Illinois Part C Early Intervention Live Video Visits (i.e. EI Teletherapy) during COVID-19 Pandemic

Purpose: As a result of the Illinois state of emergency and the World Health Organization’s pandemic assignment over the outbreak COVID-19, the Illinois Early Intervention (EI) Program will institute the use of Live Video Visits, or teletherapy, as a temporary measure to comply with the services mutually agreed upon and deemed necessary under the current Individualized Family Service Plans (IFSP) developed for any Individuals with Disabilities Education Act (IDEA) Part C eligible child and the child’s family. Live Video Visit services will be provided through the use of the internet with both video and audio features and with the EI provider and family both present in real time.

The following outlines the Policies and Procedures for implementing the Live Video Visits.

Policy & Procedures
1. Effective Dates
   a. The use of Illinois Live Video Visits during COVID-19 Pandemic will go into effect April 7, 2020 and will continue only until the Illinois state of emergency is lifted following guidance from the Centers for Disease Control as well as the World Health Organization's pandemic restrictions are officially lifted. Families will be notified of changes or termination of this policy via their local Child and Family Connections (CFC) offices and EI direct service providers/Payees will be notified via posting on the EI Provider Connections website as well as notification from the various EI Program’s partners.

2. Consent
   a. Families and/or legal guardians must provide informed consent and agree with all guidance regarding the use of Live Video Visit services. Families must understand that these services are voluntary, will not impact their overall IFSP if they decline, and be free from any pressure or coercion in their decision to consent.
   b. The Illinois Part C COVID-19 Live Video Visit Services Consent Form must be completed by all families.
   c. Obtaining consent will be initiated by the family’s Service Coordinator.
      i. The Service Coordinator will contact family to obtain their email address.
      ii. The Service Coordinator will email the consent form and discuss the purpose of the consent and obtain verbal consent or refusal.
         • The Service Coordinator can offer to help the family set up a free email account to provide written consent, see here for explicit directions to create an email account https://accounts.google.com/signup/v2/webcreateaccount?flowName=GlfWebSignIn&flowEntry=SignUp
         • If the family does not have an email address, the consent form must be read in its entirety to the family over the phone and verbal consent or refusal must be obtained.
         • Discussion between the Service Coordinator and the family surrounding options for Live Video Visit Services shall be documented in the case notes of the child’s permanent EI record.
   d. Once consent is obtained, the Service Coordinator will mail, secure email or fax a copy of the completed consent form to the family and the direct service provider for their records and keep the original in Section 1 of the child’s permanent EI record.
   e. A copy of the Illinois Part C COVID-19 Live Video Visit Services Consent Form is included in the attachments.
3. Intake
   a. All timelines and activities shall continue as directed in the Child and Family Connections Procedure Manual.
   b. All intake forms shall be securely emailed, faxed or mailed in an enough time (five to seven days) for the family to receive prior to the intake meeting. Should the CFC utilize an EI-approved Live Video Visit platform that allows documents to be shared and signed securely then intake forms would not need to be sent prior to the meeting.
   c. During the implementation of this policy, face-to-face intake meetings can be conducted via Live Video Visit Services or phone based on family’s informed consent.

4. Eligibility Determination
   a. During these temporary emergency measures children who are determined eligible as a result of experiencing a medically diagnosed physical or mental condition that typically results in a developmental delay as well as those meeting the qualifications for at risk conditions as outlined in the CFC Procedure Manual and EI Provider Handbook, may proceed with assessment via Live Video Visit Services.
      - EI-approved assessment tools can be utilized via Live Video Visit Services that can be administered by using parent interview, observation and informed professional judgement.
   b. Until further guidance from the Bureau of Early Intervention, Evaluations cannot be conducted via Live Video Visit Services. It should be noted the Bureau is working towards addressing this issue in a manner that is able to account for the variety of Evaluation/Assessment procedures and practices that currently take place across our state. This way those that can be completed via Live Video Visit Services, can be done so as effectively as possible. More updates will be posted as that work continues.

5. IFSP Development
   a. Initial, annual and exit IFSP meetings can be conducted via phone or Live Video Visit Services upon family’s consent, if evaluations and assessments have been completed prior to the shelter-in-place order.
   b. Six-month IFSP review meetings can be conducted via phone or Live Video Visit Services upon obtaining family’s consent.

