

Family Cost Participation Fee Policy

The Maine Department of Education (DOE) and Child Development Services (CDS), as the Governor appointed local lead agency, is responsible for the development and implementation of the state's early intervention system for infants and toddlers, birth through two, who have disabilities or developmental delays and their Parents. The Maine DOE and CDS have established Family Cost Participation Fee Policies and Procedures in accordance with Part C of the Individuals with Disabilities Education Act (IDEA). The policies set forth here apply to Child Development Services and all its contracted providers of early intervention services as defined in Part C of IDEA.

Early intervention services provided to eligible infants and toddlers and their Parents shall be financed through multiple funding sources. Sources which may be available to finance individualized services, as appropriate, may include, but are not limited to, the following:

- Title V of the Social Security Act
- Title XIX of the Social Security Act
- Head Start Act
- Part C and Part B of the Individuals with Disabilities Act
- Developmentally Disabled Assistance and Bill of Rights Act
- Public Insurance (such as Medicaid or MaineCare)
- Private Health Insurance
- Long Term Care
- Medical Day Care
- Any medical program administered by the Secretary of the United States Department of Defense
- State appropriation, Early Childhood Intervention Program
- Family Cost Participation of an eligible child that receives direct early intervention services through the implementation of an Individualized Family Service Plan (IFSP)

Parent Definition

For the purposes of this policy, parent means:

- A. A biological or adoptive parent of a child;
- B. A foster parent;
- C. A guardian generally authorized to act as the child's parent, or authorized to make educational decisions for the child (but not the State if the child is a ward of the State);
- D. An individual acting in the place of a biological or adoptive parent (including a grandparent, stepparent, or other relative) with whom the child lives, or an individual who is legally responsible for the child's welfare; or
- E. A surrogate parent who has been appointed in accordance with Sec. 300.519 or section 639(a)(5) of the Act. Except as provided in the paragraph below, the biological or adoptive parent, when attempting to act as the parent under this part and when more than one party is qualified under paragraphs A-D of this section unless the biological or adoptive parent does not have legal authority to make educational decisions for the child.

If a judicial decree or order identifies a specific person or persons under paragraphs A through D of this section to act as the parent of a child or to make educational decisions on behalf of a child, then such person or persons shall be determined to be the parent for purposes of this policy.

Payor of Last Resort

Federal and state regulations require that any and all other financial resources be utilized toward the cost of services. CDS Part C funds must not be used to replace other sources of payment, including other governmental agencies. CDS Part C funds are to be used as a payor of last resort.

Child Development Services has the following responsibilities:

- Identify and coordinate all available funding resources for early intervention services from federal, state, local and private sources in Maine;
- Update the funding source information if a legislative or policy change occurs;
- Ensure it is the payor of last resort;
- Ensure that all CDS funding policies and procedures conform to federal regulations related to non-substitution of funds, interim payments and reimbursements, and non-reduction of benefits;

- Ensure that funds are permitted, but not required, to be used to pay for costs such as insurance premiums, deductibles, or co-payments;
- Ensure funds are used for activities that are reasonable and necessary for implementing Maine's early intervention program; and
- Ensure Part C funds used for direct early intervention services for eligible infants and toddlers and their Parents are not otherwise funded through other public or private sources.

Services Provided at Public Expense and Not Subject to Family Cost Participation Fees

Early Intervention services which must be provided at public expense, and for which no fees may be charged to parents:

1. Implementing the Child Find requirements of IDEA.
2. Evaluation and assessment and the functions related to evaluation and assessment.
3. Service Coordination services.
4. Administrative and coordination activities related to:
 - a. Development, review, and evaluation of IFSPs and interim IFSPs; and
 - b. Implementation of the procedural safeguards.

Medicaid or other public funding source will be billed for these services as appropriate and with authorized family consent.

Private insurance will be billed for these services with authorized family consent. If authorized family consent is not provided, insurance will not be billed, and the family will still not be charged for the services listed above, as these services are provided at no cost to all Parents.

Services Subject to Family Cost Participation Fees

Early Intervention services for which a Family Cost Participation Fee will be applied:

- Assistive Technology Services and Devices
- Audiology Services
- Family Training and Counseling
- Health Services
- Medical Services (for the purposes of diagnosis or evaluation only)
- Nursing Services
- Nutrition Services
- Occupational Therapy
- Physical Therapy
- Psychological Services
- Social Work Services
- Special Instruction
- Speech and Language Therapy
- Transportation Services
- Vision Services

Use of Public Insurance Benefits (such as Medicaid or MaineCare)

1. Parents eligible for CDS Early Intervention services will not be required to sign-up for or enroll in public insurance as a condition for their child to receive Early Intervention services.
2. CDS will obtain consent of the parents to use their public insurance to pay for Early Intervention services and any time their child's IFSP services are increased. Public insurance will not be used if access to public insurance will result in any of the following.
 - a. A decrease in the available lifetime coverage or any other insured benefit for the child or parent;
 - b. The child's parents paying for services that would otherwise be paid for by the public benefits or insurance program;
 - c. Any increase in premiums or cancellation of public benefits or insurance for the child or parents; or
 - d. The loss of eligibility for the child's parents for home and community-based waivers that are based on total health-related costs.
3. CDS will provide written notification to public insurance enrolled Parents for the purpose of informing them that personally identifiable information will be disclosed to public insurance for purposes of billing early intervention services provided to their child.
4. CDS will inform parents that they have the right to withdraw their consent to the disclosure of personally identifiable information for billing purposes at any time.
5. CDS will inform parents of any potential costs that the family may incur as a result of the use of public insurance.
6. CDS will not pay the cost of premiums for public insurance.

