Guidelines for Early Intervention Activities that should not be reported:

The following activities, while important in their own right, are not reportable on the ISR’s as they are not one of the four core job functions of Service Coordinators. This list is intended as a guide and is not intended to list all non-reimbursable activities.

1. Activities on behalf of deceased children or their families even though Early Interventionists may be asked to perform such activities at that time.

2. Verification of Medicaid numbers.

3. Medicaid eligibility determinations and re-determinations (Activities on behalf of a TEFRA Medicaid applicant seeking ICF/MR level of care are not reportable because this is part of a Medicaid eligibility process. Activities to gather information for an ICF/ID level of care with the intention of obtaining ICF/ID placement or waiver services are reportable.).

4. Transportation of child or family members for any purpose. Exception: the time spent during transport that reflects an Early Interventionists rendering a reportable service, such as role playing with the parent for the task ahead; instructing the parent regarding issues with the child. This reportable time must be documented accordingly.

5. Attempted reportable activities which were never completed (The attempt should be documented) telephone calls, home visits, and/or other face-to-face contacts.

6. Review of the child’s primary case record (Such as might occur when the child is new to the caseload).

7. Provision of information about a child for administrative purposes (Such as during a contractual compliance review).

8. Participation in recreational or social activities with the child or family just for social reasons.

9. Activities rendered during court proceedings (South Carolina Family Court, General Sessions Court, or Federal Court) which are convened to address criminal charges.

10. Activity with consumers in institutional settings (Such as nursing homes, ICF/ID, individual rehabilitation centers, or correctional facilities) Planning, which is normally a reportable activity, may need to begin prior to institutional discharge. Exception: time spent with child and parent while child is hospitalized in a medical, non-psychiatric hospital may be reported if the time is spent working on issues such as developing goals for the IFSP/FSP.
11. The act of writing service notes.

12. Completing statistical reports.

13. Clerical activity such as typing, copying, faxing, and filing.

14. Form letters not personalized to the individual and/or reflective of an individual need.

15. Completing forms for DDSN Family Support funding (Discussion with the parent/legal guardian and the gathering of information to support the request may be reportable.)

16. Services to a hospice recipient unless a prior authorization has been obtained from the hospice provider.

17. Time spent traveling to and from the various locations where services are rendered.

18. Time spent attending provider, regional, and/or central office trainings or other agency trainings.

19. Group activities.

20. Submission of changes to any CDSS or BabyTrac or review of documents of such systems.

21. Observation of a child. Exception; Observing for assessment and IFSP/FSP development purposes.

22. Providing emotional support and/or counseling is not reportable. Exception: providing information in a crisis situation.

23. Participating in activities such as going shopping with family for toys for the child. Exception:
   1.) trip to BabyNet loaner closet or other source to seek a specific type of item needed by the child/parent;
   2.) due to some impairment(s) of the child or the parent, the EI may need to go to the toy store and help a parent understand why a toy is or is not beneficial. There should be clear documentation to support why the early interventionist participated in this activity. Documentation will show this is a family training activity.

24. Services provided directly to the child in the absence of a parent or caregiver.

25. If the FSP expires, the Early Interventionist cannot report activity on an ISR during expiration. SCDDSN may reduce provider contract or payment accordingly. A service note entry should be made documenting why time is not being reported but the notes should continue to show time spent on activities. When the FSP has been completed the EI may begin reporting time on the ISR for any service that takes place
| 26. | Providers that chose to require forms (i.e., Social History) that are no longer required per DDSN Standards, may choose to continue to complete these forms; however, the completion of these forms is not reportable. |
| 27. | EI’s should not report **ANY** service that is provided once the child turns six years old. |
| 28. | EI’s should not report **ANY** services once the child’s DDSN eligibility has expired, unless the child is also BabyNet eligible. This includes children who were being served “High-risk” whose eligibility ends on their third birthday. If eligibility has not been established under another category by the child’s third birthday, services should not be reported. If service are provided to a consumer whose eligibility has expired, these should be documented in the service notes but NOT reported on the automated billing system. The service notes should explain why services are not being reported. |
| 29. | Family Training should not be provided at agency sponsored functions. |
| 30. | Contacts solely for the purpose of appointment reminders. |
| 31. | Completing 3203’s (BabyNet Authorizations) is considered an administrative function and should not be reported on an ISR. |
| 32. | If an IFSP/FSP calls for 4 visits in a month and there are 5 weeks in the month the EI cannot provide services during the 5th week and report time for it on an ISR. Services must be delivered as spelled out on the plan. |