

**State: CONNECTICUT
AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED
CATEGORICALLY NEEDY GROUP(S): ALL**

b.2. Early Intervention Services (EIS) Pursuant to EPSDT (also known as Birth to Three)

A. Service Description

The following services are covered as EPSDT services pursuant to sections 1905(a)(4)(B) and 1905(r)(5) of the Social Security Act and are available to each Medicaid beneficiary under age twenty-one (hereafter referred to as “child”) in accordance with the description below. All services are provided as one or more of the following:

- (1) EPSDT screening and diagnostic services pursuant to sections 1905(a)(4)(B) and sections 1905(r)(1), (2), (3), or (4);
- (2) EPSDT special services pursuant to section 1905(r)(5) provided as physicians’ services or other licensed practitioner services by or under the supervision of a physician or other licensed practitioner, pursuant to sections 1905(a)(5), (6), or (21), as applicable to the provider;
- (3) EPSDT special services pursuant to section 1905(r)(5) provided as medical supplies, equipment, and appliances suitable for use in the home within the home health benefit category pursuant to section 1905(a)(7) and 42 C.F.R. § 440.70(b)(3);
- (4) EPSDT special services pursuant to section 1905(r)(5) provided as physical therapy, occupational therapy and services for individuals with speech, hearing, and language disorders in accordance with section 1905(a)(11) and 42 C.F.R. § 440.110; or
- (5) EPSDT special services pursuant to section 1905(r)(5) provided as preventive services in accordance with section 1905(a)(13)(C) and 42 C.F.R. § 440.130(c) recommended by a physician or other licensed practitioner of the healing arts within his or her scope of practice under state law to prevent disease, disability, and other health conditions or their progression; prolong life; and promote physical and mental health and efficiency. A physician or other licensed

**State: CONNECTICUT
AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED
CATEGORICALLY NEEDY GROUP(S): ALL**

Early Intervention Services (EIS) Pursuant to EPSDT (also known as Birth to Three)

practitioner's signature on the Individualized Family Service Plan (IFSP) is that physician or practitioner's recommendations that the services be provided as outlined in the IFSP.

For all of these categories, Early Intervention Services are provided to address a child's developmental delays or disabilities in accordance with an IFSP. An IFSP is developed for each child to meet the unique needs of the child and to enable the child's caregivers to assist in promoting the child's appropriate development. The IFSP is developed to determine and outline the priorities for treatment. The IFSP is developed by the child's caregivers and a multi-disciplinary team with professionals appropriate to determine each child's unique needs that includes and is signed by at least one of the following licensed practitioners: audiologist, licensed marital and family therapist, advanced practice registered nurse, registered nurse, occupational therapist, optometrist, physical therapist, physician, physician assistant, licensed professional counselor, licensed psychologist, licensed clinical social worker, licensed master social worker, or speech and language pathologist or another category of practitioner who is licensed by the Department of Public Health, is authorized to practice without supervision, and meets the criteria of the Connecticut Birth to Three System as qualified to sign an IFSP. The IFSP defines individualized goals, objectives and strategies for treatment, including recommendations for specific EIS including the frequency, intensity, duration, and setting of recommended EIS, and which qualified EIS Providers will deliver services. The IFSP is agreed upon by the IFSP team and signed by the child's caregiver.

B. Service Components

The following components of Early Intervention Services (EIS) are provided pursuant to each child's IFSP, except that screenings, evaluations and assessments may also be performed as necessary to determine if EIS are medically necessary for a child and to develop and update the IFSP. To the maximum extent possible and appropriate, services are provided in the child's natural settings (home or community settings for typically developing peers).

1. Developmental Screening

**State: CONNECTICUT
AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED
CATEGORICALLY NEEDY GROUP(S): ALL**

Early Intervention Services (EIS) Pursuant to EPSDT (also known as Birth to Three)

- a. Description: Screening services are conducted pursuant to sections 1905(a)(4)(B) and 1905(r)(1) and include activities completed at regular intervals carried out by qualified EIS Providers to identify, at the earliest possible age, children suspected of having a developmental delay or disability. It includes the administration of appropriate validated instruments approved by the Connecticut Birth to Three System by personnel trained to administer those instruments.

