

Part C Coordinator's Report January 12, 2023

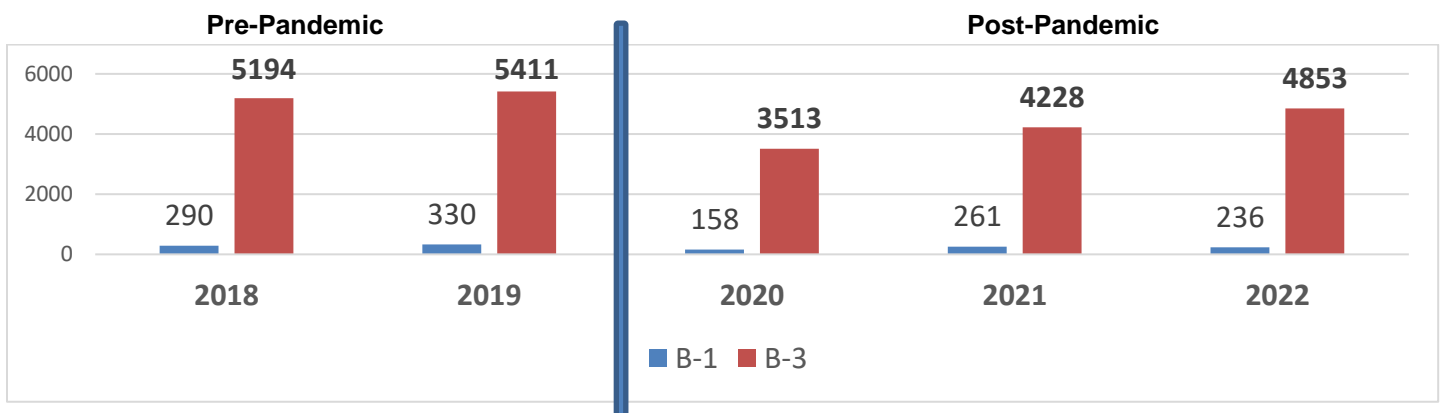
Service Statistics

FY23	07/01/2022-09/30/2022	10/01/2022-12/31/2022	01/01/2023-03/31/2023	04/01/2023-06/30/2023
Screened (children with suspected delay)	1,724	1,609		
Number of referrals	3,212	2,845		
Number new eligible children (includes Established Risk, Developmental Delay and Informed Clinical Judgment)	1,379	1,393		
Total unduplicated number of children served during period (includes those evaluated but no IFSP services)	7,561	6,184		

Source: *Technology-assisted Observation and Teaming System (TOTS).*

Federal Program Requirements

5-year December 1 Child Count



SPP/APR: The annual report is due February 1, 2023. This report is the basis for the U.S. Office of Special Education Programs (OSEP) determinations that indicate if a state meets the requirements of the Individuals with Disabilities Education Improvement Act (2004). Refer to the At-A-Glance Handout and PowerPoint for results.

OSEP Differentiated Monitoring: Efforts to prepare for OSEP monitoring continue. In December 2022, the OSEP monitoring team provided a list of documentation of policies and practices. The documents are due in March. On January 6, Kentucky staff shared their experiences to date with other states new to the Differentiated Monitoring System (DMS) process through a national technical assistance call. At this point, the development of reference materials for OSEP that describe the Kentucky program is priority. States that have been through their onsite recommended states do this to facilitate the visit for the OSEP team.

KEIS Operations

State Lead Agency (SLA) Staff: Two new administrative specialists started in November: Meagan Preston and Keri Gregory. Meagan is working with the billing team and Keri is working with the enrollment team, including Family Share, and assisting with billing as needed. One position, the Budget Specialist I, continues to be vacant. The hiring of a temporary worker to assist with billing is in process.



Meagan lives in Waddy with her husband and their four cats. Most of her free time is spent at home, where they have seven acres and plenty to keep them busy. Meagan has worked for the state for 13 years and is really enjoying being part of the KEIS billing team so far.



