

EFFECTIVE DATE: 01 | 01 | 2014

POLICY LAST UPDATED: 11 | 15 | 2023

OVERVIEW

Early intervention (EI) services promote the development of infants and toddlers with developmental delays and challenges. Services are delivered to children 3 years of age or younger that have or are at risk of developing a disabling condition or have other special needs that may affect their development. The codes used for claim processing as published by the Rhode Island Department of Human Services are outlined in this policy. In addition, this policy is applicable only for Commercial products.

Every state has their own Early Intervention services programs. Rhode Island Early Intervention services are limited to children residing in Rhode Island.

PRIOR AUTHORIZATION

Prior authorization review is not required.

POLICY STATEMENT

Commercial Products

Speech and language therapy, physical therapy, occupational therapy, evaluation, case management, nutrition, service plan development and review, nursing services, and assistive technology services and devices will be covered for members (age birth to 3 years) who are Rhode Island residents. All applicable coinsurances, copayments, deductibles, and benefit limits will **not** apply.

Rhode Island-mandated benefits generally do not apply to Plan 65, FEHBP, and Medicare Advantage plans. Groups that are self-insured may choose not to comply with state mandates and should refer to their member certificates for specific coverage regarding the Early Intervention Mandate.

COVID-19 TeleHealth Early Intervention Services

On June 10. 2020, The Rhode Island Executive Office of Health and Human Services released the COVID-19 TeleHealth Delivery Policy and Procedure Guidance related to Early Intervention Services. This policy is effective March 18, 2020 and until further notice. Please refer to the Executive Office of Health and Human Services at www.eohhs.ri.gov for details. Refer to the Coding section for billing guidelines.

MEDICAL CRITERIA

Not applicable

BACKGROUND

This is an administrative policy to document the following Rhode Island General Laws (RIGL)-Early Intervention Services (EIS): RIGL 27-20-50.

27-20-50 Coverage for early intervention services. — (a) Every individual or group hospital or medical expense insurance policy or contract providing coverage for dependent children, delivered or renewed in this state on or after the effective date of this act [July 1, 2004], shall include coverage of early intervention services which coverage shall take effect no later than January 1, 2005. Such coverage shall be limited to a benefit of five thousand dollars (\$5,000) per dependent child per policy or calendar year and shall not be subject to deductibles and coinsurance factors. Any amount paid by an insurer under this section for a dependent child shall not be applied to any annual or lifetime maximum benefit contained in the policy or contract. For the purpose of this section, "early intervention services" means, but is not limited to, speech and language therapy, occupational therapy, physical therapy, evaluation, case management,

nutrition, service plan development and review, nursing services, and assistive technology services and devices for dependents from birth to age three (3) who are certified by the department of human services as eligible for services under part C of the Individuals with Disabilities Education Act (20 U.S.C. \int 1471 et seq.).

- (b) Subject to the annual limits provided in this section, insurers shall reimburse certified early intervention providers, who are designated as such by the Department of Human Services, for early intervention services as defined in this section at rates of reimbursement equal to or greater than the prevailing integrated state/Medicaid rate for early intervention services as established by the Department of Human Services.
- (c) This section shall not apply to insurance coverage providing benefits for: (1) hospital confinement indemnity; (2) disability income; (3) accident only; (4) long-term care; (5) Medicare supplement; (6) limited benefit health; (7) specified disease indemnity; (8) sickness or bodily injury or death by accident or both; and (9) other limited benefit policies.

Based on a collaborative approach between families and professionals, early intervention services promote the development of infants and toddlers with developmental delays and challenges. Children must be under age 3 and have a developmental disability or delay in one or more areas.

These services may be either remedial or preventive in nature.

Early intervention may focus on the child individually or on the child and the family together. Early intervention programs may be center-based, home-based, hospital-based, or any other combination. Services range from identification of development delays and challenges (hospital or school screening and referral services) to diagnostic and direct intervention programs and may begin at any time up to the age of three years. While the child's development is enhanced, the family is able to receive support and assistance.

Children must be under age 3 and have a developmental disability or delay in one or more areas.

Cost

There is no cost to families to receive Early Intervention services. Children do not have to be eligible for RI Medicaid to receive service

The guidebook and list of EI providers is available online at the EOHHS website:

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

COVERAGE

Benefits may vary between groups and contracts. Please refer to the appropriate Benefit Booklet, Evidence of Coverage, or Subscriber Agreement for applicable Early Intervention benefits/coverage.

Please note that generally benefits that are available from other sources, such as those mandated by federal or state law or through legal action, are not covered. Please refer to your member certificate/subscriber agreement contract for further details.

CODING

Commercial Products

The codes listed below are covered under a part of an Early Intervention Program. To ensure correct claims processing, claims must be filed with the correct modifier.

