

Illinois Early Intervention Services System Family Participation Fees Program Fact Sheet

Family Participation Fees:

Family Participation Fees are payments made by families for Early Intervention (EI) services that are subject to fees. Not all EI services are subject to fees. Direct services, like Physical Therapy, Developmental Therapy, or Speech Therapy are subject to fees. Other services such as Service Coordination, Evaluations, Assessments and Individualized Family Service Plan (IFSP) Development are not subject to fees. You can find a detailed list of services subject to fees in the *Notice of System of Payments and Fees* and the *Early Intervention Cornerstone Family Fee Report* you receive from your service coordinator.

Requirement for Households Paying Family Participation Fees:

The Early Intervention Program requires a family meeting our definition of ability to pay help pay for their child and family's EI services.

Comparison of Free Services Provided by the School District:

The Free Appropriate Public Education (FAPE) requirement does not apply to Early Intervention. The Individuals with Disabilities Education Act (IDEA) says that EI services must be "provided at no cost except where Federal or State law provides for a system of payments by families, including a schedule of sliding fees," (Section 632 (B)). 325 ILCS 20/ Early Intervention Services System Act is the state statute that allows a sliding scale payment system.

Calculation of Amount of Family Participation Fees:

The fee assessment first calculates how much your family is able to pay over the course of one year and then breaks that down into a more convenient monthly amount called the Level Payment Amount. Fees are redetermined annually. Fees are calculated using your family size (for tax reporting purposes), your annual gross income (for tax reporting purposes) and considers any excessive out-of-pocket medical/disaster expenses. You can estimate your fee amount using the following table. When families choose not to disclose their income to EI, the family agrees to accept the highest family monthly installment while active in EI. This table is updated annually based on the Federal Poverty Levels.

FY 2014 FEE CALCULATION (Effective July 1, 2013)									
Find column where family size and gross income meet to determine child's monthly fee installment:									
Family Size	\$0 / Month Installment	\$10 / Month Installment	\$20 / Month Installment	\$30 / Month Installment	\$50 / Month Installment	\$70 / Month Installment	\$100 / Month Installment	\$150 / Month Installment	\$200 / Month Installment
	0-185% FPL	> 185-200% FPL	> 200-250% FPL	> 250-300% FPL	> 300-350% FPL	> 350-400% FPL	> 400-500% FPL	> 500-600% FPL	> 600% FPL
2	\$0 – 28,694	\$28,695 – 31,020	\$31,021 – 38,775	\$38,776 – 46,530	\$46,531 – 54,285	\$54,286 – 62,040	\$62,041 – 77,550	\$77,551 – 93,060	Above \$93,060
3	\$0 – 36,131	\$36,132 – 39,060	\$39,061 – 48,825	\$48,826 – 58,590	\$58,591 – 68,355	\$68,356 – 78,120	\$78,121 – 97,650	\$97,651 – 117,180	Above \$117,180
4	\$0 – 43,568	\$43,569 – 47,100	\$47,101 – 58,875	\$58,876 – 70,650	\$70,651 – 82,425	\$82,426 – 94,200	\$94,201 – 117,750	\$117,751 – 141,300	Above \$141,300
5	\$0 – 51,005	\$51,006 – 55,140	\$55,141 – 68,925	\$68,926 – 82,710	\$82,711 – 96,495	\$96,496 – 110,280	\$110,281 – 137,850	\$137,851 – 165,420	Above \$165,420
6	\$0 – 58,442	\$58,443 – 63,180	\$63,181 – 78,975	\$78,976 – 94,770	\$94,771 – 110,565	\$110,566 – 126,360	\$126,361 – 157,950	\$157,951 – 189,540	Above \$189,540
7	\$0 – 65,879	\$65,880 – 71,220	\$71,221 – 89,025	\$89,026 – 106,830	\$106,831 – 124,635	\$124,636 – 142,440	\$142,441 – 178,050	\$178,051 – 213,660	Above \$213,660
8	\$0 – 73,316	\$73,317 – 79,260	\$79,261 – 99,075	\$99,076 – 118,890	\$118,891 – 138,705	\$138,706 – 158,520	\$158,521 – 198,150	\$198,151 – 237,780	Above \$237,780
For family sizes above 8, add the following to above income ranges for each additional family member:									
1	\$0 – 7,437	\$7,438 – 8,040	\$8,041 – 10,050	\$10,051 – 12,060	\$12,061 – 14,070	\$14,071 – 16,080	\$16,081 – 20,100	\$20,101 – 24,120	Above \$24,120