Keri graduated from Transylvania University with a Bachelor of Arts in biology. She has been a state employee since 2018 and was previously with the Department of Revenue. Keri has been happily married to Doug (also a state employee) for 23 years (24 in March). They live in Sadieville with their two boys, Taylor (22) and Tyler (16).

Compliance Monitoring:

Formal Complaints

- No new formal complaints were received this quarter. One formal complaint received in the previous quarter was resolved.
 - Bluegrass POE
 - The complaint alleged a specific provider was unprofessional and focused too much on the entire classroom in daycare and not enough on the child receiving services. The services were suspended on the parent's request and the provider was removed from the child's plan. A review of the provider's caseload suggested the provider was not violating any policies but could focus more on caregiver input. The provider created a professional development plan and continues to work on interactions with caregivers.

Audits

- Four billing audits were completed this quarter that resulted in findings of noncompliance. Issues noted included overlaps in visits, no break for travel between visits, billing for services where the child was not an active participant, inadequate service logs, providing the incorrect number of services per the Individualize Family Service Plan (IFSP), not addressing the IFSP outcomes during visits, not using the families own resources during visits (bringing a toy bag), incorrect child's name in service logs, not providing services and entering documentation within 30 days of being added to the IFSP, and evaluations/assessments not entered timely. These issues resulted in recoupment of funds and corrective action plans.
- Two billing audits are ongoing.

With the addition of a new staff member, the General Supervision and Compliance (GSC) team at the State Lead Agency (SLA) is now able to do more in-depth and more frequent audits. Providers are advised to ensure that all service logs are accurate and descriptive of the visit. Providers should pay special attention to the number of services they are to be completing per the IFSP. Missed visit documentation is critical to ensure compliance. Providers should notify service coordinators and document the communication in TOTS if there are any potential compliance concerns that are out of the providers control (parent regularly wants to work on something that is not an IFSP goal, family is difficult to schedule with, etc.).

Provider Updates: Early intervention providers including points of entry staff, audiologists, assistive technology providers, neonatal intensive care unit (NICU) evaluators, intensive level evaluators and SLA staff completed the mandatory Record Keeping and Confidentiality training for the SFY22-24 contract period. This training is a federal mandate for anyone who has access to Kentucky's online data system, TOTS and is required with every new contract. There were forty-two (42) agency suspensions issued due to training non-compliance; however, most of the suspended providers completed the training or were removed from the contract. A total of four (4) agencies were officially terminated due to training non-compliance.

The SLA is currently working on development of the mandatory training listed in the FY22-24 Service Provider Agreement: *Improving Practice in KEIS: Effective Use of Provider Performance Standards and the Self-Assessment Tool*. Once training development is complete, all active early intervention staff will be required to complete the training. It will be free of cost and housed on the KEIS Adobe Learning Manager.

The Assessment, Evaluation, and Programming System for Infants and Children, Third Edition (AEPS-3) cut off scores have been finalized by the publisher and was sent to all providers by listserv. As of January 1, 2023, any provider who administers the AEPS must use the AEPS-3. AEPS-2 is no longer be accepted.

Record Review:

