to provide EIDBI services is paid using the same methodology that applies to provider travel time in item 6.d.A.

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2. **Coordinated Care Conference** brings together the team of professionals that work with the child and family to develop and coordinate the implementation of the individual treatment plan (ITP) to assure that services are coordinated and integrated across providers and service delivery systems. Participants in the conference will perform some, or all, of the following:
- a. Coordinate and integrate information from the CMDE process
 - b. Describe intensive treatment options and expectations across service settings;
 - c. Document intensive treatment scope, modality, intensity, frequency and duration based on the CMDE recommendations and family choice;
 - d. Review the child's progress toward goals with the child's family;
 - e. Coordinate services provided to the child and family;
 - f. Identify the level and type of parent involvement in the child's intensive treatment;
 - g. Coordinate program transition; and
 - h. Integrate care and services across service providers to ensure access to appropriate and necessary care including medically necessary speech therapy, occupational therapy, mental health, human services or special education;

Qualified providers: Must be completed by the Qualified Supervising Professional, and may include the CMDE Provider, Level I Provider, and Level II Provider.

3. **Individual Treatment Plan (ITP)** is a person-centered, written plan of care for a child receiving EIDBI services. This includes development, ongoing monitoring, and updating of the ITP. The ITP must be based on the CMDE, be culturally and linguistically appropriate, and include input from the child's family and legal representative, who must sign in addition to the QSP. The ITP specifies the:
- child's functional goals, including baseline measures and projected dates of accomplishment, which are developmentally appropriate, and work toward generalization across people and environments;
 - treatment modality or modalities;
 - treatment intensity, frequency and duration;
 - setting and any specialized equipment needed;
 - discharge criteria;
 - ~~treatment outcomes and the methods to be implemented to support the accomplishment of outcomes, including the amount of time needed for each level of provider to deliver child treatment and parent training; and~~

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- Reflect the values, goals, preferences, culture and language of the child's family.

Qualified providers: ~~Must be completed by the Qualified Supervising Professional~~ Qualified Supervising Professional, Level I Provider, and Level II Provider.

The child and family's primary spoken language, culture and values must be considered throughout EIDBI services, including the diagnosis, CMDE, individual treatment plan development, progress monitoring, parent education and support services and coordination of care. A language interpreter must be provided when needed.

EIDBI is not intended to replace services provided in school or other settings. Each child's individualized treatment plan must document that EIDBI services coordinate with, but do not include or replace special education and related services defined in the child's individualized educational plan (IEP), or individualized family service plan (IFSP), when the service is available under the Individuals with Disabilities Education Improvement Act of 2004 (IDEA) through a local education agency. This provision does not preclude EIDBI treatment during school hours.

EIDBI is provided in the most integrated and inclusive setting possible that supports, promotes, and allows:

- inclusion and participation in the child's home and community life to the fullest extent possible as desired by and determined medically appropriate to the age, condition, and needs of the child by their legal representative in collaboration with a QSP qualified supervising professional and through the CMDE process;
- opportunities for self-sufficiency, developing and maintaining social relationships and natural supports, and generalization of targeted skills across people and environments; and
- a balance between risk and opportunity, meaning the least restrictive supports or interventions necessary are provided in the most integrated settings in the most inclusive manner possible.

EIDBI does not include services provided by a parent, legal guardian or legally responsible person.