** Based on FFY 2013 Federal Poverty Level Guidelines. This table is updated annually.**

Illinois Early Intervention Services System Family Participation Fees Program Fact Sheet

The Level Monthly Payment Amount begins when your family's services subject to fees are authorized to begin and ending when your family's IFSP ends. This period, called the **Family Fee Effective Period**, is listed on your Early Intervention Cornerstone Family Fee Report.

Your maximum out-of-pocket Family Fee (listed on your *Early Intervention Cornerstone Family Fee Report*) is calculated based on your Family Fee Effective Period. The monthly level payment amount is sent each month to any family who qualifies for a Family Fee. The monthly level payment amount accrues the first month that one or more of your Authorizations for services subject to fees begins on or before the 15th of the month. You will receive a bill (invoice) for each month your family is active in Early Intervention through the month your IFSP ends on or after the 16th of the month.

Required Financial Documentation used to Determine the Family Participation Fee Amount:

You will be asked to provide your family's most recent Federal Income Tax form(s) in order to document gross annual income. If a recent Federal Income Tax form does not accurately reflect your annual gross income or is not available, two recent consecutive check stubs may be used.

If your child is covered by Medicaid/AllKids or WIC, you will be asked to provide a copy of his/her current Medicaid/AllKids Recipient Card or WIC Identification Card. In addition, you will be asked to provide a verbal indication of your annual gross income.

Family Participation Fee Household Calculation:

One Family Fee is assessed per family, even if more than one child is enrolled in the Early Intervention Program. Neither your maximum-out-of-pocket nor your monthly level payments will increase due to multiple children entering/receiving Early Intervention at the same time because the Family Participation Fee is based strictly on household size and income when you entered, not how many children participate in the program.

Affording Family Participation Fees during Changes or Extenuating Circumstances:

The Illinois EI definition of ability to pay is comparing household size and taxable reported income to the Federal Poverty Level on a sliding scale and considers out-of-pocket medical/disaster expenses. A family meets the definition of ability to pay if the family falls within the scale and does not have proven out-of-pocket medical (allowable as IRS deductions) or disaster (fire, flood or act of nature) expenses in excess of 15% of the reported income. The inability to pay is defined as a family whose household size and taxable reported income does not fall within the sliding scale and/or has proven out-of-pocket medical (allowable as IRS deductions) or disaster (fire, flood or act of nature) expenses in excess of 15% of reported income. If a family does not meet the state's definition of "ability to pay", the family must be provided all EI IFSP approved and consented services at no cost without delay.

You may request that your family fee be re-assessed at any time if your income or family size changes or if current medical expenses or other expenses due to natural disaster such as fire, flood or tornado as defined above exceed 15% of your gross annual income.

Changes to your family's fee may only be applied prospectively. This means that the portion of your fee that has accrued up to the time you request a re-assessment or exemption cannot be changed in the system. Therefore, it is important that you notify your Service Coordinator as quickly as possible when a re-assessment or exemption is needed.

You must request a re-assessment or exemption through your Service Coordinator. You must follow the policies and procedures of requesting a Family Fee Exemption. This includes steps such as signing an Exemption Request form and providing documentation of the expenses. If approved, the Exemption begins when the Department of Human Services Bureau of Early Intervention receives the signed form from the Service Coordinator.





A family will not experience a delay or denial of services for an inability to pay if the family meets the State's definition of inability to pay. These families must be provided all EI IFSP approved and consented services at no cost.

Illinois Early Intervention Services System Family Participation Fees Program Fact Sheet

Family Fee Statements

If your family has been assessed a fee, you will receive a monthly invoice, like the one below, from the Early Intervention Central Billing Office (CBO).

Family Fee Invoices are mailed during the first week of every month. Payments are due to the State on the date shown on the Invoice. Families with more than one child in EI should receive one Family Fee Invoice. If your family has more than one child in EI and is receiving more than one invoice, contact your Service Coordinator and notify him/her of the problem.