Screening also includes screening services for specific concerns for which EIS may be medically necessary, including, but not limited to autism spectrum disorder, to determine which services are indicated pursuant to the IFSP.

- b. Qualified Providers: See section C below for required provider qualifications for EIS Programs. Within an EIS Program, each individual provider listed in section C below is qualified to perform screenings to the extent appropriate within such individual's scope of practice.

2. Developmental Evaluation

- a. Description: Comprehensive multi-disciplinary evaluations are conducted to determine each child's developmental status, including related physical and mental conditions. All evaluations are multi-disciplinary and more than one type of practitioner may be present at the same time or at different times as appropriate and necessary to evaluate areas of development, including, but not limited to communication, cognition, adaptive skills, social-emotional skill, and physical development including motor, hearing, nutrition, vision and any other appropriate area. The evaluation is necessary to determine if EIS may be medically necessary for a child and to determine which areas would be appropriate for assessment to determine specific recommended EIS as necessary to meet each child's unique needs. After an evaluation, depending on the findings of the evaluation, if appropriate, a child is referred for an assessment.

**State: CONNECTICUT
AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED
CATEGORICALLY NEEDY GROUP(S): ALL**

Early Intervention Services (EIS) Pursuant to EPSDT (also known as Birth to Three)

- b. Qualified Providers: See section C below for required provider qualifications for EIS Programs. Within an EIS Program, the following individual providers are qualified to perform evaluations within each individual's scope of practice (see section C below for detailed descriptions, qualifications, and cross-references to the applicable benefit category for each type of individual provider): Audiologists, Audiologists – CFY, BCBAs, Developmental Therapists, Developmental Therapy Specialists, LMFTs, LMFT Interns, LPCs, LPC Interns, APRNs, RNs, Occupational Therapists, Physical Therapists, Physicians, Physician Assistants, Licensed Psychologists, Licensed Psychologist Interns, LCSWs, LCSW Interns, LMSWs, Speech and Language Pathologists, Speech and Language Pathologists – CFY, and Optometrists.

3. Assessments

- a. Description: Based on the recommendations of the evaluation, initial and ongoing assessments are conducted to determine the frequency, intensity, duration, setting, and type of EIS needed. Assessments are necessary in order to enable the provider to develop, implement, and update the IFSP. Assessments focus on areas and conditions as appropriate for each child and based on the evaluation, including assessments for specific conditions as appropriate, including, but not limited to assessments to determine specific services that are medically necessary to address hearing impairments, vision impairments and autism spectrum disorder. Assessments, including new or repeated components of an assessment, may be performed, updated and/or repeated as medically necessary for a child, such as if there are delays in other areas of development than the focus of the initial or earlier assessments.
- b. Qualified Providers: See section C below for required provider qualifications for EIS Programs. Within an EIS Program, the following individual providers are qualified to perform assessments within such individual's scope of practice (see section C below for

**State: CONNECTICUT
AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED
CATEGORICALLY NEEDY GROUP(S): ALL**

Early Intervention Services (EIS) Pursuant to EPSDT (also known as Birth to Three)

detailed descriptions, qualifications, and cross-references to the applicable benefit category for each type of individual provider): Assistive Technology Professionals, Audiologists, Audiologists – CFY, BCBA's, Developmental Therapists, Developmental Therapy Specialists, LMFTs, LMFT Interns, APRNs, RNs, Licensed Professional Counselors, Licensed Professional Counselor Interns, Occupational Therapists, Optometrists, Opticians, Physical Therapists, Physicians, Physician Assistants, Licensed Psychologists, Licensed Psychologist Interns, LCSWs, LMSWs, LCSW Interns, Speech and Language Pathologists, and Speech and Language Pathologists – CFY.