6. Live Video Visit Service Provision
   a. Prior to using Live Video Visit Services to deliver services, all EI personnel must complete the required training. These training modules have been put in place to support EI providers successfully delivering Live Video Visit Services with the best possible outcomes. Please refer to the required training section below for more information.
   b. EI direct service providers must contact their CFC to update their EI provider profiles indicating which Live Video Visit platform they will be using.
   c. Upon receipt of the Illinois Part C COVID-19 Live Video Visit Services Consent Form outlining the family’s preferences for service provision, the EI direct service provider must comply with the family’s request for how they would like services to be delivered during this time.
      - If the family has consented to having Live Video Visit Services via video conferencing platform then the provider may begin services.

7. Confidentiality Safeguards
   a. Privacy
      It is the right of families to keep information about themselves and their children from being disclosed. It is with this in mind that every reasonable effort be made to protect the privacy of families while using Live Video Visit Services.
b. Security

Security is not only about the type of platform that the provider uses, but also who else is around the provider and has access to the conversations during the Live Video Visit.

The following basic measures during Live Video Visit Services shall be taken to ensure that a family’s privacy and security are protected at all times.

- The use of email is permissible during this time to for the purposes of sending login information, secure invitations to join Live Video Visit Services, or for Service Coordinators to send electronic forms to families. Email encrypted services should be used whenever possible or secure e-mail system may be used as well.

- **Recordings are strictly prohibited during this time.** Should the platform used to deliver Live Video Visit Services have features for recording the video conference, this feature must be disabled. All appropriate steps should be taken to ensure that no recordings are made or shared.

- All good faith efforts should be taken by providers to ensure that Live Video Visit Services occur in an area where people cannot hear or observe conversations between the provider and the family. However, given the current social distancing rules, it is understood that other family members may be in the location of the provider or the family. To address this, using headphones with a microphone will help ensure privacy. Providers are encouraged to go to a separate room of their house to conduct Live Video Visit Services whenever possible or set up their computer/device in an area of the home where potential viewing of the information on the screen is limited. Please refer to training and tips provided by the Illinois Early Intervention Training Program (EITP) for further guidance.

- Should technical issues arise with your device, computer or selected telehealth platform, technical assistance should be obtained from the selected telehealth platform provider.

- Seeking technical assistance from a family member or friend in the provider’s household while the family being served by the EI Program is connected via live video visit is not allowed at this time as an added measure to make all good faith efforts to maintain the confidentiality of children and families served by the EI program.

- Providers shall password protect any devices and software that will be used for Live Video Visit Services with strong passwords to limit access by anyone outside of themselves. Please review the following resource for choosing and protecting passwords at [https://www.us-cert.gov/ncas/tips/ST04-002](https://www.us-cert.gov/ncas/tips/ST04-002).

8. Documentation

a. Documentation to support direct services provided via Live Video Visit Services shall contain the same minimum elements outlined in the Illinois Early Intervention Provider Handbook. This includes date, time in, time out, location, who was present, EI provider signature and a complete overview (brief comprehensive account) for each date, each direct service provided (each procedure code).

- The section that denotes location should state “Live Video Visit” along with the name of the Live Video Visit platform being used to deliver the service.

b. The direct service provider shall maintain a copy of the completed Illinois Part C COVID-19 Live Video Services Consent Form in the child’s record and shall be prepared to provide a copy to the Bureau of Early Intervention or its’ partners.

9. Billing Procedures

a. Billing Codes: Current offsite authorizations can be utilized for billing of Live Video Visit Services. The same procedure codes and diagnosis codes shall be utilized for billing as face-to-face visits. Those visits that are provided via Live Video Visit Services shall use the two-digit “02 Telehealth” code in the Place of Service section of the professional CMS1500 claim form.
b. Insurance Billing Unit: EI Providers who utilize the insurance billing service through the Central Billing Office (CBO) Insurance Billing Unit should continue to follow the processes as outlined on the CBO website at [www.eicbo.info](http://www.eicbo.info) and within the Illinois Early Intervention Provider Handbook with the exception of entering “02 Telehealth” code in the service location section of the Participant Encounter form.

c. Reimbursement: Services billed for Live Video Visit Services will be treated and reimbursed at the same rate as offsite direct service visits.

