

## STATE LEAD AGENCY UPDATE

### Missed Visits

Given the frequency of illness in young children, family or provider vacations, and other unforeseen issues, missed sessions are inevitable. However, they should not be routine occurrences. Providers should make every effort to avoid missing service sessions. A provider can reschedule a missed visit based upon the guidelines stated below:

- If a weekly or monthly service session cannot be rescheduled within seven days of the original scheduled date, it should be considered a missed session.
- Never provide a make-up session on the same date that a regular session has been scheduled. Do not split the total amount of time of the missed session across several subsequent visits.
- If it is necessary for a provider to miss a number of service sessions due to an extended vacation or prolonged illness/injury, etc., the family should be given the option of selecting another equally qualified provider to fill in during the absence or go without the service for the length of the expected absence.
- Always document in the statewide data management system the date of the missed visit, the reason for the missed visit and if you rescheduled based on the above guidelines.
- Always bill for a make-up session based upon the actual date of service, not the date of the missed session.

A “no show” is different from a missed visit. A “no show” is defined as a visit that was attempted, but the family did not answer the door when the provider arrived. A “missed visit” is a visit that the provider had prior knowledge that the family, or provider, would not be able to keep the scheduled appointment.

Each provider must use the service log or communication log in the child’s statewide data management system record to record each date of service. Documentation is required for quality assurance purposes by First Steps, Medicaid and any other payor. If a contact was scheduled but did not occur, a note should be completed noting the missed contact and any plan for future action.



**Insurance  
REMINDER**

Please update/review all insurance information with the families. Insurance policies/coverage tend to change with the new year. This is essential in ensuring that your claims are processed in a timely manner for all future visits.

Contact the SLA should you have any questions.

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# STATE LEAD AGENCY UPDATE

## Dec. 1 Child Count

The Lead Agency will be submitting two data tables to the Office of Special Education Programs later this week. This is referred to as the 618 Data Collection that is required by the Individuals with Disabilities Education Improvement Act (IDEA). The federal data count is a day in time count—it does not reflect the cumulative number of all children who received any type of service from First Steps for the full year. Table 1 is the count of children with active IFSPs. Table 2 is the count of children sorted by the various locations where the majority of the early intervention services are delivered.

**Table 1—Child Count**

Date Count Taken	0-1	1-2	2-3	Total
12/01/10	357	1392	2892	4641

This December's count is lower by 358 children when compared to the count taken on Dec. 1, 2009.

**Table 2—Settings**

Setting	0-1	1-2	2-3	Total
Home	347	1324	2678	4349
Community-Based Setting	5	63	204	272
Other Setting	2	2	16	20

The data for 2010 is consistent with previous data counts. First Steps has reported a range of 99.3 -99.5 percent of children receive the majority of their services at home or at community-based settings since 2005.

## Regulation Update:

The regulations have moved forward through the promulgation process and we anticipate that they will be finalized in February. There are a number of minor changes to the regulations based upon public comment and LRC suggested changes to align the regulations with required format.

There will be several informational sessions and training opportunities for people to learn the new regulations. One of the most interesting phenomena of this process has been the uncovering of “urban myths” in First Steps. Service coordinators and providers, and even Lead Agency staff, have operated a certain way, convinced that the practice was in regulation. A good portion of the public comments cited old regulation language that did not change. We have set a goal to clean up these “myths” and get all providers, service coordinators, POE Managers and Lead Agency staff on the same page.

Training will not begin until we have a policy and procedure manual in place. Expect some of the forms to be different as well as procedures. It's a new day for First Steps!

## Insurance Billing Progress

Insurance billing for the first half of the fiscal year (July 1, 2010 to June 30, 2011) is \$319,976. This is significantly higher than what was collected for the previous full fiscal year. Kudos to the early intervention providers who are billing appropriately!

We continue to hear about providers who are not billing and sometimes find individuals/agencies who are not billing. When a provider is found to have not billed insurance, we provide technical assistance to ensure that the provider understands the contractual obligations that they agreed to when they signed the contract. Payments made by First Steps may be recouped if they were paid and the provider did not appropriately bill insurance first. If the provider continues to not bill, they are put on a compliance agreement and payment for all claims is held until evidence of insurance billing is received by this office.

We are working to develop an option for billing insurance through TOTS—which should be available later this spring. We are also exploring ways to track provider claims for a certain period of time with no EOB submitted. This will help identify providers who are in need of assistance in billing.