Note: To ensure correct claims processing for COVID-19 Telehealth Early Intervention Services, refer to the billing instructions below for the appropriate modifier and place of service. (N/A=not applicable for COVID-19 Telehealth EI services)

2021 Early Intervention Codes and Related Telemedicine/Telephone Services							
Code	Applicable Modifier (s)	Description	Telephone Only POS 02 or POS 10 and Modifier FQ	Telemedicine POS 02 or POS 10 and Modifier 95			
92522	ЕР	Evaluation of speech sound production (e.g., articulation, phonological process, apraxia, dysarthria) Append modifier 52 for reduced services	X	X			
92523	ЕР	Evaluation of speech sound production (e.g., articulation, phonological process, apraxia, dysarthria); with evaluation of language comprehension and expression (e.g., receptive and expressive language) Append Modifier 52 for reduced services	X	X			
92557	EP	Comprehensive audiometry threshold evaluation and speech recognition	N/A	N/A			
96111	ЕР	Developmental testing, (includes assessment of motor, language, social, adaptive, and/or cognitive functioning by standardized developmental instruments) with interpretation and report	N/A	N/A			
97161	EP	Physical therapy evaluation: low complexity	N/A	N/A			
97162	EP	Physical therapy evaluation: moderate complexity	X	X			
97163	EP	Physical therapy evaluation: high complexity		X			
97164	EP	Re-evaluation of physical therapy	X	X			
97165	EP	Occupational therapy evaluation, low complexity	X	X			
97166	EP	Occupational therapy evaluation, moderate complexity	X	X			
97167	EP	Occupational therapy evaluation, high complexity		X			
97168	EP	Occupational therapy re-evaluation	X	X			
H0046	EP	Mental health services, not otherwise specified	X	X			
H2000	EP	Comprehensive multidisciplinary evaluation	X	X			
S9446	EP, GN, GO, GP, TF, TG	Patient education, not otherwise classified, non-physician provider, group, per session		X			
T1013	EP, TL	Sign language or oral interpretive services, per 15 minutes	N/A	N/A			
T1016	EP, TF, TFU1, TFU2, TG	Case management, each 15 minutes	N/A	N/A			

T1023	EP, TL	Screening to determine the appropriateness of consideration of an individual for participation in a specified program, project or treatment protocol, per encounter	X	X
T1024	EP, AE, AJ, GN, GO, GP, HN,HP,TD, TG,TGHO, TLHO	Evaluation and treatment by an integrated, specialty team contracted to provide coordinated care to multiple or severely handicapped children, per encounter	X	X
T1027	EP, AE, AJ, HP, TG, TD, TGHO,GN, GO,GP,HN	Family training and counseling for child development, per 15 minutes	X	X
T2004	EP	Non-emergency transport; commercial carrier, multi-pass	N/A	N/A
T5999	EP	Supply, not otherwise specified	N/A	N/A
V2799	EP	Vision service, miscellaneous	N/A	N/A
V5008	EP	Hearing screening	N/A	N/A
V5010	EP	Assessment for hearing aid	N/A	N/A

Units:

For current information on allowed units please refer to the Rhode Island Department of Health Services in the Claims section:

 $\underline{\text{http://www.eohhs.ri.gov/ProvidersPartners/GeneralInformation/ProviderDirectories/EarlyInterventionProgram.aspx}$

RELATED POLICIES

Telemedicine/Telephone Services for Commercial Products

PUBLISHED

Provider Update, December 2022

Provider Update, July 2021

Provider Update, October 2020

Provider Update, February 2020

Provider Update, February 2019

Provider Update, February 2018

REFERENCES

1 Rhode Island Department of Human Services Early Intervention Services http://www.eohhs.ri.gov/Consumer/FamilieswithChildren/EarlyIntervention.aspx

----- CLICK THE ENVELOPE ICON BELOW TO SUBMIT COMMENTS

This medical policy is made available to you for informational purposes only. It is not a guarantee of payment or a substitute for your medical judgment in the treatment of your patients. Benefits and eligibility are determined by the member's subscriber agreement or member certificate and/or the employer agreement, and those documents will supersede the provisions of this medical policy. For information on member-specific benefits, call the provider call center. If you provide services to a member which are determined to not be medically necessary (or in some cases medically necessary services which are non-covered benefits), you may not charge the member for the services unless you have informed the member and they have agreed in writing in advance to continue with the treatment at their own expense. Please refer to your participation agreement(s) for the applicable provisions. This policy is current at the time of publication; however, medical practices, technology, and knowledge are constantly changing. BCBSRI reserves the right to review and revise this policy for any reason and at any time, with or without notice. Blue Cross & Blue Shield of Rhode Island is an independent licensee of the Blue Cross and Blue Shield Association.

