WHAT IS FAMILY COST PARTICIPATION?

Part C of the Individuals with Disabilities Education Act (IDEA), a Federal law, requires states to establish a system of payments for early intervention services and allows states to establish family fees as a part of the state’s system of payments. Georgia Babies Can’t Wait (BCW) family fees are called Family Cost Participation (FCP). The policies and procedures for Family Cost Participation and the state’s system of payments are contained in the Fiscal Policies for BCW. FCP is Georgia’s determination of a family’s ability to pay for early intervention services as allowed by Part C of IDEA. FCP is a percentage of the cost of early intervention services that are not covered by private insurance or public benefits like Medicaid or PeachCare.

DOES BCW ACCEPT PRIVATE INSURANCE OR PUBLIC BENEFITS SUCH AS MEDICAID AND PEACHCARE TO PAY FOR SERVICES?

Yes, private insurance and public benefits such as Medicaid and PeachCare are accepted by BCW providers and are a routine payment source for early intervention services. The use of private insurance and public benefits such as Medicaid and PeachCare reduces out-of-pocket costs for families and maximizes the state’s resources to participate in Part C of IDEA. In Georgia, Medicaid and PeachCare include coverage managed by CareSource, WellCare, Peach State, and Amerigroup. Family Cost Participation only applies to Individualized Family Service Plan (IFSP) services which are not covered by third party fund sources such as private insurance, Medicaid, and PeachCare.

WHEN IS MY CONSENT REQUIRED?

Before your insurance benefits can be accessed to reduce the percentage of your family’s cost participation for early intervention services, your BCW Service Coordinator must request your consent to access your private insurance (if applicable) and/or your consent to disclose personally identifiable information to the Georgia Department of Community Health, the state agency responsible for administering public benefits, such as Medicaid or PeachCare, so that your child’s public benefits can be accessed to pay for early intervention services.

Additionally, consent to access public or private benefits is required each time a change is made to your child’s IFSP services that affect service frequency, length, duration, or intensity.

You have the right to decline to give consent, and you can withdraw consent at any time. If you deny or withdraw consent to access your private insurance or public benefits, BCW must still provide services, but you will be responsible for full cost participation for all IFSP services.

BCW cannot require you to apply for public benefits such as Medicaid or PeachCare as a condition of receiving services. However, your BCW Service Coordinator will help you apply for these public benefits for your child at your request. If as a result, your child is approved for the public benefits, BCW must still obtain your consent prior to accessing these public benefits or insurance to pay for your child’s services.

HOW IS FAMILY COST PARTICIPATION DETERMINED?

To determine your family’s cost participation percentage the Children and Youth with Special Health Care Needs (CYSHCN) Financial Analysis Form must be completed collaboratively by you and your BCW Service Coordinator prior to the development of your child’s initial and annual IFSP. The CYSHCN Financial Analysis Form is completed once your child is determined to be eligible for BCW. In addition, this form must be completed when your family’s financial situation changes and/or when you (or another parent)
request the form to be reviewed. Parents must receive a copy of the CYSHCN Financial Analysis Form to identify the potential cost that may result from the use of private or public insurance to pay for IFSP services.

The BCW Cost Participation Scale is a part of the CYSHCN Financial Analysis Form used to determine your family’s cost participation percentage. The BCW Cost Participation Scale is based on 200 percent of the annual federal poverty level, your family size, and monthly or annual gross income as well as deductions for allowable extraordinary expenses associated with your child’s disability or eligible medical condition. Allowable extraordinary expenses include but are not limited to special child care costs, materials/supplies, equipment, medical/health expenses, medications, special foods or supplements, and transportation/parking expenses to access care.

If your family is determined unable to pay after completing the CYSHCN Financial Analysis form and assigned a 0 percent Family Cost Participation, all Part C services will be provided at no cost to your child and family.

**WHAT IF I CHOOSE NOT TO COMPLETE THE CHILDREN AND YOUTH WITH SPECIAL NEEDS FINANCIAL ANALYSIS FOR COST PARTICIPATION?**

If you choose not to complete the CYSHCN Financial Analysis form, then you will assume 100 percent Family Cost Participation if public or private insurance does not pay for the service(s). Family Cost Participation only applies to IFSP services which are not covered by third party fund sources such as Medicaid, PeachCare, or private insurance.

