

INDIVIDUAL/FAMILY SUPPORT: HEALTH SERVICES

PROCEDURE CODE

Z2771

DEFINITION

A cash payment to the family to purchase services for their child eligible for the First Connections or Early Childhood Program. Health services must be necessary to enable a child to benefit from other early intervention services, during the time that a child is receiving the said early intervention service. Specific objectives must be identified on the IFSP, to substantiate documented need. All health services must be based on need as documented on the Individual Family Service Plan (IFSP), and may include:

- Such services as clean intermittent catheterization, tracheotomy care, tube feeding, the changing of dressings or colostomy collection bags, and other health services; and
- Consultation by physicians with other service providers concerning the special health care needs of eligible children that will need to be addressed in the course of providing other early intervention services.

Health services do not include services that are surgical or purely medical in nature, or devices that are necessary to control or treat a medical condition. Medical-health services such as immunization and well-baby care that are routinely recommended for all children are not eligible under this service.

QUALIFIED PROVIDER

The DDS licensed/certified provider will verify the family's procurement of a licensed practical nurse, registered nurse, nurse practitioner, physician, or certified nursing care staff.

UNIT OF SERVICE

A unit of service is the actual cost per hour, to provide the needed service. Less than one hour of service cannot be billed.

RATE OF REIMBURSEMENT

Rates are based on state lead agency determination as Administrator of Federal regulations, 34 C.F.R. §, Sec. 303.520

Z2771 Actual cost of the service per occurrence. A guideline of \$5,000 of all categories of family support combined, per year has been determined. Prior Approval by Developmental Disabilities Services is required. *Prior Authorization Committee may require additional information.*

REQUIRED DOCUMENTATION OF SERVICE PROVIDED

The provider of the service must maintain on site, narrative documentation of:

- The service provided (amount, date, and times)
- Activities conducted
- Outcomes worked on (objectives)
- Progress made
- Recommendations (if appropriate)
- receipt for the actual cost of reimbursement, submitted by the parent/guardian
- Statement of assurance submitted by parent/guardian.

(11/09/06)