Use of Private Insurance Benefits

1. CDS will obtain parental consent for:
 - a. The use of the family's private insurance to pay for the initial provision of early intervention services contained on the IFSP; and
 - b. The use of private insurance to pay for any increase in frequency, length, duration or intensity of services in the child's IFSP.
2. The use of private insurance will not be used if its use for Early Intervention services will result in any of the following:
 - a. Count towards or result in a loss of benefits due to the annual or lifetime insurance coverage caps, to the parent or the child's family members who are covered by the policy; or
 - b. Negatively affect the availability of insurance to the child, the parent, or the child's family members who are covered under the insurance policy, and insurance coverage may not be discontinued for these individuals due to the use of the insurance to pay for services; or
 - c. Be the basis for increasing insurance premiums of the child, parent, or the child's family members covered under the insurance policy.
3. CDS will not pay the cost of premiums for private insurance.
4. If a parent or family of an eligible infant or toddler does not provide consent to access their private insurance, the lack of consent may not be used to delay or deny any Early Intervention services to the child or family.

Family Cost Participation

CDS implements a system of payments consistent with federal requirements on payor of last resort. In accordance with federal regulations, a system of payment for early intervention services should include a mechanism to determine a family's ability/inability to pay. Maine's mechanism is the family cost participation fee.

Families currently receiving WIC, TANF, Early Head Start or Medicaid services will not be charged a Family Cost Participation Fee and will not have needed services delayed or denied.

Family Size and Family Income Verification

Family size and income verification is documented on the Family Cost Participation Fee Determination Form (DFC-F).

1. CDS will specify and request required household and financial information that Parents must submit in order to:
 - a. Have the family cost participation fee applied;
 - b. Establish the Family Cost Participation Fee; and
 - c. Determine inability to pay.
2. Family size is verified by CDS's review of required information and documentation submitted by the parents to establish the family unit size for applying the family cost participation fee.
 - a. The family unit means the group of individuals whose information is used to determine family size.
 - b. Family unit may include, but is not limited to, biological parents, adoptive parents, step-parents, and children (biological and adopted).
3. Family income is verified by reviewing required financial documents submitted by the parents to establish the family's adjusted gross income for applying the family cost participation fee.
 - a. Family adjusted gross income means the total of adjusted earned and unearned income as shown on family members' most recent federal income tax return.
 - b. In cases where tax returns are not completed, CDS may approve an alternative means of reporting income for the determined family unit.
4. Once a child is determined eligible for services, parents are asked to provide income documentation. This information is reviewed by CDS at least once annually.
 - a. The parents may request a review of this information at any time if they have a change income or family size that may affect their Family Cost Participation Fee determination.
 - b. The parents must be notified and the IFSP reviewed and signed prior to any change in Family Cost Participation Fee taking effect.
5. Parents who decline or delay providing their financial information for the determination of the Family Cost Participation Fee payment amount and choose to receive early intervention services, will be billed higher of:
 - a. The maximum Family Cost Participation Fee; or
 - b. The actual cost of direct early intervention services identified as needed in the IFSP.
6. Parents who provide false or misleading information concerning income or family size for the determination of the family fee payment amount and choose to receive early intervention services, will be billed higher of:
 - a. The maximum Family Cost Participation Fee; or
 - b. The actual cost of direct early intervention services identified as needed in the IFSP.

Family Cost Participation Fee Notification

The monthly Family Cost Participation Fee Notification Form (DFC-F2) notifies the parents of their monthly fee and the effective date. No other written or verbal quotes will be valid.

1. The family must be notified of their financial responsibility prior to signing the initial IFSP.
2. Notification must include the family's established Cost Participation Fee.
3. When obtaining consent for the provision of services, the parents must be informed of the following rights to:
 - a. Refuse or decline any service;
 - b. Receive the following services at no cost: child find activities, evaluation and assessment, service coordination, administrative and coordinative activities related to the development, review, and evaluation of IFSPs, and implementation of procedural safeguards; and
 - c. Contest the imposition of a fee, or CDS's determination of the parent's ability to pay by requesting mediation, due process or filing a complaint. Contesting the imposition of a fee does not jeopardize a family's right to receive the services outlined on the IFSP.
4. The parent's signature on the Family Cost Participation Fee Notification Form (DFC-F2) authorizes their agreement to pay the determined Family Cost Participation Fee for the services outlined on the IFSP.
5. The monthly Family Cost Participation Fee established for the family will be the same regardless of:
 - a. Whether one or more children receive services; or
 - b. The number of early intervention service providers from which services are received.

Extenuating Circumstances Adjustment

Extenuating circumstances determination is the process of considering any unplanned occurrences that adversely impact a family's financial stability; such as loss of home, loss of job, or extensive medical costs incurred in the current year.

1. The family must submit a written request to the CDS Regional Site Director to be considered for an extenuating circumstances adjustment.
2. The request must identify the family's specific extenuating circumstances and provide supporting documentation as requested by the CDS Regional Site Director.
3. Parents requesting an extenuating circumstances adjustment will be notified of the decision within thirty (30) days of the CDS Regional Site Director's receipt of the written request.
4. The adjustment is determined at CDS's discretion. The adjustment may be used to modify the required Family Cost Participation Fee or reduce it temporarily.

Ability or Inability to Pay

Ability to Pay is defined as the financial capacity that a family has to pay the Family Cost Participation Fee.

The family of an eligible infant or toddler determined to be unable to pay the Family Cost Participation Fee will not have IFSP services delayed or denied because of an inability to pay. The eligible infant or toddler must be provided all IFSP services at no cost.