	<p>Early Intervention Central Billing Office P. O. Box 88726 Chicago, IL 60680-1726 (800)634-8540</p>	<p>Family Fee Invoice</p> <p>Statement Date: 10/01/10</p> <p>Payment Due Date: 10/25/10</p> <p><small>Please allow 7-10 days for the payment to be credited to your account.</small></p>																				
<p>Parent Testcase 123 Any Street Anytown, IL 99999</p>	<p>EI Child Name: Johnny Testcase & siblings EI Number: 111111 EI Account Number: 000111111/01 IFSP Dates: 07/15/10 – 07/14/11 Invoice Number: CB220168</p>																					
<ul style="list-style-type: none"> • It is your responsibility to contact your Service Coordinator if you have any change in name/address or questions. • Acceptable payment methods include check or money order made payable to the Illinois Department of Human Services. Do Not Send Cash. • Keep this top portion for your records. Please carefully detach the remittance stub form below and return it with your payment in the enclosed envelope. • Please refer to the back of this document for important information regarding Family Fee policy. • If your family begins a second or third IFSP, you may receive multiple statements simultaneously, indicated by different suffix on account number. 																						
<p>Summary of Account Activity</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Monthly Level Payment</td> <td style="text-align: right;">\$ 100.00</td> </tr> <tr> <td>CBO Payments to Date for Services Subject to Fees</td> <td style="text-align: right;">\$ 422.64</td> </tr> <tr> <td>Family Payments to Date towards Maximum Out Of Pocket</td> <td style="text-align: right;">\$ 300.00</td> </tr> <tr> <td>Total Adjustments/Credits for current IFSP</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>Amount and Date of most recent payment</td> <td style="text-align: right;">\$ 100.00 09/22/10</td> </tr> <tr> <td>Minimum Due</td> <td style="text-align: right;">\$ 100.00</td> </tr> </table>			Monthly Level Payment	\$ 100.00	CBO Payments to Date for Services Subject to Fees	\$ 422.64	Family Payments to Date towards Maximum Out Of Pocket	\$ 300.00	Total Adjustments/Credits for current IFSP	\$ 0.00	Amount and Date of most recent payment	\$ 100.00 09/22/10	Minimum Due	\$ 100.00								
Monthly Level Payment	\$ 100.00																					
CBO Payments to Date for Services Subject to Fees	\$ 422.64																					
Family Payments to Date towards Maximum Out Of Pocket	\$ 300.00																					
Total Adjustments/Credits for current IFSP	\$ 0.00																					
Amount and Date of most recent payment	\$ 100.00 09/22/10																					
Minimum Due	\$ 100.00																					
<p><u>Key Term Definitions:</u> Monthly Level Payment: Amount calculated by taking Maximum and dividing by number of months in IFSP for easier budgeting purposes. CBO Payments to Date for Services Subject to Fees: Total amount EI has paid since beginning of IFSP. Family Payments to Date towards Maximum Out of Pocket: Total amount you have paid towards the Maximum for the current IFSP. Total Adjustments/Credits for current IFSP: Amount of any credits approved based on policy. Minimum Due: Amount calculated your family must pay immediately to avoid delinquency and potential lapse in services. This amount is calculated using the Monthly Level Payment multiplied by the number of months that have passed within the current IFSP.</p>																						
<table border="0" style="width: 100%;"> <tr> <td style="width: 25%; text-align: center; vertical-align: middle;">  </td> <td style="width: 45%; vertical-align: top;"> <p>Early Intervention Central Billing Office P. O. Box 88726 Chicago, IL 60680-1726 (800)634-8540</p> </td> <td style="width: 30%; vertical-align: top;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>EI Child Name</td><td>Johnny Testcase</td></tr> <tr><td>EI Child #</td><td>111111</td></tr> <tr><td>Account Number</td><td>000111111/01</td></tr> <tr><td>Invoice Number</td><td>CB220168</td></tr> <tr><td>Date Due</td><td>10/25/10</td></tr> <tr><td>Minimum Due</td><td>\$100.00</td></tr> <tr><td>Enter Amount Paid</td><td>\$</td></tr> </table> </td> </tr> <tr> <td style="vertical-align: top; padding-top: 20px;"> <p>Parent Testcase 123 Anystreet Anytown, IL 99999</p> </td> <td></td> <td style="vertical-align: top; padding-top: 20px;"> <ul style="list-style-type: none"> • Please allow 7 – 10 days for the payment to be credited to your account. • If your family begins a second or third IFSP, you may receive multiple statements simultaneously. Please note the different suffix on the account number for proper credit to your accounts. </td> </tr> </table>				<p>Early Intervention Central Billing Office P. O. Box 88726 Chicago, IL 60680-1726 (800)634-8540</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>EI Child Name</td><td>Johnny Testcase</td></tr> <tr><td>EI Child #</td><td>111111</td></tr> <tr><td>Account Number</td><td>000111111/01</td></tr> <tr><td>Invoice Number</td><td>CB220168</td></tr> <tr><td>Date Due</td><td>10/25/10</td></tr> <tr><td>Minimum Due</td><td>\$100.00</td></tr> <tr><td>Enter Amount Paid</td><td>\$</td></tr> </table>	EI Child Name	Johnny Testcase	EI Child #	111111	Account Number	000111111/01	Invoice Number	CB220168	Date Due	10/25/10	Minimum Due	\$100.00	Enter Amount Paid	\$	<p>Parent Testcase 123 Anystreet Anytown, IL 99999</p>		<ul style="list-style-type: none"> • Please allow 7 – 10 days for the payment to be credited to your account. • If your family begins a second or third IFSP, you may receive multiple statements simultaneously. Please note the different suffix on the account number for proper credit to your accounts.
	<p>Early Intervention Central Billing Office P. O. Box 88726 Chicago, IL 60680-1726 (800)634-8540</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>EI Child Name</td><td>Johnny Testcase</td></tr> <tr><td>EI Child #</td><td>111111</td></tr> <tr><td>Account Number</td><td>000111111/01</td></tr> <tr><td>Invoice Number</td><td>CB220168</td></tr> <tr><td>Date Due</td><td>10/25/10</td></tr> <tr><td>Minimum Due</td><td>\$100.00</td></tr> <tr><td>Enter Amount Paid</td><td>\$</td></tr> </table>	EI Child Name	Johnny Testcase	EI Child #	111111	Account Number	000111111/01	Invoice Number	CB220168	Date Due	10/25/10	Minimum Due	\$100.00	Enter Amount Paid	\$						
EI Child Name	Johnny Testcase																					
EI Child #	111111																					
Account Number	000111111/01																					
Invoice Number	CB220168																					
Date Due	10/25/10																					
Minimum Due	\$100.00																					
Enter Amount Paid	\$																					
<p>Parent Testcase 123 Anystreet Anytown, IL 99999</p>		<ul style="list-style-type: none"> • Please allow 7 – 10 days for the payment to be credited to your account. • If your family begins a second or third IFSP, you may receive multiple statements simultaneously. Please note the different suffix on the account number for proper credit to your accounts. 																				

