

**REGIONAL CENTER OF THE EAST BAY
PURCHASE OF SERVICE POLICY #3423**

Date Revised: 4/2011

THERAPIES

PHILOSOPHY

Therapies include occupational, physical therapy, and speech/language therapy. Therapy services may be necessary to facilitate and promote maximum potential or prevent significant deterioration in an area of development or health. Therapy services must be related to the consumers' developmental disability or condition that qualified him/her for regional center services. Services that are described as therapeutic but are experimental in nature and have no proven outcomes are not included in this Policy.

SERVICE DEFINITION

Therapy services are provided by individuals who meet the established professional qualifications of their discipline in the State of California and where applicable meet the licensure requirement found in Title 17 of the California Code of Regulations. Therapeutic services may be provided individually, in small groups or through a consultative model.

Infants and toddlers may receive therapy services through a comprehensive infant development program and would not usually be considered for individual therapy if they receive therapy in a group setting. For children three years and older, therapy services related to education are the responsibility of the school district and Regional Center of the East Bay (RCEB) will provide advocacy and consultation to assist parents in obtaining services through the Individual Education Program (IEP). Therapy or therapy consultation may occasionally be indicated for an adult where specific issues of health and safety are involved or where there is clear evidence that without this therapy, the consumer's functioning will deteriorate.

~~Private insurance, California Children's Service, Champus, Shriners, Elks, Medi-Cal, Medicare and public school programs are generic funding resources for therapy. Funding from generic resources must be sought and accessed for therapy services for consumers over the age of three.~~ **“Effective July 1, 2009...regional centers shall not purchase any service that would otherwise be available from Medi-Cal, Medicare, the Civilian Health and Medical Program for Uniform Services, In-Home Support Services, California Children's Services, private insurance, or a health care service plan when a consumer or a family meets the criteria of this coverage but chooses not to pursue that coverage”.** [Welf. & Inst. Code section 4659, subd (c)]. Exception to this must be reviewed through the exception process.

BOARD POLICY

RCEB may purchase therapy services and supports from a qualified provider if:

- The consumer requires one or more therapy services, as determined by an appropriate therapist and the IFSP/IPP planning team agrees it is necessary in

order to achieve the objective/goals for the consumer to maximize potential, to live a more independent life, or prevent a deterioration in function.

- A professional has completed an assessment with a specialty in the therapy services and specific therapy outcomes are identified and a timeframe for reviewing progress is established.
- An appropriate RCEB clinical specialist has reviewed the assessment and documents the necessity for the service and their support.
- Funding for the service is not available from any other source.

“RCEB’s authority to purchase the following services shall be suspended pending implementation of the Individual Choice Budget and certification by the Director of Developmental Services that the Individual Choice Budget has been implemented and will result in state budget savings sufficient to offset the costs of providing the following services...”

(3) educational services for children three to 17, inclusive, years of age

(4) nonmedical therapies, including, but not limited to, specialized recreation, art, dance, and music” [Welf. & Inst. Code section 4648.5, subd. (a)(3)(4)]

“An exemption may be granted on an individual basis in extraordinary circumstances to permit purchase...when the regional center determines that the service is a primary or critical means for ameliorating the consumer’s physical, cognitive, or psychosocial effects of the consumer’s developmental disability, or the service is necessary to enable the consumer to remain in his or her home and no alternative service is available to meet the consumer’s needs.” [Welf. & Inst. Code section 4648.5, subd. (c)]

Authorization for services funded by RCEB will be up to a maximum of six months. The professional must provide a progress report documenting progress, effectiveness and a continued need prior to any renewal.

PROCEDURES

When identified as a need by the Planning Team, the Case Manager will obtain an assessment by a professional with a specialty in the therapy service. Appropriate funding sources for assessment will be identified and pursued. Based on the outcome of the assessment, the Planning Team will review the assessment, therapy goals and ensure the goals are identified in the IFSP/IPP along with determining progress reviews.

Therapy services may include monitoring, parental instruction, written information, consultation in home or program, or individual therapy. The frequency of individual therapy will be based on a consideration of multiple factors such as age and functional goals; diagnosis and prognosis; motivation; medical fragility and or medical clearance; caregiver availability; location, other therapies needed; and other services including infant development or day program services.

RCEB “shall identify and pursue all possible sources of funding for consumers receiving regional center services. These sources shall include, but not be limited to, both of the following:

(1) Governmental or other entities or programs required to provide or pay the cost of providing services, including Medi-Cal, Medicare, the Civilian Health and Medical Program for Uniform Services, school districts, and federal supplemental security income and the state supplementary program.

(2) Private entities, to the maximum extent they are liable for the cost of services, aid, insurance, or medical assistance to the consumer. [Welf. & Inst. Code section 4659, subd.(a)(2)]

RCEB will “ not purchase any service that would otherwise be available from Medi-Cal, Medicare, the Civilian Health and Medical Program for Uniform Services, In-Home Support Services, California Children’s Services, private insurance, or a health care service plan when a consumer or a family meets the criteria of this coverage but chooses not to pursue that coverage.”[Welf. & Inst. Code section 4659, subd. (c)]

RCEB will “ not purchase medical...services for a consumer three years of age or older unless the regional center is provided with documentation of a Medi-Cal, private insurance, or a health care service plan denial and the regional center determines that an appeal by the consumer or family of the denial does not have merit.” [Welf. & Inst. Code section 4659, subd. (d)(1)]

RCEB “may pay for medical or dental services during the following periods:

(A) While coverage is being pursued, but before a denial is made.

(B) Pending a final administrative decision on the administrative appeal if the family has provided to the regional center a verification that an administrative appeal is being pursued.

(C) Until the commencement of services by Medi-Cal, private insurance, or a health care service plan.”[Welf. & Inst. Code section 4659, subd. (d)(1)]

For children under 36 months of age, “a family’s private insurance for medical services or a health care service plan identified in the individualized family service plan, other than for evaluation and assessment, shall be used in compliance with applicable federal and state law and regulation”. [Government Code Section 95004(b)(1)]

Case managers will review recommendations for therapy with an appropriate RCEB specialist for children over three and adults. The RCEB specialist will document their recommendations.

AUTHORITY

California Welfare and Institutions Code Section 4512 (b) *and 4648.5 and 4659 Government Code Section 95004(b)(1)*