If the family of an eligible infant or toddler determined to be unable to pay and does not provide consent for use of insurance, the lack of consent may not be used to delay or deny any services. The eligible infant or toddler must be provided all IFSP services at no cost.

Family Cost Participation Fee Payments

1. The parents are financially responsible for and will be billed for the Family Cost Participation Fee due for services provided as outlined on the IFSP.
2. Parents may select their preferred method of payment once the monthly Family Cost Participation Fee amount has been determined and the family is fully informed of their rights within CDS. The parents will indicate the method of payment on the CDS Family Cost Participation Fee Payment Option Form. (DFC-F3)
3. The maximum Family Cost Participation Fee amount due by a family may not exceed 5% of their family monthly gross income as verified by CDS.
4. CDS assures that a family will never pay a fee greater than the actual cost of the services provided.
5. The CDS Accounts Receivable Specialist is responsible for billing and collecting all Family Cost Participation Fees.

Non-payment

1. Family Cost Participation Fee payment is considered past due after thirty (30) days from the invoice date.
2. IFSP services subject to Family Cost Participation Fees may be discontinued for non-payment at ninety (90) days past due. *Services provided at no cost to the family will not be discontinued to any enrolled child.*
3. At ninety (90) days past due *or*, if the parent defaults on a previously arranged payment agreement, other collection actions may be initiated.

4. CDS or its designee will take action to collect any unpaid balances due to CDS for services provided. These actions may include, but are not limited to, discontinuing services and/or collection processing.

Discontinuing Chargeable Services for Non-Payment

1. The family will receive invoice and notice when fees are thirty days (30) and sixty (60) days past due.
2. At seventy-five (75) days past due, CDS will notify the family that if payment is not received, services will be discontinued at ninety (90) days past due.
3. CDS is responsible for ensuring that all procedural safeguards are followed when discontinuing services for non-payment.
4. The CDS Regional Site Director must document that services were discontinued due to non-payment of required fees.

Reinstatement of Services Discontinued for Non-payment

1. Services discontinued for non-payment of fees may be reinstated upon full payment of all fees in arrears if no more than three months have passed since they were discontinued.
2. If more than three months have passed since services were discontinued, the IFSP team must reassess the existing IFSP before reinstating services and review family size/family income verification information.
3. The family is not guaranteed the same individual service provider(s) as was assigned prior to services being discontinued.

Procedure for Resolving Disputes

CDS is responsible for resolving payment disputes for provision of early intervention services. The CDS procedures for complaint resolution should be followed in any interagency payment or service provision dispute. While such a dispute is pending CDS must designate financial responsibility to an agency (financial designee) or to itself as the lead agency, in accordance with payor of last resort provisions. If during dispute resolution it is determined that the assignment of financial responsibility was inappropriately made, the responsibility will be reassigned to the appropriate agency and CDS will make arrangements for reimbursement of any expenditures incurred by the agency (financial designee) originally assigned responsibility.

The family must be informed of their rights and procedures for accessing dispute resolution options under CDS. The following procedures are available to assist Parents in resolving concerns and disputes:

- Parents are encouraged to first contact their case manager to request, as appropriate, an IFSP meeting to review and consider an IFSP changes or address concerns about services.
- The parent may submit to CDS for review of the Family Cost Participation Fee to the address below. This should be submitted within fifteen (15) days from the date the notification of the Family Cost Participation Fee was received by the parent. The request for administrative review should be a written statement that includes the specific reason the Family Cost Participation Fee amount should be reconsidered.
- Parents that disagree with any action or decision related to the family fee payment may:
 - Submit a request for CDS administrative review to:
Child Development Services State IEU
attn: State Director
146 State House Station
Augusta, Maine 04333
 - Submit a request for Mediation, a Due Process Hearing, or administrative complaint through the Part C procedures to:
Maine Department of Education
attn: Due Process Consultant
23 State House Station
Augusta, Maine 04333

Approved: _____

Required Procedure:

Family Cost Participation Fee Procedure (DFC-R)

Required Forms:

Family Cost Participation Fee Determination Form (DFC-F1)
Family Cost Participation Fee Notification Form (DFC-F2)
Family Cost Participation Fee Payment Option Form (DFC-F3)
Parental Consent to Share Data and Seek Payment for IFSP Services Form (DFC-F4)
Family Cost Participation Fee Table (DFC-T)

Family Cost Participation Fee Procedure

The following procedures implement the Child Development Services (CDS) Family Cost Participation Fee Policy (Policy DFC).

Family Responsibilities in Determining the Family Cost Participation Fee

The family is responsible for the following:

Requesting assistance from their case manager to answer questions regarding the Family Cost Participation Fee policies / procedures and their family fee payment which they do not understand.

Providing timely financial information at least annually in order for a family fee to be determined by CDS including, but not limited to current federal and state filing documents, form W-2, and paystubs.

- Providing tax information from the most recently federally required tax return year.
- Parents who have not filed taxes must provide copies of IRS approved extension unless not required to file as per IRS regulations in which case documentation must be provided.
- If an extension was filed for the most current tax year, the IRS extension is valid until October 15th and Parents must submit their filed tax records or provide the case manager with another IRS approved extension by October 31st.
 - If the family fails to submit the updated information, the family will automatically be placed at full-fee effective November 1st.
 - The full fee status will remain until the updated documents are received by the case manager and revised CDS Family Cost Participation Fee Determination Form are completed and signed.

Parents may opt to start services at full fee but must understand that a change will not be made retroactively. The full fee status will not be changed until tax documentation are received and completed.

