



# Early Intervention and Third Party Payers in Massachusetts

A progressive partnership serving infants  
and toddlers with developmental concerns

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# Early Intervention & Third Party Payers in Massachusetts

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# 1. Definition

Early Intervention is a comprehensive, community-based program of integrated developmental services which uses a family centered approach to facilitate the developmental progress of children between the ages of birth and three years whose developmental patterns are atypical, or are at serious risk to become atypical through the influence of certain biological or environmental factors.



# Definition, continued

Early Intervention services are focused on the family unit, recognizing the crucial influence of the child's daily environment on his or her growth and development. Therefore, Early Intervention staff attempt to work in partnership with those individuals present in the child's natural environment, which may include settings other than the child's home. The program seeks to support and encourage the caregiver's growth toward independence in planning for the child's continuing and changing needs.



## 2. Eligibility

- Children with a diagnosis known to result in developmental delay
- Children evaluated and found to have a developmental delay of 25% in one domain based upon their age
- Children at risk of developmental delay



## 3. Overview of Current System

- All services are purchased
- \$90 million in FY'05; projected 30,251 children to be served
- 62 Early Intervention providers
- Range of disciplines in each program
- Transdisciplinary service model



## 4. Passage of EI Legislation - 1983

- Required statewide service system
- Established Public Health as lead agency
- Required development of service standards
- Required Medicaid participation

# Who Pays: Direct Service Only, FY'05

(Excludes Autism & Blind)

■ State appropriation	\$	25.4 M
■ Third party		38.9 M
■ Medicaid		18.2 M

# 5. Medicaid Participation – 1985

- Reimbursement model changed from cost reimbursement to unit based
- Currently 7 reimbursable services & current hourly rates:
  - Home Visits \$ 73.80
  - Center Individual 61.88
  - Community Based Group 28.32
  - EI Only Group 21.56
  - Parent Group 27.68
  - Screening 86.24
  - Assessment 99.00
- DPH serves as gatekeeper to Medicaid

# 6. Mandated Insurance Coverage – 1990

- Bill introduced in 1986
- Legislation passed in January 1990
- Law took effect in April 1990
- Fully in effect April 1991
- “Medically Necessary” criteria
- Service costs capped
  - \$5,200 yearly/\$15,600 aggregate

# 7. What Works

- Vision, Commitment, Persistence
- Positive, cooperative working relationship with insurers and Medicaid
- Plans with Early Intervention coordinators work best
- Insurers did not strongly oppose increase in cap to \$5,200 annually, effective 7/1/04
- Joint efforts related to billing/claims submission
- Ongoing identification of systemic problems, programs, payors