Illinois Early Intervention Services System Family Participation Fees Program Fact Sheet

Understanding Your Family Fee Invoice

These definitions may help you understand your Family Fee Invoice. You may refer to the Sample Family Fee Invoice (see page 3) to see how these items are arranged on the Invoice.

- **Monthly Level Payment:** The Maximum Out Of Pocket (from your Cornerstone Family Fee Report) broken down into monthly installment amounts. This level payment assists families in budgeting their Early Intervention expenses.
- **CBO Payments to Date for Services Subject to Fees:** This is the total amount accumulated from the beginning of the affected IFSP. It is strictly an amount to determine if any Minimum Due is owed by your family. You will accrue a monthly level payment each month but only owe a Minimum Due if CBO pays any direct services for your child(ren)/family.
- **Family Payments to Date towards Maximum Out Of Pocket:** This is the total amount accumulated from the beginning of the affected IFSP that your family has sent to Early Intervention.
- **Total Adjustments/Credits for current IFSP:** This is any amount Early Intervention determines your family was incorrectly charged. This may be credits issued because your family fee maximum out of pocket was decreased due to changes of household size/income or credits issued because your services ended prior to the end of the IFSP but the case was not correctly closed in the system.
- **Amount and Date of most recent payment:** The amount and date of when Early Intervention received your most recent payment.
- **Minimum Payment:** This amount is calculated by taking the amount paid by Early Intervention during the IFSP period for the family's services subject to fees, minus the family payments to date based on the monthly level payment amount, whichever is less. **NOTE: You will not be required to pay more in fees than the State pays for your family's services subject to fees.**

Payment Options

Determining monthly payment amounts:

You will be required to pay at least the Minimum Payment amount listed on your family's fee invoice. However, if the amount Early Intervention paid for services is less than your Current IFSP Maximum Out Of Pocket, you have two payment options. You may choose to either:

1. Pay the Monthly Level Payment amount as indicated (this is the recommended payment option because it is the only way to make sure that your minimum due is never higher than the level payment amount); or
2. Pay the Minimum Payment amount as indicated on your fee invoice.