10. Technology Use & Requirements
   a. Technology requirements may vary by the telehealth platform. It is critical that the provider and family look into the requirements before proceeding with Live Video Visit Services.
   b. Data usage is considerable for any telehealth platform. Providers shall have discussions with families they are serving to ensure that they are able to connect to a Wi-Fi point or have an unlimited data plan if the Live Video Visit Services is being conducted while using mobile data.

   It is important to ensure that families do not encounter any financial hardship when attempting to deliver Live Video Visit Services. If access to Wi-Fi or unlimited data is not an option for a family, phone consultation shall be considered the best alternative during this time. Please refer to the section on Equity in this document for other information and resources available to families.

c. File Sharing
   - The ability to share files is dependent on the telehealth platform. The provider and family should determine whether file sharing is needed and possible with the chosen platform.

d. Use of Recording
   - As mentioned above, as a safeguard for the family’s privacy, **no recording of any kind** is allowed of any Live Video Visit Service.

e. Minimum Internet Connection Speed
   - The needed minimum internet connection speed is variable depending on the telehealth platform being used. The provider and family should determine the needed internet connection speed. Notably, for all platforms, a hard-wire connection (versus WIFI) may be more effective for Live Video Visit Services.

11. Use of Associate Level Providers (Assistants)
   a. All minimum supervision requirements for the use of an Associate-Level Credentialed Providers of EI services detailed in the Illinois Early Intervention Provider Handbook must continue to be adhered to.
   b. Direct supervision of the Credentialed Associate-Level Provider must continue at a minimum once per month per child served. During the implementation of this policy, the supervisor is able to complete direct supervision by joining the Associate-Level Credentialed Provider’s Live Video Visit Service session.
   c. The use of a telehealth platform that would allow for more than two participants will need to be selected by Associate-Level Credentialed Providers and their supervisors.

12. Use of Interpreters
   a. If interpreters are needed, it is required that the interpreter attend (via the telehealth platform chosen) the EI Telehealth Service session. To this end, the provider would have to choose a platform that would be able to allow for more than two participants at one time.

13. Provisional Providers
   a. Provisional providers are also allowed to use Live Video Visit Services.
b. All processes for submitting claims by provisional providers shall continue to be the same. Memorandums issued to provisional providers which include offsite authorizations are understood to also include those services provided via Live Video Visit Services during the effective dates of this policy.

14. Co-treatment
   a. If co-treatment has been identified as a need and has been written into the child’s IFSP, co-treatment can occur via Live Video Visit Services. Providers are encouraged to have conversations with the families they serve to discuss if the family would like to have visits in this manner during this time and comply with the family’s preference.

   b. If co-treatment via Live Video Visit Services will be utilized, the provider would have to choose a platform that would be able to allow for more than two participants at a time.

15. Liability Insurance
   a. Similar to in-person medical practices, telehealth services carry liability and malpractice risks. Some liability insurance policies include telehealth as a covered service, while others may require providers to pay for a supplemental telehealth insurance policy. It is the sole responsibility of the EI payee to contact their insurance carrier to ensure that their liability insurance policy includes coverage for telehealth.

**Required Training**

Prior to the use of Live Video Visit Services, EI personnel must access and successfully complete training provided by EITP. Training and resources will include asynchronous online modules, accessible 24/7, focused on an introduction to live visits, planning and implementing Live Video Visit Services/teletherapy, a list of curated resources on Live Video Visit Services/teletherapy, tip sheets, and links to video examples of Live Video Visit Services/teletherapy. EI personnel must maintain proof of completion of the required training (certificate of completion/attendance) and should be prepared to submit proof of completion upon request from the Bureau of EI or its’ partners.


**Allowable Platforms for Live Video Visit Services during the COVID-19 Pandemic period**

Providers may utilize any platform. The exception is that at no time would a public-facing platform be allowed (such as Facebook live, Instagram, TikTok, etc). Not all platforms are HIPAA/FERPA vetted. It is imperative that you and the family fully recognizes the risks of using non-vetted platforms. This list may be updated at any time and restrictions may be placed if federal or state laws are put in place prohibiting the platform’s use, even during COVID-19 Pandemic period.