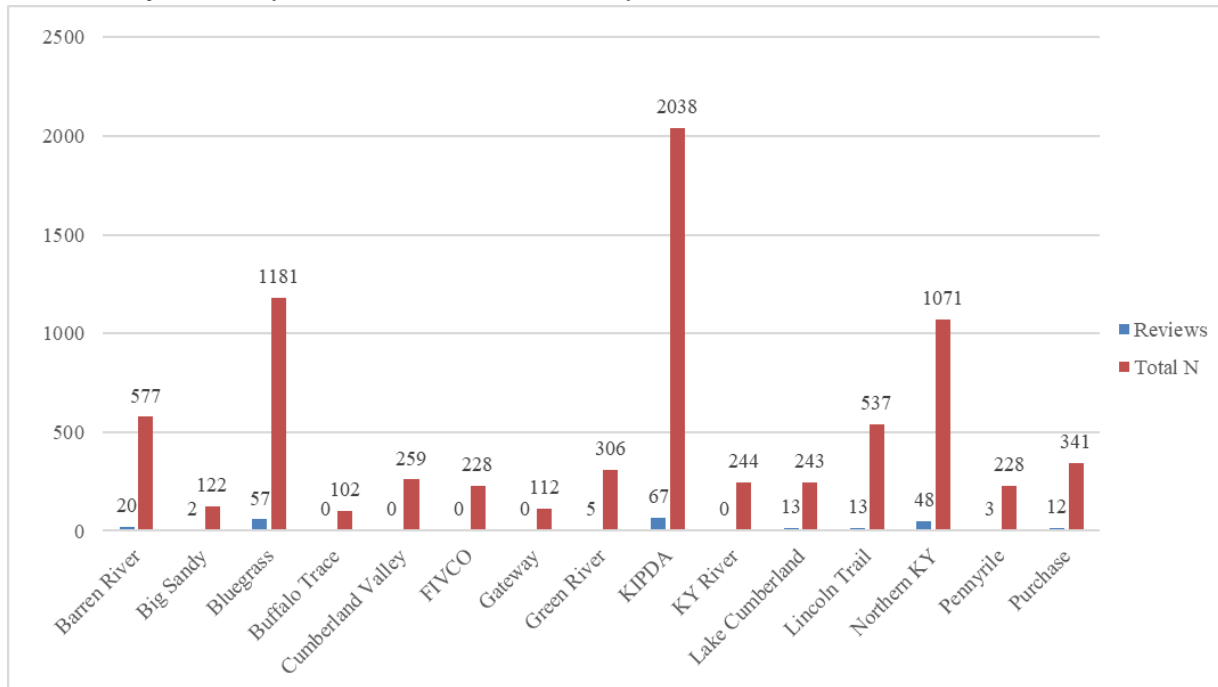
**Summary of Record Reviews FY 2023
07/01/22 – 12/31/23 (26 weeks)**

Review Type	N	Determinations	Criteria
Eligibility	169	163 - Eligible 05 - Denied 01 - Deferred - screening	<ul style="list-style-type: none"> Request in TOTS PLE Report in TOTS and phone contact Additional testing (if any)
Eligibility/ILE	58	52 - Approved for Eligibility clarification (DD vs ASD) 02 - Denied 04 - Deferred (referral on file; travel)	<ul style="list-style-type: none"> Review of Request in TOTS Review of all submitted records/TOTS documentation Description of child's social-communication MCHAT/STAT conducted by DCES
Intensive Authorization	5	04 - Approved for diagnostic clarification of an autism spectrum disorder and related program planning	<ul style="list-style-type: none"> Review of Request in TOTS Review of all submitted records/TOTS documentation Description of child's social-communication ASD Screening findings, if available
		00 - Approved for diagnostic clarification of Childhood Apraxia of Speech (CAS)/ Dyspraxia diagnosis and related programming	<ul style="list-style-type: none"> Review of Request in TOTS Review of all submitted records/TOTS documentation Receptive language vs. expressive language findings in relation to measured cognitive skills Description of speech sound production and progress Description of oral mechanism and oral-motor status
		00 - Approved for other – (e.g., Regulatory/Anxiety Disorders; motor/CP; Global Delay/Slow progress)	<ul style="list-style-type: none"> Review of Request in TOTS Review of all submitted records/TOTS documentation Review of phone contact (if any) Clinical judgment, DSM-5 criteria
		01 - Denied/Defer -Diagnosis established -Appropriate plan -Referral on file	
Service Exception	8	07 - Service Exception Approved Units Approved per Plan: Range: 138 - 216 Mean: 185.00 Unit Frequencies: - 0 – 144: 01 -145 – 164: 00 -165 – 184: 02 -185 – 204: 02 -205 – 224: 02 -225 – 244: 00 -245 – 264: 00 -265 – 284: 00 -285 – 304: 00 - > 305: 00	<ul style="list-style-type: none"> Review of Request in TOTS Review of all submitted records/TOTS documentation <ul style="list-style-type: none"> RBI and parent priorities Child's current developmental presentation/status Rate of documented progress Current and proposed interventions Request merit Review of phone contact (if any) Available practice standards or guidelines (Autism, CAS) Assignment of a primary service provider Implementation of a consultative model
		01 – Denied service exception/units	
Total	240		