The Minimum Payment amount is based on how much the State has paid your EI service provider(s) for services subject to fees. This amount may vary by month because providers have up to 9 months from the date of service or last written correspondence with the insurance company to bill for EI services. This means that the State may not pay anything for your family's services subject to fees for several months.

Later, when your provider starts submitting claims to Early Intervention, Early Intervention will begin making payments which does affect your Family Fee.

If you do not pay the Monthly Level Payment amount, and instead wait to pay until Early Intervention incurs some expense on behalf of your family, you may be required to pay an amount much higher than the level payment plan would have required. For this reason, families are usually encouraged to select the level payment plan by paying their Monthly Level Payment every month.

Utilizing private health insurance to reduce costs to the Early Intervention program:

Only EI services subject to fees that are paid for by the State are used to calculate the Minimum Payment amount. This means that you will not be charged for EI services subject to fees that are paid for by your private insurance. Providers must accept the insurance payment as "payment in full" for the service unless the amount reimbursed by insurance is less than the EI rate. EI may make partial payments for insurance covered services up to the EI rate if there is still a remaining deductible or if the negotiated rate of reimbursement is less than the EI rate. Any amount EI pays the provider will accumulate towards the maximum out of pocket calculated for a family.

Illinois Early Intervention Services System Family Participation Fees Program Fact Sheet

Delinquency and Reconciliation

Skipping Family Participation Fee Payments:

If a Minimum Payment amount becomes equal to three or more Monthly Level Payment amounts overdue, EI services subject to fees, including Assistive Technology devices, will be discontinued with written prior notice to you. Services not subject to fees may continue. Your family has the right to appeal this decision. If your family does appeal, certain services may continue during the appeal process.

Overpaying Family Participation Fees:

Nine months after the IFSP has ended (or earlier if possible), the State will verify that you have not paid more in fees than the State has paid for your services subject to fees. This is called reconciliation, or reconciling your account. If you have overpaid and one or more children remain in the EI Program, your current account will be credited any amount overpaid in previous accounts. If you do not have any other children in the EI Program, your overpayment will be refunded.

Early Intervention will not automatically refund an overpayment before your account has completed the reconciliation period. There is a potential to receive the refund earlier if all criteria is met. You must request an early refund by contacting your Service Coordinator. In order to allow an early refund, Early Intervention must obtain written documentation from your EI service provider(s) verifying that they have been paid in full and will not be billing the State for any other authorized EI services. There is not a requirement of the service provider to comply with such a request so the policy of the reconciliation process is the primary way of refunding any overpayment.

Understanding Your Rights

Disagreement with Family Participation Fee Calculations:

If you do not agree with the fee your family has been assessed, you have the right to dispute the assessment. You should notify your Service Coordinator of any errors on the calculation no more than 30 days after you receive your family's *Early Intervention Family Fee Report* that tells you your fee amount to have it corrected prospectively in the system and a new report printed and sent to you.

If you wish to contest the imposition of a fee or the State's determination of the ability to pay, you may do one of the following:

- 1) Request mediation;
- 2) Request a due Process Hearing; and
- 3) File a State Complaint

You may request a form from your Service Coordinator.

More Information

If you have questions about your fee statement, you may contact the Early Intervention Central Billing Office at 800/634-8540.

If your income and/or family size has changed and you wish to request a re-assessment of your family fee or you are experiencing excessive medical or disaster expenses and wish to request a fee exemption, you must contact your Service Coordinator immediately. As explained on the *Early Intervention Cornerstone Family Fee Report*, changes are only made on future monthly installments. The system has no way of making changes for past months.

If you would like more information about the Early Intervention Program, you may visit the DHS Early Intervention website at www.dhs.state.il.us/ei/.