Parents may choose to decline the start of services until their Family Cost Participation Fee is determined to avoid paying full cost.

Providing financial information prior to the initial IFSP meeting to ensure that CDS can provide the family with the family fee notice prior to the initiation of services.

A family's failure to provide timely income information will result in the family paying for the full cost of services delivered until the date the Family Cost Participation Fee determination can be finalized.

Identifying any extraordinary circumstances associated with the eligible child(ren) and/or other family members.

Informing their case manager and providing required documentation when there are changes in the family's financial status or family size.

Participation in an annual review of the Family Cost Participation Fee options and, as appropriate, the family income information.

Providing written communication and supporting documentation for changes in income and family size in order to have the family fee recalculated with a new effective date. The effective date will be at the discretion of the CDS when there is a failure to submit appropriate and timely documentation.

Case Manager Responsibilities

The CDS case manager is responsible for the following:

During the intake process, the case manager must explain the family's rights and financial responsibilities within CDS including:

- How extraordinary expenses related to the determination of family fee participation;
- What functions or services must be provided at public expense; and
- How IFSPs are developed without regard to a family's ability to pay.

Once eligibility for the child has been determined, the case manager is responsible for explaining the CDS Family Cost Participation Fee policies and procedures, informing the family of documentation need and, as appropriate, collecting required income information from the family.

Informing and assisting the family as needed in completing a CDS Family Cost Participation Fee Determination Form (DFC-F).

Obtaining family income and family size information by obtaining the name and relationship of each family member.

Obtaining the date of birth (DOB) for each child family member.

Obtaining income verification documentation for each adult included in the family size, including verification of zero income.

Obtaining a parent signature on the Family Cost Participation Fee Determination Form.

For Parents identified as having one or more self-employed household members, case managers must assist the family in submitting appropriate self-employment income records to the CDS in accordance with the Income Determination for Any Family Household Member Filing a Federal Schedule E section below.

Maintaining the completed Family Cost Participation Fee Determination Form in the child's file.

Annually, reviewing the Family Cost Participation Fee Policy and Procedures with parents and obtaining updated income information by completing new a Family Cost Participation Fee Determination Form.

The case manager must verify that Parents reviewed the income documents supplied by having Parents sign the Family Cost Participation Fee Determination Form verifying the accuracy of all information provided.

Within five (5) calendar days, the case manager must forward a copy of the completed Family Cost Participation Fee Determination Form to the CDS State IEU office for Family Cost Participation Fee determination.

Within thirty (30) days of a request from a family to review their family fee, the case manager must review the documentation of the family's income, changes in income and/or assist with a Family Cost Participation Fee Determination Form. Documentation of the review, including the completion of any necessary forms, and supporting documentation, must be maintained with the child's file.

Ensuring that Parents are informed of their right to submit to CDS a request for review of income and/or pursue procedural safeguards dispute resolution options.

Ensuring that IFSPs are developed without regard to the family's ability to pay.

Submit timely updates and changes to family income and size to the CDS State IEU office.

CDS Regional Site Responsibilities

The CDS regional site is responsible for the following:

Ensuring that the case manager accurately completes the Family Cost Participation Fee Determination Form, reviews and verifies supporting documentation, and maintains appropriate documents in the child's file.

Ensuring that IFSPs, Family Cost Participation Fee Determination Forms are maintained, updated, and submitted to the CDS State IEU office in a timely manner.

Ensuring that early intervention services are provided in accordance with the IFSP.

CDS State IEU Responsibilities

The CDS State IEU is responsible for the following:

Calculating the Family Cost Participation Fee for each family based on services provider.

Mailing the Explanation of Benefits (EOB) and Family Cost Participation Fee Statement (billing) to the family outlining the services provided and payment information.

Processing all revenue received through Family Cost Participation Fees.

Tracking and, as appropriate, providing notice of discontinuing chargeable services for non-payment of Family Cost Participation Fees.

Family Income and Family Size Determination

Individuals that contribute to the care of the child and living with the family must present, at a minimum, the following documents for verification:

- The most recently filed state and federal income tax forms with all applicable attachments.
- Current W-2's and/or last 3 consecutive pay stubs.
- Business Schedule E when self-employed; and
- Documentation of child support received or paid, as appropriate.

Notes:

- Under exceptional circumstances and with the approval of the CDS Regional Site Director, a notarized written statement from an employer regarding salary / wages may be accepted.
- Estimates and/or projections of income are not allowable.
- Previous end of year commissions and bonuses are included in the income determination.
- Negative income and/or losses are not allowable and must not be included on the income verification form.
- Case Managers must not make adjustments or deductions to family income with the exception of child support / alimony paid out of the household to another household.
- All income documentation must be verified annually or within thirty (30) days after the family reports a change in income.
- Child support received must be included as income.
- Child support paid to a benefit a child that does not live with the parent may be deducted from income. The child must not be reported in family size.
- A parent is responsible for providing household income documentation if they have legal custody of the child even though they may or may not reside with the child.
- Child and/or family benefits received from the Social Security Administration (SSA) are calculated into family income.
- Children with special needs adoptions must show the following documentation:
 - Adoption assistance maintenance payments, special service subsidies and/or clothing allowances.
- If a foster child is adopted by the family, the family size must be adjusted and income information must be included even if the adopted child maintains Medicaid coverage.
- A family may request an extenuating circumstances review by CDS and ask for special consideration of their financial status. Parents may also request mediation, a due process hearing, or resolution of an administrative complaint through the Part C procedures.
- The number of family members (family size) to be considered in the eligibility determination is established by counting the dependent child, the child's parent(s), the child's siblings with whom the dependent child lives full-time and any adults identified as dependent when filing income taxes in accordance with Federal IRS regulations. All natural, adoptive, or half-siblings who meet the definition of dependent child must be included in the family group. The income rules require the consideration of the income of the dependent child, the dependent child's siblings, and dependent child's parents.
- A child who resides in a foster home is considered a family of one and would not be considered for cost participation.
- A change in family size must be reported to the case manager as soon as possible.