For families, tipsheets are being developed and are coming soon. To review, please go to [https://eiclearinghouse.org/resources/trying-times/](https://eiclearinghouse.org/resources/trying-times/)

The Early Intervention Clearinghouse (EIC) will make four tipsheets available to families regarding Live Video Visit Services. Consistent with other EIC tipsheets, these tipsheets will be in layman’s terms, short, and be accessible in English and Spanish. The four tipsheets include:

- **Introduction to Live Video Visit Services**: In this tipsheet, families will be oriented to Live Video Visit Services. Specifically, families will learn the need to offer Live Video Visit Services during the current circumstances; the research supporting the effectiveness of Live Video Visit Services, and the ways to pursue Live Video Visit Services, if they are interested.

- **Description of Live Video Visit Services**: In this tipsheet, families will learn about the procedures for Live Video Visit Services. Specifically, families will learn how Live Video Visit Services differ and are similar to in-person visits as well as resources to see demonstrations of Live Video Visit Services.
• **Technology for Live Video Visit Services**: In this tipsheet, families will learn about technology to support Live Video Visit Services. Specifically, families will learn the needed and best practice technology and internet requirements; resources to access needed technology and internet to support Teletherapy, and tips to ensure a high-quality teletherapy experience.

• **Ways to implement EI during COVID-19**: In this tipsheet, families will learn about ways to reinforce EI during COVID-19. Specifically, families will learn about ways to implement EI strategies as well as ways to address their own well-being during this time.

**Accessibility/Equity**

Ensuring that all families in Illinois continue to receive their EI services during these unprecedented times is of high priority. Reliable video and audio communication between the early interventionist and the family can be a challenge in communities where it is needed most. Even in places where high-speed internet is available, the monthly charges may be cost prohibitive for families on a tight budget. In addition to internet fees, costs for a computer, camera, and microphone must be considered.

The following resources have been developed to help ensure Live Video Visit Services can be provided to families without access to technology and/or stable internet connection. (These resources will continue to be updated)

• Comcast has a program that offers low-cost computers. For additional information, please visit [https://internetessentials.com/low-cost-computer](https://internetessentials.com/low-cost-computer).

• The Arc of Illinois-Technology Fund for families will pay for a $500 device for a family. For additional information, please visit [https://www.thearcofil.org/assistive-technology-program-application-form/](https://www.thearcofil.org/assistive-technology-program-application-form/).

• Internet Essentials - Comcast has a program for low-cost, high-speed internet services for families with low-income. They have recently increased internet speeds to 25/3 Mbps and new customers get two months of free service. For additional information, please visit [https://www.internetessentials.com/](https://www.internetessentials.com/).

• Comcast is offering free Wi-Fi and pausing data plans amid COVID-19 crisis.

• AT&T also has a program for low cost, high speed internet services. For additional information, please visit [https://www.att.com/support/article/u-verse-high-speed-internet/KM1094463](https://www.att.com/support/article/u-verse-high-speed-internet/KM1094463).

• Lifeline Program: Mobile telephone and internet companies can provide free mobile service including both voice and data through this program. The customer accesses the Lifeline benefit by obtaining service from one of the participating companies and the companies verify eligibility.

For additional information, please see the CUB brochure or visit the Illinois LinkUp/Lifeline website at [http://linkupillinois.org/](http://linkupillinois.org/) for qualifying assistance programs.


**Family Rights & Compensatory Measures**

IDEA affords infants/toddlers and their families certain safeguards to protect parents and their children. During these emergency measures, all good faith efforts shall be made to ensure continuity of services to children and their families as outlined under their current IFSP while also adhering to the orders under the Illinois state of emergency and world health organization’s pandemic assignment over COVID-19. In efforts to fully inform parents of measures being taken to comply with IDEA, notification of this policy will be made to parents via their service coordinators and local CFC. A reminder of their family rights that includes information regarding informed consent, prior notice, review of records, confidentiality and resolution of concerns will be offered along with a copy of *The State of Illinois Infant/Toddler & Family Rights under IDEA for the Early Intervention System* booklet which contains an explanation of the three methods of dispute resolutions.
As with all services, compensatory services will be provided depending on the unique and individual needs of the child. Specifically, the IFSP team may meet to determine whether compensatory services are needed to address the delay of the child. Please see federal guidance from the Office of Special Education Programs at https://sites.ed.gov/idea/idea-files/q-and-a-providing-services-to-children-with-disabilities-during-the-coronavirus-disease-2019-outbreak/#Q-B-1.