## Other State Lead Agency News.....

- Since the termination of the Technical Assistance contracts, state lead agency staff has assumed new duties as needed. New provider enrollment training is occurring as needed in a central location. Assessment training will be provided once a modification to the KEDS contract is finalized. The contract modification includes face-to-face training and the development of online modules for the instruments.
- Data entry for KEDS currently represents 26.1percent of children with a minimum of 2 data points. Previous level was 17.4 percent.
- Changes to TOTS: A number of changes have been made to TOTS. Some were “tweaking” existing features to run more efficiently, some were wording changes and some are associated with changes to regulations. Several changes are in the planning stage for TOTS enhancements. These complex enhancements include:
  - ◆ Online Provider Directory
  - ◆ Scheduling and Notification Tool for Service Coordination
  - ◆ Insurance Billing
  - ◆ Parent View
  - ◆ KEDS evaluation assignment

## **SLA TRAINING COORDINATOR UPDATE**

### **First Steps Orientation - Face-to-Face**

Jan 26th                      TRAIN #: 1025113

9:30a.m.-4:30p.m. (EST)

Frankfort, KY

Feb. 8th                      TRAIN #: 1025673

9:30a.m.-4:30p.m. (EST)

Frankfort, KY

Feb. 24th                      TRAIN #: 1025711

9:30a.m.-4:30p.m. (EST)

Frankfort, KY

March 16th                      TRAIN #: 1025714

9:30a.m.-4:30p.m. (EST)

Frankfort, KY



### **Criterion-referenced Assessment**

Assessment trainings are still on hold at this time. The State Lead Agency is trying hard to resolve this issue. It is recommended that providers who are in need of the training contact the local Regional Training Centers to find possible training opportunities. Updates regarding the assessment trainings will be sent through the newsletter and/or the listserv.

# PROFESSIONAL DEVELOPMENT OPPORTUNITIES

## HUMAN DEVELOPMENT INSTITUTE SEMINAR SERIES

Jerry Chaney contact  
859-257-1714 phone  
859-323-1901 fax  
jerry.chaney@uky.edu e-mail

[http://chfs.ky.gov/  
dph/firststeps.htm](http://chfs.ky.gov/dph/firststeps.htm)

**HDI Spring 2011 Seminar Series** will focus on issues of concern and advocacy relating to individuals with disabilities and their families. **All seminars are offered at no charge and are open to statewide consumers, caregivers and professionals. CEUs are pending for professionals in social work, mental health, therapy, rehabilitation, education and psychology.** For more information or to register for a seminar, visit HDI's website at [www.hdi.uky.edu/sf/news/](http://www.hdi.uky.edu/sf/news/).

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**Feb. 18<sup>th</sup> 1:00 – 3:00pm**

***Universal Applications of iPhones & iPads for Persons with Developmental Disabilities and Communication Disorders***

**Dr. Jane Kleinert** Assistant Professor, U.K. Division of Communication Disorders, Department of Rehabilitation Sciences

**Christina Espinosa** MRC, CRC, H.D.I. Pre-Service Distance Learning Coordinator & Rehabilitation Technologist

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**March 4<sup>th</sup> 1:00 – 3:00pm**

***Transitioning Students with Disabilities from High School to the Community: Issues and Programs***

**Meada Hall, Ed. D.** Project Director, Community Based Work Transition Program

**Jeff Bradford MSW** Project Director, Supported Higher Education Project  
**Dr. Lisa Ruble** Associate Professor, U.K. School Psychology Program  
Department of Educational, School, and Counseling Psychology

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**April 8<sup>th</sup> 1:00pm – 3:00pm**

***Re-creating Ourselves through Recreation***

**Barb Trader** Executive Director, TASH  
**Dr. Kathy Sheppard-Jones** HDI Training Director & Adjunct Professor  
& A Panel of Recreation Enthusiasts

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Seminars will be held at the HDI Coldstream training room, located at 1525 Bull Lea Rd., Lex. 40511. We will teleconference the seminars live to the Mineral Industries Building conference room on UK's campus, the 7<sup>th</sup> floor HDI conference room at Kentucky Utilities Building, as well as other approved statewide sites!

**"Children are like wet cement. Whatever falls on them makes an impression."**

**Dr. Haim Ginott**