**WHY IS THERE A COST FOR SERVICES IN BABIES CAN’T WAIT?**

Early intervention services are funded primarily by state and federal Part C (of IDEA) funds as well as private insurance and public benefits such as Medicaid and PeachCare. In Georgia, Medicaid and PeachCare include coverage managed by CareSource, WellCare, Peach State, and Amerigroup. Part C of IDEA allows states to establish family fees as a part of the state’s system of payments for early intervention services. Additionally, Part C of IDEA requires that Part C funds must be the payor of last resort for early intervention services. Therefore the state must seek payment from all other sources available to fund early intervention services before using Part C funds.

**HOW DOES COMPLYING WITH FAMILY COST PARTICIPATION (FCP) BENEFIT MY FAMILY?**

Completing the FCP documents and giving consent to access private insurance and/or public benefits such as Medicaid and PeachCare to pay for your child’s early intervention services through BCW ensures that your FCP will be at the lowest percentage possible. More importantly, if private insurance or public benefits such as Medicaid or PeachCare fully or partially covers an IFSP service, then you will not have to pay Family Cost Participation for that service. Moreover, BCW Part C funds will be responsible for copayments and deductibles for covered IFSP services. BCW providers cannot bill families for copays, deductibles, travel or any other fees if insurance has paid any portion of a claim or the cost was applied to the deductible. If any portion of a claim is paid by Medicaid, the provider must consider that as payment in full. The BCW program will not pay for premiums with Part C funds.
WHAT IS THE ADVANTAGE OF USING BCW FOR MY CHILD’S EARLY INTERVENTION SERVICES INSTEAD OF USING MY PRIVATE INSURANCE FOR PRIVATE THERAPY?

The BCW program has established statewide rates with all BCW service providers that are equal to the Medicaid rates for most services. BCW rates are generally lower than most usual and customary rates charged by professionals for services outside of the BCW program. Additionally, BCW providers come to your child’s natural environment such as your home or your child’s early learning center for most services. BCW providers incorporate your child’s daily routines and activities into their services thus increasing learning opportunities and reducing trips to a professional’s office. Finally, BCW provides family service coordination throughout the time your child is in BCW as well as transition support to school or community services as your child approaches age 3 (the age at which school system services begin and BCW services end).

WHAT HAPPENS IF I DON’T PAY MY FCP FOR BCW SERVICES?

Families with cost participation who fall 90 days behind in payments will have services suspended. BCW service providers will send all notices and bills directly to parents for collection. At 60 days past due, parents will receive a late notice allowing 30 more days to make full payment before services are suspended. The effective date of suspension is 90 days from the date of the first invoice requesting payment after a provider receives an Explanation of Benefits (EOB) from your private insurance or public benefits such as Medicaid or PeachCare denying coverage of an IFSP service. Full payment of the past due amount must be made to the provider by this date to avoid suspension of services. Once services have been suspended full payment of the past due amount plus the amount currently due must be made to the provider before services can be restored. During the suspension period service coordination, IFSP development or review, evaluation and assessment and procedural safeguards will continue. Service visits that do not occur during the suspension period will not be “made up” by the provider.

WHAT SERVICES MUST BE MADE AVAILABLE TO FAMILIES AT NO COST?

Services that must be made available and provided to families and children at no cost include:

- Child find
- Evaluation and/or assessment activities
- Service coordination
- Activities related to procedural safeguards
- Development, review, and evaluations of IFSPs and interim IFSPs
- All Part C services when the parent of family meets the state’s definition of inability to pay

WILL I BE CHARGED MORE FOR BCW SERVICES IF MY CHILD HAS PRIVATE INSURANCE OR PUBLIC BENEFITS SUCH AS MEDICAID OR PEACHCARE?

Families will not be charged more than the actual cost of the Part C service including payments from all sources for a service. Families with public insurance or private insurance will not be charged disproportionately more than families without any insurance.
WHAT IF I DISAGREE WITH MY FAMILY COST PARTICIPATION FEE?

