MEDICAL POLICY

SUBJECT: EARLY INTERVENTION SERVICES
POLICY NUMBER: 10.01.09
CATEGORY: Government Mandate

EFFECTIVE DATE: 02/27/03
REVISED DATE: 04/22/04, 04/28/05, 04/27/06, 04/26/07,
04/24/08, 04/23/09, 06/24/10, 06/24/11,
06/28/12, 06/27/13, 06/26/14, 06/25/15,
06/22/16, 08/25/17

• If a product excludes coverage for a service, it is not covered, and medical policy criteria do not apply.
• If a commercial product, including an Essential Plan product, covers a specific service, medical policy criteria apply to the benefit.
• If a Medicare product covers a specific service, and there is no national or local Medicare coverage decision for the service, medical policy criteria apply to the benefit.

POLICY STATEMENT:

I. Coverage is available for services provided under the Early Intervention Program in accordance with the terms of the member’s subscriber contract.

II. Benefits are not available for the screening evaluation to determine if the child is eligible for the Early Intervention Program; nor are benefits available for reevaluation to determine if the child is qualified for continuation in the program.

Refer to Corporate Medical Policy #3.01.06 regarding Developmental Evaluation and Testing.

Refer to Corporate Medical Policy #10.01.06 regarding Audiology Screening of Newborns.

POLICY GUIDELINES:

I. Private health insurance is primary to the Early Intervention Program.

II. Early Intervention services are covered until the child’s 3rd birth date. However, a child with a disability that becomes 3 years of age on or before August 31st can, if requested by the parent/guardian, receive Early Intervention services specified in the Individualized Family Service Plan (IFSP) until September 1 of that calendar year. If a child becomes 3 years of age after September 1st, a parent can request services that are already being provided be continued until the 2nd day of January of the next calendar year.

III. Early Intervention services must be covered if they would normally be covered under the member’s subscriber contract. Services not usually covered under the contract include, but are not limited to: County claims processing time, service coordination, maintenance services and transportation.

IV. Benefits provided for Early Intervention services will not reduce services otherwise available under the contract. For example, if a contract allows 6 speech therapy visits and the 6 visits have not been used, 6 visits must be covered under Early Intervention and 6 visits must be left for other services under the contract.

V. Early Intervention services cannot be excluded based upon a government program exclusion.

VI. Only qualified professionals who are licensed, certified, or registered in their discipline and approved by New York State Department of Health can deliver Early Intervention services.

DESCRIPTION:

The Early Intervention Program is a statewide program that provides many different types of services to infants and toddlers with disabilities and their families. In New York State, the Department of Health is the lead state agency responsible for the Early Intervention Program.

Early Intervention services can help families learn the best ways to care for their child, support and promote their child’s development, and include their child in family and community life. These services can be provided anywhere in the community.
The Early Intervention program offers therapeutic and support services to infants and toddlers with disabilities and their families, including family and education counseling, home visits, parent support groups, special instruction, speech pathology and audiology, occupational and physical therapies, psychological services, service coordination, nursing and social work services, nutritional services, vision services and assistive technology devices and services.

Children are eligible for the Early Intervention Program if they are under three years of age and have a:

I. Disability: a diagnosed physical or mental condition that often leads to problems in development (e.g., Down’s syndrome, autism, cerebral palsy, vision or hearing impairment); or

II. Developmental delay: in which the child has not attained developmental milestones expected for the child’s chronological age, adjusted for prematurity, in one or more of the following areas: physical, cognitive, communication, social-emotional, and/or adaptive development.

For the purposes of the Early Intervention program, New York State EIP regulations 10 NYCRR Section 69-4.1(g) defines a developmental delay as that which has been measured by qualified personnel using informed clinical opinion, appropriate diagnostic procedures and/or instruments, and documented as any of the following:

I. A twelve month delay in one functional area;

II. A 33% delay in one functional area or a 25% delay in each of two areas; or

III. If appropriate standardized instruments are individually administered in the evaluation process, a score of at least 2.0 standard deviations below the mean in one functional area or score of at least 1.5 standard deviations below the mean in each of two functional areas.

When referred for evaluation, children receive a multidisciplinary evaluation to determine if they are eligible for services under the Early Intervention Program. An Individualized Family Service Plan (IFSP) is developed by the Early Intervention officials and the child’s parents. Services are provided in accordance with the IFSP.

Pursuant to New York State law, effective November 1, 2012, each contract providing physician services, medical, major medical, or similar comprehensive-type coverage must provide coverage for the screening, diagnosis, and treatment of Autism Spectrum Disorders when prescribed or ordered by a licensed physician or a licensed psychologist for medically necessary services. Treatment includes services provided by a licensed or certified speech therapist, occupational therapist, physical therapist, and social worker when the policy generally provides such coverage. Therapeutic treatment must include care that is deemed habilitative or non-restorative.

<table>
<thead>
<tr>
<th>CODES</th>
<th>Number</th>
<th>Description</th>
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<tbody>
<tr>
<td>Eligibility for reimbursement is based upon the benefits set forth in the member’s subscriber contract.</td>
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<tr>
<td>CODES MAY NOT BE COVERED UNDER ALL CIRCUMSTANCES. PLEASE READ THE POLICY AND GUIDELINES STATEMENTS CAREFULLY.</td>
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<tr>
<td>Codes may not be all inclusive as the AMA and CMS code updates may occur more frequently than policy updates.</td>
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<table>
<thead>
<tr>
<th>CPT</th>
<th>Numerous</th>
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<tbody>
<tr>
<td>HCPCS</td>
<td>Numerous</td>
</tr>
<tr>
<td>ICD9:</td>
<td>Numerous covered diagnoses</td>
</tr>
<tr>
<td>315.31</td>
<td>Expressive language disorder</td>
</tr>
<tr>
<td>315.32</td>
<td>Mixed receptive-expressive language disorder</td>
</tr>
<tr>
<td>315.34</td>
<td>Speech and language developmental delay due to hearing loss</td>
</tr>
<tr>
<td>315.35</td>
<td>Childhood onset fluency disorder</td>
</tr>
<tr>
<td>315.39</td>
<td>Developmental speech or language disorder, other</td>
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</table>

Proprietary Information of Excellus Health Plan, Inc.
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| 315.4 | Developmental coordination disorder |
| 315.5 | Mixed development disorder |
| 315.8 | Other specified delays in development |
| 315.9 | Unspecified delay in development |
| 783.40-783.43 | Lack of expected normal physiological development in childhood (code range) |
| ICD10: | 
| F80.0-F80.9 | Developmental disorders of speech and language (code range) |
| F81.9 | Developmental disorder of scholastic skills, unspecified |
| F82 | Specific developmental disorder of motor function |
| F88-F89 | Other or unspecified disorders of psychological development (code range) |
| H93.25 | Central auditory processing disorder |
| R62.0 | Delayed milestone in childhood |
| R62.50-R62.59 | Other and unspecified lack of expected normal physiological development in childhood (code range) |

REFERENCES:


*key article

KEY WORDS:

Early Intervention Program.

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**CMS COVERAGE FOR MEDICARE PRODUCT MEMBERS**

Based on our review, early intervention services are not addressed in National or Local Medicare coverage determinations or policies.