



## New York State Department of Health Bureau of Early Intervention Guidance to Early Intervention Providers Regarding Novel Coronavirus (COVID-19)

April 1, 2020

*The following guidance will be in effect until further notice during the declared state of emergency for COVID-19.*

### Background

The New York State Department of Health (Department) Bureau of Early Intervention has received inquiries regarding the COVID-19 outbreak and Governor Andrew M. Cuomo's [Executive Order 202](#) declaring a state of emergency on March 7, 2020. It is also important to follow all directives from your local health department during this outbreak.

### Early Intervention Service Delivery

The Department issued "Interim Guidance for Home Care Services Regarding COVID-19" which serves as a companion to this information and is available at [https://coronavirus.health.ny.gov/system/files/documents/2020/03/03-16-20\\_home\\_care\\_services.pdf](https://coronavirus.health.ny.gov/system/files/documents/2020/03/03-16-20_home_care_services.pdf).

If families choose to suspend participation in an evaluation or early intervention services due to concerns about COVID-19, providers shall notify the service coordinator and the municipality within two (2) business days (Early Intervention Provider Agreement section VII. Notifications-(F)).

If a family decides to delay, suspend or otherwise terminate services, or close their case due to COVID-19, please document the following:

- Record the family's decision in service coordination notes.
- Record the family's decision in session notes.
- **On the child's Integrated Case Page in the New York Early Intervention System (NYEIS), create a note using the left-hand navigation "Notes" link.**
- If closing a service authorization in NYEIS, information should be added in the "Comments" field regarding the reason for closure.
- If a parent is closing their child's EIP case due to COVID-19, "Family Refused" should be selected for the closure reason.

## **Telehealth/Virtual Early Intervention Visits**

Telehealth (virtual) visits are normally not reimbursable under the Early Intervention Program. However, *during the declared state of emergency*, reimbursement will be available for individual telehealth (virtual) early intervention services provided in accordance with the child's Individualized Family Service Plan (IFSP), and for which there is a service authorization under the following circumstances:

- The family expresses a need for, and agrees to, use of virtual early intervention visits during the time of this declared emergency.
- Prior to initiating telehealth services, the family must sign a consent for service to be delivered virtually. The family must understand that virtual services pursuant to their IFSP will be in place of, and not in addition to, their IFSP mandate. Signing the consent can take place via email (if the family has consented to use of email), or via US postal service or fax.
- Providers and families have the necessary platform to conduct virtual therapy services. The service must include video and audio components for the entire duration of the authorized visit. If the technology fails and the full authorized session is not delivered, it is not billable.
- Therapy services cannot exceed the visits included in the child's IFSP.
- Virtual therapy services must be a minimum of 30 minutes in duration.
- Providers must maintain all required documentation of the therapy service and note that it was provided virtually. See additional documentation guidance below.
- Group services cannot be conducted virtually; however, the child's IFSP may be amended to reflect individual services, if appropriate.

When the declared state of emergency is no longer in place, there will be no reimbursement available for virtual early intervention services until formal guidance on the delivery of early intervention services via telehealth is issued.

## **Documentation**

### *Families*

Documentation of communications with families regarding delay, suspension or termination of services due to COVID-19 concerns is important not only for immediate case planning, but also to explain the gaps in service that will be identified later during monitoring. Documentation should specify whether the family is only concerned about COVID-19, or is directly affected by it (e.g., a family member has traveled to an affected country, or is ill or in self-quarantine). In cases where the family or a service provider is directly affected, providers should refer to the municipality's guidance regarding make-up sessions and adhere to the child's IFSP.

### *Providers*

In general, providers must adhere to Early Intervention regulations, especially section 69-4.9(g) and the terms of the Provider Agreement with regard to providing appropriate notice of their need to cancel services. All early intervention providers who identify COVID-19 as the reason for declining or ceasing to provide services, should also clearly document this in their notes and make all required notifications.

**IFSP**

If the circumstances of the family and/or provider prohibit an initial, 6 month or annual review of a child's IFSP from taking place in-person, the IFSP meeting may be convened utilizing telephone conferencing to discuss and develop the child's IFSP.

In addition, we encourage everyone to review the resources about novel coronavirus (COVID-19) at <https://coronavirus.health.ny.gov/home>.

For questions regarding any of the information in this document, please contact the Bureau of Early Intervention at [beipub@health.ny.gov](mailto:beipub@health.ny.gov).