4. Development, Review, Update, and Monitoring of the IFSP

Description: This service component includes participating in and facilitating the development, review, revisions, and updates to the IFSP. Based on the assessment, the provider develops the IFSP to determine and outline the individualized goals, objectives, and strategies for treatment, including specific types, frequency, intensity, duration and setting of recommended EIS. All IFSP-related services are multi-disciplinary and more than one type of practitioner may be present at the same time or at different times as appropriate and necessary to develop, review, update, and monitor the IFSP. The IFSP is developed in collaboration with the child's caregivers and a multi-disciplinary team that includes professionals appropriate to determine each child's unique needs, including at least one of the following licensed practitioners: audiologist, licensed marital and family therapist, advanced practice registered nurse, registered nurse, occupational therapist, optometrist, physical therapist, physician, physician assistant, licensed professional counselor, licensed psychologist, licensed clinical social worker, licensed master social worker, or speech and language pathologist or another category of practitioner who is licensed by the Department of Public Health, is authorized to practice without supervision, and meets the criteria of the Connecticut Birth to Three System as qualified to sign an IFSP. As part of this process, the provider coordinates with other appropriate

**State: CONNECTICUT
AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED
CATEGORICALLY NEEDY GROUP(S): ALL**

Early Intervention Services (EIS) Pursuant to EPSDT (also known as Birth to Three)

providers and the child’s caregivers. Revisions and updates are provided as necessary and appropriate in order to ensure that the IFSP continues to be appropriately tailored to each child’s needs.

- a. Qualified Providers: See section C below for required provider qualifications for EIS Programs. Within an EIS Program, each of the individual providers identified in section C below is qualified to develop, evaluate, revise, update, and monitor the IFSP within such individual’s scope of practice, so long as the individual completes applicable training specified by the Connecticut Birth to Three System.

5. Early Intervention Services (EIS)

- a. Description: For the benefit of the child, EIS is provided in accordance with the IFSP and includes assisting caregivers with enhancing the functional development of the child with an emphasis on specific developmental areas appropriately tailored to each child’s needs, including, but not limited to, cognitive processes, communication, motor, behavior and social interaction.

As needed, EIS include consulting with the child’s caregivers to design or adapt environments, activities and materials to enhance the child’s development and collaborating with caregivers and other medical and EIS providers to support evidence-based services. The services are provided using a primary service provider model, where an individual qualified provider is primarily responsible for providing EIS, as part of a multi-disciplinary team to ensure that appropriate expertise is available as necessary to address each child’s unique needs. The provision of EIS is multi-disciplinary and more than one type of practitioner may be present at the same time or at different times as appropriate and necessary to provide ESI.

EIS also include assisting the family, for the benefit of the child, in gaining access to, and coordinating services, including making referrals to providers for needed services and scheduling

**State: CONNECTICUT
AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED
CATEGORICALLY NEEDY GROUP(S): ALL**

Early Intervention Services (EIS) Pursuant to EPSDT (also known as Birth to Three)

appointments; facilitating and participating in the development, review, and evaluation of IFSPs, coordinating all EIS provided under the IFSP, and planning transition out of early intervention.

EIS also includes coordinating and using other therapies, interventions, or services with assistive technology devices, such as those associated with the IFSP; training or technical assistance in the use of assistive technology devices for the benefit of the child; and training or technical assistance in the use of assistive technology devices for professionals or others who provide services to, or are otherwise substantially involved in child's the major life functions.

EIS must primarily be delivered face-to-face. When appropriate in accordance with the IFSP, EIS may also be delivered via synchronous real-time video conference, so long as it is: clinically appropriate for a child's circumstances for a specific service to be delivered other than face-to-face; is provided in accordance with all applicable Connecticut Birth to Three System Procedures; complies with all applicable information security and privacy requirements; and meets all other applicable requirements for a service, including, but not limited to provider qualifications, duration of service, and specific services provided.