If you wish to contest the imposition of a fee, or the state’s determination of your ability to pay, you may do any of the following:

• Request mediation
• Request a due process hearing
• File a state complaint
• Use any other procedure established by the state for speedy resolution of financial claims, while at the same time pursuing one of the redress options listed above

Your BCW Service Coordinator will provide information and assistance in pursuing any of these options upon your request.

Note: All BCW families are provided a copy of the Fiscal Policies (System of Payments) document when BCW Service Coordinators are seeking consent to use private insurance and seeking consent for using personally identifiable information to access public benefits such as Medicaid or PeachCare.

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0% Family Cost Participation: All BCW IFSP services will be provided at no cost to the family.

Child Find: A state system to notify the Georgia Department of Education (DoE) of all children transitioning out of Babies Can’t Wait to ensure that suspected children with disabilities, regardless of the severity of their disability, and who may be in need of special education and related services, are identified, located, and evaluated, which is a federal requirement. Parents/guardians can refuse to give consent for BCW to share the information with DoE by signing the “Opt Out” section of the Notice of Intent to Transmit Notification form.

Co-Payments: A specified amount of money that a person with health insurance is required to pay at the time of each visit to a doctor or specialist.

Cost Participation Scale: Measurement used to determine the Family Cost Participation (amount the family is responsible for paying), which is calculated based on 200 percent of the annual federal poverty level, family size, monthly/annual gross income, and deductions for allowable extraordinary expenses (ex. Special childcare costs, materials/supplies equipment, medical/health expenses, medications, special foods or supplements, and transportation/parking expenses to access care etc.) associated with the child's eligible medical condition.

Deductibles: A specified amount of money that a person with health insurance is required to pay for health care services before the insurance company will pay a claim.

Explanation of Benefits (EOB): A written statement sent by a health insurance company to a person with health insurance (covered individual) or medical provider explaining what medical treatments and/or services were paid for by the insurance company on behalf of the covered individual. It also specifies what the covered individual must pay.

Family Cost Participation (FCP): **Refer to Family Fees’ definition; Note, FCP only applies to IFSP services which are not covered by private insurance or public insurance (Medicaid or PeachCare). Families that have IFSP services that will be covered by private or public insurance will not have a Family Cost Participation for those services.

Family Fees: In Georgia, these fees are called, **Family Cost Participation, which are costs collected from a parent/guardian as a result of the family receiving early intervention services through BCW.

Full Cost Participation: The family is responsible for paying all of the allowable cost for the early intervention services received through BCW.

Individual Family Service Plan (IFSP): A plan for early intervention services for children from birth to three (3) years of age with developmental delays.

Out-of-Pocket Cost: The expenses a family is required to pay for medical treatment/services that may or may not be covered by the insurance company, which are not reimbursable such as deductibles and copayments.
**Part C Funds:** Grant funds to be used for early intervention services, but only as a “payor of last resort.”

**Part C of Individuals with Disabilities Education Act (IDEA):** A federal grant program that assists states in operating a comprehensive statewide program of early intervention services for children ages birth to three (3) years old.

**Payor of Last Resort:** Federal law requires that states identify and coordinate the usage of all available resources (public and private insurance, as well as sliding fee scale, such as the Family Cost Participation) to pay for early intervention services before using Part C funds (BCW funds).

**Premiums:** The monthly fee that a family pays an insurance company or health plan to provide health coverage, which keeps the coverage active.

**Procedural Safeguards:** The protections afforded by IDEA to protect the rights of children with disabilities, as well as the rights of their parents (ex. confidentiality of personally identifiable information and early intervention records; parental consent and notice; surrogate parents; and dispute resolution options).

**System of Payments:** The state’s written policy regarding the costs parents and children may incur for receiving Part C services (BCW), and may include the use of public (Medicaid and PeachCare), private insurance, or a sliding fee scale, such as the Family Cost Participation.

**Third Party Fund Source:** Private insurance and public insurance (Medicaid and PeachCare)