Income Determination for Any Family Household Member Filing a Federal Schedule E

For Parents that include self-employed household members:

- On an interim basis, a Family Cost Participation Fee will be determined based on the family's most recent state tax return pending a review of the family's most current Federal 1040 (business) income tax return, statements, schedules, and forms including: 1120S, 1065, 8582, 4562, K-1, corresponding statements, and itemized "Cost of Goods Sold" and expenses.
- If the family delays submitting the appropriate requested documentation, the interim Family Cost Participation Fee will expire 30 days from the date of the signed consent for early intervention services and the family will be billed full fee for services received from that date forward until the documentation is submitted.
- Based on the CDS review of the family's federal tax documentation, a revised Family Cost Participation Fee may be determined with a new effective date starting from the date of determination. However, if CDS has determined that the family has provided information that misrepresents the family's income, the effective date will be retroactively applied.

Notes:

- CDS is responsible to review, verify and/or revise the family's income determination.
- Negative income and/or losses are not applied as a deduction against family income.
- Depreciation, amortization, bad debts, dues, subscriptions, training, meals, entertainment, gifts and miscellaneous deductions are non-allowable deductions in determining the family fee.
- CDS will provide the family with the outcome of a review and, as appropriate, a notice of a revised Family Cost Participation Fee.
- The family must respond within ten (10) business days in one of the following ways or the full-fee option will be implemented and remain until the required documentation is received by CDS:

- If in agreement with the revised family fee, the family must sign, date and return the Family Cost Participation Fee Determination Form; or
- If the family disagrees with the income determination and wants to decline / discontinue services on the IFSP, a new Payment Option Form must be completed; or
- If the family chooses to withdraw from participation in Child Development Services, the family must provide written notice to CDS.
- The family may appeal their family fee in writing to CDS.
- Parents under appeal may opt to continue service but would be required to continue to make timely payments under the CDS family fee determination pending resolution of the appeal.

Adjustment(s) To Income for Extenuating Circumstances

Parents may submit a written request to adjust income for extenuating circumstances to the CDS Regional Site Director. The case manager is responsible for assisting the family with preparing and submitting the request.

- Extenuating circumstances are defined as average monthly or yearly unreimbursed (out of pocket) expenses that are related specifically to the eligible child's disability or an immediate family member with a disability or long term health issue. Deductions might include specific purchases, expenses, modifications, and alterations that family members have made within the previous month or year to accommodate the extended / additional needs of the eligible child or family member. Extenuating circumstances may include unexpected events that affect the family's financial situation.
- Extenuating circumstances cannot include out of pocket expenses for anticipated future services or any expenses for which other funding resources have been requested to assist in paying for the same products and services. Extenuating circumstances must be supported by written documentation.
- Extraordinary expenses do not include well visits, over the counter or alternative nutritional supplements, complementary or alternative treatment procedures.
- Additional information on extraordinary expenses is provided under the Family Cost Participation Fee Determination Form process that requires review and approval by CDS.
- If, at any time, a family experiences a significant change in expenses for medical or personal care needs, or has other extraordinary expenses, they may request a re-evaluation of their family fee.

Establishment of a Family Cost Participation Fee Amount

Child Development Services Monthly Family Cost Participation Fee Table (DFC-T) established under Federal Poverty Levels (FPL) by family size will be utilized in determining the family fee co-payment. The determination takes into consideration:

- The family's income minus any CDS reviewed and approved allowable extraordinary expenses, and the family size.
- Parents under the 300% Federal Poverty Level are exempt for cost participation payment.
- Incomes calculated at or above 300% have a Family Cost Participation Fee payment based on the income level and family size.
- Parents, who choose to decline or delay providing their financial information for the determination of the family fee payment amount and choose to receive early intervention services, will be billed higher of:
 - The maximum Family Cost Participation Fee; or
 - The actual cost of direct early intervention services identified as needed in the IFSP.
- Parents who provide false or misleading information concerning income or family size for the determination of the family fee payment amount and choose to receive early intervention services, will be billed higher of:
 - The maximum Family Cost Participation Fee; or
 - The actual cost of direct early intervention services identified as needed in the IFSP.
- Family fee payment amounts will be identified on the CDS Family Cost Participation Fee Notification Form (DFC-F2). No other written or verbal quotes will be valid.
- Parents may submit written documentation of extenuating circumstances.
- Parents who disagree with the Family Cost Participation Fee payment amount may:
 - Request a review in writing; or
 - Request procedural safeguards dispute resolution options including mediation, a due process hearing, or administrative complaint.

Payment Options

- The parents may meet their financial fee obligations in the following ways:
 - Monthly payment of the Family Cost Participation Fee determined and billed by CDS; or
 - Full fee payment by the family for actual costs of services.
- Parents may select their preferred method of payment once the monthly Family Cost Participation Fee amount has been determined and the family is fully informed of the rights within CDS. The family will indicate the method of payment on the CDS Family Cost Participation Fee Payment Option Form.

- Federal and state regulations require that any and all other resources be utilized toward the cost of services. Part C funds must not be used to replace other sources of payment, including other governmental agencies. Part C funds are to be used as a payer of last resort.