- b. Qualified Providers: See section C below for required provider qualifications for EIS Programs. Within an EIS Program, each individual provider identified in Section C below is qualified to provide EIS within such individual's scope of practice.

6. Assistive Technology Devices

- a. Description: Assistive technology devices include any item, piece of equipment, or product system, whether acquired commercially off the shelf, modified, or customized, that is used to increase, maintain, or improve the child's functional capabilities. Assistive technology devices are provided as medical supplies, equipment, and appliances

**State: CONNECTICUT
AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED
CATEGORICALLY NEEDY GROUP(S): ALL**

Early Intervention Services (EIS) Pursuant to EPSDT (also known as Birth to Three)

suitable for use in the home pursuant to 42 C.F.R. § 440.70(b)(3). In general, assistive technology devices: can withstand repeated use; are primarily made and used to fulfill a medical or developmental purpose; are not useful in the absence of illness, injury, or developmental delay, defect or problem; and are not disposable. Assistive technology devices do not include a medical device that is surgically implanted, including a cochlear implant, or the optimization (*e.g.*, mapping), maintenance, or replacement of that device. In addition, assistive technology devices under this section do not include devices that are provided and billed by a medical equipment, devices and supplies provider within the home health benefit category detailed in section 7 of Attachment 3.1-A. These devices are coverable under the home health benefit category at section 1905(a)(7), in the subcategory regarding medical supplies, equipment, and appliances suitable for use in the home as detailed in 42 C.F.R. § 440.70(b)(3).

- b. Qualified Providers: See section C below for required provider qualifications for EIS Programs.

C. Provider Qualifications

1. Program Entity Qualifications

On behalf of each child, the child's parent(s), guardian(s) or other appropriate caregiver(s) may choose a qualified EIS Program as described below that provides services in the municipality where the child resides and that has been selected by the Connecticut Birth to Three System in accordance with the section 1915(b)(4) Selective Provider Contracting Waiver. Each EIS Program must assure and exercise sufficient supervision so that all of its affiliated EIS Providers meet all applicable Medicaid requirements and the applicable requirements of this section for the services that the individual EIS Providers provide.

EIS Programs are under contract with the Connecticut Birth to Three System within the Office of Early Childhood (OEC) as a result of a Request for Proposals

**State: CONNECTICUT
AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED
CATEGORICALLY NEEDY GROUP(S): ALL**

Early Intervention Services (EIS) Pursuant to EPSDT (also known as Birth to Three)

(RFP) process described in the 1915(b)(4) Selective Provider Contracting Waiver for the number of programs per town.

All EIS Programs must meet the provider qualifications of the Connecticut Birth to Three System within the Office of Early Childhood (OEC). These qualifications include that the provider must: be a private or municipal entity with an office in the state, have sufficient information technology knowledge and support, and be fiscally viable. In addition, the person with primary direct oversight of the EIS Program must have at least three years of experience administering a home-based program for families with infants and toddlers with disabilities. The Program must demonstrate compliance with providing timely IFSPs, providing timely new services, timely transition planning, and cultural and linguistic competency.

2. Individual Provider Qualifications

In order to provide EIS, each individual provider must be affiliated with an EIS Program (*i.e.*, employed by or under contract to the EIS Program). Individual providers may only provide EIS through their affiliation with the EIS Program. Qualified EIS Providers must meet all applicable Medicaid requirements and the applicable requirements of this section for the services that the individual EIS Providers provide through the IFSP process.

EIS providers must provide all services within their applicable scopes of practice under state law and in accordance with the Connecticut Birth to Three System Personnel Standards. The relevant Medicaid benefit category under which services are coverable when performed by each provider—and therefore also coverable under EPSDT—is listed below.

a. Licensed Practitioners

Audiologists; Occupational Therapists; Physical Therapists; and Speech and Language Pathologists: Same as described in section 11 of Attachment 3.1-A (section 1905(a)(11)).