Notes:

- 1.7% (n = 4) of the 240 requests have had previous reviews (all for service exception)
- Data reflects slight increase (3.9%) over same period FY 2022 (N = 231)
 - FY 2022: 8.89/week average; FY 2023: 9.23/week average

Referrals by District (with cumulative child count):



District	Reviews	N	Reviews per Child
Barren River	20	577	0.035
Big Sandy	2	122	0.016
Bluegrass	57	1181	0.048
Buffalo Trace	0	102	0.000
Cumberland Valley	0	259	0.000
FIVCO	0	228	0.000
Gateway	0	112	0.000
Green River	5	306	0.016
KIPDA	67	2,038	0.033
KY River	0	244	0.000
Lake Cumberland	13	243	0.053
Lincoln Trail	13	537	0.024
Northern KY	48	1,071	0.045
Pennyrile	3	228	0.013
Purchase	12	341	0.035
	240	7,589	0.032

Timeline Indicators this period:

Average days from complete file to review: 2.40 days

Average total days from complete file to final notification posted to TOTS: 2.50 days

FY23 KEIS Budget

Percent of Year Elapsed: 50.00%

REVENUES			
Fund	Budgeted	Expenditures	Spent
General--SJPA/SJPB (KEIS)	\$ 4,370,900.00	\$ 3,668,614.91	84%
Agency--Family Share/Medicaid	\$ 14,986,100.00	\$ 7,969,358.35	53%
Federal--SJPB 1200	\$ 6,169,000.00	\$ 2,460,096.00	40%
FFY21	\$ 6,280,636.00	\$ 2,890,203.85	46%
FFY22	\$ 6,374,484.00	\$ 4,940,085.26	77%
GRAND TOTAL REVENUES	\$ 38,181,120.00	\$ 21,928,359.37	57%

EXPENDITURES			
	Budgeted	Expenditures	Spent
Salaries/Fringe	\$ 1,086,900.00	\$ 533,552.30	49%
Personal Service Contracts	\$ -	\$ -	-
Other Personnel/Personnel Indirect	\$ 568,100.00	\$ 240,880.20	42%
PERSONNEL SUBTOTAL	\$ 1,655,000.00	\$ 774,432.50	47%
Operating	\$ 113,400.00	\$ 60,071.92	53%
Operating Indirect	\$ 104,600.00	\$ 56,538.02	54%
OPERATING SUBTOTAL	\$ 218,000.00	\$ 116,609.94	53%
Program Administration Contracts	\$ 5,208,700.00	\$ 2,986,416.65	57%
Local Health Department Grants	\$ 1,946,100.00	\$ 606,159.76	31%
Provider Agreements	\$ 15,391,300.00	\$ 9,196,788.30	60%
GRANTS/BENEFITS SUBTOTAL	\$ 22,546,100.00	\$ 12,789,364.71	57%
GRAND TOTAL EXPENDITURES	\$ 24,419,100.00	\$ 13,680,407.15	56%

Provider Payments FY23

	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr
Total \$ Amount billed to Medicaid	\$2,061,508.36	\$2,361,354.94		
Total \$ Amount paid by Medicaid	\$2,038,180.98	\$2,328,316.22		
Medicaid Denial (\$)	\$23,327.38	\$33,038.72		
Medicaid Denial (%)	1.13% denial	1.40% denial		
Total \$ Amount paid by Insurance				
	\$115,428.73	\$162,043.81		
Total \$ Amount paid by KEIS				
	\$2,707,017.99	\$2,413,322.65		
Total Paid All payor sources:	\$4,860,627.70	\$4,903,682.68		
Family Share Payments Received				
	\$6,495.00	\$6,055.00		

Note 1: Data Source is TOTS. Quarterly data changes as data updated. Excludes POE payments.