Billing Process

The CDS Accounts Receivable Specialist is responsible for notifying the parents of the monthly Family Cost Participation Fee amount due and for collecting all revenue.

Non-Payment Procedure

The following timeline will be implemented for payment of services:

- A family will have thirty (30) days from the date of issuance of the Family Cost Participation Fee Statement to pay their family fee payment.
- Each month, the Family Cost Participation Fee Statement will provide the total amount due including past due amounts. If payment was made after the generation of the current month's billing statement, the receipt of payment may not be included on the statement.
- Parents with statements that include 60 day past due balances will receive an "approaching suspension" notice of non-payment stating that if payment is not received in fourteen (14) calendar days, services will be suspended. The notice will include a date of suspension and current balance due to avoid suspension.
- If payment is received after the suspension date, a new billing cycle will have begun and the prior Minimum Payment Required may not be sufficient to reinstate services.
- Should a family access direct services on a current IFSP on or after the date of suspension, the family shall be held solely responsible for the entire cost of such services.
- Parents will not be entitled to make-ups for any missed services as a result of suspension for nonpayment of the family fee.
- CDS State IEU staff will inform the Case Manager that the transmittal of final notice was mailed to the family.
- The family may contact their Case Manager to discuss the reason(s) for non-payment and, as appropriate, discuss the need to review, and revise the IFSP and/or Family Cost Participation Fee Income Verification.
- If early intervention services are suspended due to the failure to pay their outstanding family fee, the family will continue to be entitled to receive the functions and services required to be provided at public expense, including case management.
- If unpaid family fee balances remain ninety (90) days after the date the family exits CDS, the family may be included in a debtor file transferred to a private collection company for further collection efforts.

Cancellation of Scheduled Early Intervention Services

In addition to sharing in the cost of services, parents have a responsibility to be available for scheduled services. Each member of the team must be respected and valued for the time dedicated in serving the child and family.

Parents Responsibilities:

- If a family cannot be available for a scheduled service, they must provide the early intervention provider with at least a 24-hour notice of cancellation unless prevented by an emergency.
- If the parent provides less than a 24-hour notice of cancellation of a scheduled service or, with the exception of an emergency situation, fails to be available for a scheduled service, the parent will still be liable for their Family Cost Participation Fee.
- The parent should contact the early intervention provider and confirm their availability for the next scheduled service or identify a need to review the current IFSP.

Early Intervention Provider Responsibilities:

- Early Intervention (EI) providers must provide parents with an annual calendar that identifies agency closings including, but not limited to, holidays and in-service trainings.
- EI providers are to establish procedures for confirming scheduled or cancelled services with parents.
- If an EI provider cannot be available for a scheduled service, they must provide the parents with at least a 24-hour notice of cancellation, unless prevented by an emergency, and make a reasonable attempt to re-schedule the service. Exception: When a service falls on a holiday; agency closing including a scheduled in-service; or is cancelled due to extreme weather conditions that make it dangerous to travel, notice is not required and attempts to reschedule are at the discretion of the EI provider.
- If the parent fails to be present when the EI provider arrives for a scheduled service, the provider will record the service as a "no show" and document reasonable attempts to contact the family prior to the next scheduled service to identify the reason for the "no show" and confirm the next scheduled service.
- If the EI provider is unsuccessful in contacting the parents regarding a scheduled service after several attempts, the provider will not be deployed to render scheduled services unless contact has been made with the parents within 24-hours of scheduled services.

- The case manager will be:
 1. Apprised of the difficulties experienced in rendering the service to the child or family;
 2. Given notice of the contact requirements that shall be employed prior to the provider’s dispatch; and
 3. Provided a list of attempts made to reach the parents.
- The case manager shall attempt to reach the parents to schedule an IFSP review. If after three attempts the case manager has been unsuccessful in scheduling an IFSP review with the family, the case manager along with the EI provider(s) designated to provide scheduled services shall meet to determine whether changes should be made in the child’s IFSP. Throughout the entire process, any and all contact with the family will include a statement that the family is always entitled to invoke their right to procedural safeguards.
- Prior to resuming a scheduled service, the EI provider will contact the family to confirm the next scheduled service.

Case Manager Responsibilities:

- The case manager will inform the parents of the policy and procedures for canceling scheduled services.
- Follow-up with the parents when notified by the EI provider that a family was a “no show” for a scheduled service and reasonable attempts to contact the family were unsuccessful.
- Documentation of attempts to contact the parents including, but not limited to telephone, letters, e-mails or home visits.
- If contact with the parents is established, the case manager will identify the reason(s) for the “no show” and determine any need to review the IFSP or family fee with the family.
- If the case manager is unsuccessful in contacting the family, the case manager and EI provider(s) may convene an IFSP meeting to explore the reasons for “no shows”, including service delivery, location, etc. If a meeting is convened, the case manager shall provide Advance Written Notice to the parents a reasonable time prior to the IFSP meeting and document attempts to contact the parents about the meeting and its purpose. If services are revised at the IFSP meeting, the parents must receive Written Notice of the action that is being proposed or refused, the reason for taking the action, all procedural safeguards that are available to the family, and the State complaint procedures.