**State: CONNECTICUT
AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED
CATEGORICALLY NEEDY GROUP(S): ALL**

Early Intervention Services (EIS) Pursuant to EPSDT (also known as Birth to Three)

Audiologists – Clinical Fellowship Year (CFY); and Speech and Language Pathologists – CFY: Individual has graduated with a degree that qualifies towards licensure as an audiologist or speech and language pathologist and is working towards licensure during the clinical fellowship year under the supervision of an audiologist or speech and language pathologist, as applicable (section 1905(a)(11) or 1905(a)(13)(C)).

Physical Therapy Assistants and Occupational Therapy Assistants: Licensed by the Department of Public Health as an physical therapy assistant or occupational therapy assistant and working under the supervision of a physical therapist or occupational therapist, as applicable (section 1905(a)(11)).

Physicians; Physician Assistants; Nurse Practitioners / Advanced Practice Registered Nurses (APRNs); Licensed Psychologists; Optometrists; Licensed Marital and Family Therapists (LMFTs); Licensed Clinical Social Workers (LCSWs); and Licensed Professional Counselors (LPCs): Same as described in section 5 or section 6, as applicable, of Attachment 3.1-A (sections 1905(a)(5), 1905(a)(6), and/or 1905(a)(21), as applicable).

Licensed Psychologist Interns; LCSW Interns; LPC Interns; LMFT Interns: This individual has graduated with a degree that would enable the individual to become a licensed psychologist, LCSW, LMFT, or LPC while working towards licensure and working under the direct supervision of the applicable licensed practitioner (section 1905(a)(6) or 1905(a)(13)(C)).

Licensed Master Social Workers (LMSWs): Licensed by the Department of Public Health as a master social worker (section 1905(a)(6)).

Registered Nurses (RNs): Licensed by the Department of Public Health as an RN (section 1905(a)(6)).

Licensed Practical Nurses (LPNs): Licensed by the Department of Public Health as an LPN and working under the supervision of an RN (section 1905(a)(6)).

**State: CONNECTICUT
AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED
CATEGORICALLY NEEDY GROUP(S): ALL**

Early Intervention Services (EIS) Pursuant to EPSDT (also known as Birth to Three)

Opticians: Licensed by the Department of Public Health as an optician (section 1905(a)(6)).

b. Non-Licensed Practitioners

Board Certified Behavior Analysts (BCBAs): Certified as a BCBA by the Behavior Analyst Certification Board (section 1905(a)(13)(C)).

Board Certified Assistant Behavior Analyst (BCaBA): Certified as a BaCBA by the Behavior Analyst Certification Board (section 1905(a)(13)(C)).

Developmental Therapists: Individuals with a Bachelor's or Master's degree in a human service field and who are certified by the Connecticut Department of Education in a field that is authorized as qualified to provide Early Intervention Services by the Connecticut Birth to Three System Personnel Standards (section 1905(a)(13)(C)).

Developmental Therapy Specialists: Individuals with a Bachelor's or Master's degree in a human service field credentialed by the Connecticut Birth to Three System within the Connecticut Office of Early Childhood as an Infant, Toddler, Family Specialist (section 1905(a)(13)(C)).

Developmental Therapy Associates: Individuals with a minimum of a Bachelor's degree in a human service field and working under the direct supervision of a licensed or certified EIS Provider (section 1905(a)(13)(C)).

Dietician/Nutritionist: Individual who is registered with the Department of Public Health as a dietician/nutritionist (section 1905(a)(13)(C)).

Assistive Technology Professionals (ATPs): Individual is certified as an ATP by the Rehabilitation Engineering and Assistive Technology Society of North America (RESNA) (section 1905(a)(13)(C)).

D. Limitations

**State: CONNECTICUT
AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED
CATEGORICALLY NEEDY GROUP(S): ALL**

Early Intervention Services (EIS) Pursuant to EPSDT (also known as Birth to Three)

A subsequent evaluation may not be completed less than 3 months after a prior evaluation was completed, which may be exceeded with prior authorization based on medical necessity.