Approved: _____

Required Policy:

Family Cost Participation Fee Policy

Required Forms:

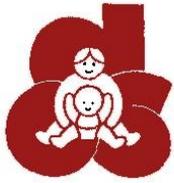
- Family Cost Participation Fee Determination Form (DFC-F1)
- Family Cost Participation Fee Notification Form (DFC-F2)
- Family Cost Participation Fee Payment Option Form (DFC-F3)
- Parental Consent to Share Data and Seek Payment for IFSP Services Form (DFC-F4)
- Family Cost Participation Fee Table (DFC-T)

You may deduct qualifying medical / dental expenses that are greater than 5% of your annual income. Use this worksheet to determine if your qualifying expenses are greater than 5% of your income. Qualifying expenses must be directly related to the health or medical condition of a family member. Expenses must be out of pocket for the previous 12 months and for which you will not be reimbursed.

Medical / Dental Deductions Worksheet		What can be included:	
13. Health Insurance Premiums \$ _____/month x 12 months = \$ _____		<ul style="list-style-type: none"> • Capital expenses for equipment or improvements to your home needed for medical care • Cost and care of guide animals aiding the blind, deaf, and disabled • Cost of lead based paint removal • Expenses of an organ donor • Hospital services fees (lab work, therapy, etc.) • Birth control pills, legal abortion, legal operations to prevent having children • Live-care fee paid to retirement home designated for medical care • Meals and lodging provided by a hospital during medical treatment • Medical and hospital insurance premiums • Medical services fees (from doctors, dentists, surgeons, specialists and other medical practitioners) • Oxygen equipment and oxygen • Prescriptions, medicines, and insulin • Psychiatric care at a specialty equipped medical center (includes meals and lodging) • Social Security tax, Medicare tax, FUTA and state employment tax for worker providing medical care • Special items (hearing aids, wheelchairs, etc.) • Special school or home for mentally or physically disabled person • Travel and related expenses • Treatment at a drug or alcohol center • Wages for nursing services • Diaper costs related to medical problem 	
14. Insurance Co-payments \$ _____/month x 12 months = \$ _____			
15. Dental and Vision Expenses \$ _____/month x 12 months = \$ _____			
16. Hospital Expenses \$ _____/month x 12 months = \$ _____			
17. Prescriptions \$ _____/month x 12 months = \$ _____			
18. Nutritional supplements ordered by physician \$ _____/month x 12 months = \$ _____			
19. Medical Equipment, Assistive Technology, or Adaptive Expenses for the year \$ _____			
20. Specialized clothing required by Medical Condition \$ _____/month x 12 months = \$ _____			
21. Specialized Respite Care or Childcare above typical costs not listed on front, line 10 \$ _____			
22. Medical Transportation cost \$ _____/month x 12 months = \$ _____			
23. Other related Medical Costs (specify): \$ _____/month x 12 months = \$ _____			
24. Total Medical Deductions (Add lines 13 – 23) \$ _____			
Calculate Allowed Medical / Dental Deduction			What cannot be included
A. Multiply front line 8 (annual income) x .05 = \$ _____			<ul style="list-style-type: none"> • Diaper services • Health club dues • Household help • Stop smoking program • Weight loss program • Life insurance or income protection policies • Maternity clothes • Medicine bought without a prescription • Nursing care for a healthy baby • Surgery for purely cosmetic reasons
<p>If line A is GREATER than line 24: You may NOT deduct medical / dental expenses from income as they are less than 5% of your income. Write "0" on line 9 on front page.</p>	<p>If line A is LESS THAN line 24: Line 24 minus line A = \$ _____ Write this amount on line 9 on front page.</p>		

Form review dates: _____ Case Manager: _____

CHANGE IN CIRCUMSTANCES REQUIRES A NEW FORM.



**FAMILY COST PARTICIPATION FEE NOTIFICATION FORM
(Form DFC-F2)**

Child's Name:	Date of Birth:
Regional Site Name:	Case-e ID #:
Parent / Guardian:	
Mailing Address:	
City, State, Zip:	

Parent elected to participate in the Family Cost Participation Fee determination process.

Based on the information provided on the Family Cost Participation Fee Determination Form and the corresponding Family Cost Participation Fee Table:

The monthly Family Cost Participation Fee: \$ _____ per month

Effective Date: _____

First Payment is due: _____

Parent declined to participate in the Family Cost Participation Fee determination process.

The parent will pay the maximum Family Cost Participation Fee on the Family Cost Participation Fee Table:

The monthly Family Cost Participation Fee: \$ _____ per month

Effective Date: _____

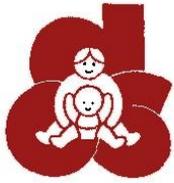
First Payment is due: _____

Signatures:

CDS Accounts Receivable Specialist (person completing this form) _____
Date

Parent _____
Date

Case Manager _____
Date



**FAMILY COST PARTICIPATION FEE PAYMENT OPTION FORM
(Form DFC-F3)**

Child's Name:	Date of Birth:
Regional Site Name:	Case-e ID #:
Parent / Guardian:	
Mailing Address:	
City, State, Zip:	

The monthly Family Cost Participation Fee: \$ _____ per month

Effective Date: _____

The first payment is due: _____

What options do we want to give parents?

Monthly payments, Annual payment, credit card payment?

Signatures:

Parent

Date

Case Manager

Date



CDS State IEU
 146 State House Station
 Augusta, Maine 04333

Phone: (207) 624-6660
 Fax: (207) 624-6661

**PARENTAL CONSENT TO SHARE DATA AND SEEK PAYMENT
 FOR INDIVIDUALIZED FAMILY SERVICE PLAN (IFSP) SERVICES
 (Form DFC-F4)**

Section 1: Complete if your child receives Early Intervention

Child's Name: _____ DOB: _____
 Address: _____ City, State, Zip: _____

Parent's Name: _____ Phone: _____
 Address: _____ City, State, Zip: _____

Parent's Name: _____ Phone: _____
 Address: _____ City, State, Zip: _____

For children who have both MaineCare and private health insurance, please complete both Sections 2 and 3.

Section 2: Complete if your child has MaineCare

Child Development Services (CDS) will bill MaineCare for services your child receives. The type, amount and frequency of services are in your child's IFSP. CDS needs your signature to share data with the Maine Department of Health and Human Services (DHHS) to bill for these services. The information includes your child's name, date of birth, member ID number, dates of service and type of service codes. If audited by the Maine DHHS or the U.S. DHHS the data may also include your child's IFSP, evaluation reports, documentation of service and attendance.

I understand:

- This is a release to share data with DHHS. It starts _____ and is good as long as my child is eligible for early intervention.
- This consent can be changed or stopped in writing at any time by me.
- The type, amount, and frequency of services are in my child's IFSP.
- If I ask, I can get copies of all data shared with DHHS.
- I can get a copy of this consent.
- Laws that protect private data sometimes allow the data to be re-disclosed.
- If I do not give information or sign the release, my child's IFSP services will not change or stop.

MaineCare ID#: _____ Please include a copy of the front and back of the insurance card.

My signature allows Child Development Services to release information to:

1. Maine DHHS to get paid from MaineCare, and
2. Maine DHHS or U.S. DHHS if there is an audit.

 Parent / Guardian Signature

 Date

~ Continued on next page ~

Section 3: Complete if your child has Private Health Insurance

So that we can determine if your private insurance covers your child's IFSP services, we need information about your private health insurance coverage. CDS will use this information to determine if the private insurance company covers the IFSP services your child receives. If your child is also on MaineCare and your private health insurance does not cover the IFSP services your child is receiving, CDS may bill MaineCare.

Private Insurance Company Name: _____

Policy Holder: _____

Relationship to Child: _____

Member ID#: _____

Group #: _____

Please include a copy of the front and back of the insurance card.

I understand:

- Child Development Services will use my private health insurance information to determine whether or not my private insurance covers the IFSP services that my child receives.
- If the private insurance does not cover the IFSP services my child receives, CDS can bill MaineCare (see Section 2.)

Parent / Guardian Signature

Date

Section 4: Complete if you do not want Child Development Services to bill MaineCare or any insurer for your child's IFSP services.

Release or Consent Denied: I choose to not let Child Development Services:

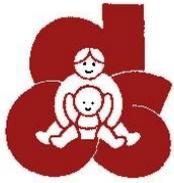
- Share information with the Maine Department of Health and Human Services to get paid for covered IFSP services.
- Ask my private health insurer if IFSP services are covered so, if the services are not covered, CDS can bill MaineCare.

I understand:

- By signing below, my child's IFSP services will not change or stop; and
- I can get a copy of this form when I withdraw consent.

Parent / Guardian Signature

Date



**FAMILY COST PARTICIPATION FEE TABLE
(Table DFC-T)**

For parents authorizing access to public or private health insurance:

Monthly Family Cost Participation Fee by Family Size							
	Family Size						
Modified Income	2	3	4	5	6	7	8
less than \$45,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$45,001 to \$55,000	\$32	\$24	\$16	\$8	\$0	\$0	\$0
\$55,001 to \$65,000	\$40	\$32	\$24	\$16	\$8	\$0	\$0
\$65,001 to \$75,000	\$48	\$40	\$32	\$24	\$16	\$8	\$0
\$75,001 to \$85,000	\$56	\$48	\$40	\$32	\$24	\$16	\$8
\$85,001 to \$95,000	\$64	\$56	\$48	\$40	\$32	\$24	\$16
\$95,001 to \$105,000	\$72	\$64	\$56	\$48	\$40	\$32	\$24
\$105,001 to \$125,000	\$88	\$80	\$72	\$64	\$56	\$48	\$40
\$125,001 to \$150,000	\$96	\$88	\$80	\$72	\$64	\$56	\$48
\$150,001 to \$175,000	\$104	\$96	\$88	\$80	\$72	\$64	\$56
\$175,000 and over	\$120	\$112	\$104	\$96	\$88	\$80	\$72
<input type="checkbox"/> I do not wish to disclose our income.	\$120	\$112	\$104	\$96	\$88	\$80	\$72

For parents **NOT** authorizing access to public or private health insurance:

Monthly Family Cost Participation Fee by Family Size							
	Family Size						
Modified Income	2	3	4	5	6	7	8
less than \$45,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$45,001 to \$55,000	\$48	\$40	\$32	\$24	\$16	\$8	\$0
\$55,001 to \$65,000	\$56	\$48	\$40	\$32	\$24	\$16	\$8
\$65,001 to \$75,000	\$64	\$56	\$48	\$40	\$32	\$24	\$16
\$75,001 to \$85,000	\$72	\$64	\$56	\$48	\$40	\$32	\$24
\$85,001 to \$95,000	\$80	\$72	\$64	\$56	\$48	\$40	\$32
\$95,001 to \$105,000	\$88	\$80	\$72	\$64	\$56	\$48	\$40
\$105,001 to \$125,000	\$104	\$96	\$88	\$80	\$72	\$64	\$56
\$125,001 to \$150,000	\$112	\$104	\$96	\$88	\$80	\$72	\$64
\$150,001 to \$175,000	\$120	\$112	\$104	\$96	\$88	\$80	\$72
\$175,000 and over	\$136	\$128	\$120	\$112	\$104	\$96	\$88
<input type="checkbox"/> I do not wish to disclose our income.	\$136	\$128	\$120	\$112	\$104	\$96	\$88

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