

Sen. Celina Villanueva

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Filed: 3/18/2022

	10200HB4999sam001 LRB102 23769 KTG 37740
1	AMENDMENT TO HOUSE BILL 4999
2	AMENDMENT NO Amend House Bill 4999 by replacin
3	everything after the enacting clause with the following:
4	"Section 5. The Early Intervention Services System Act i
5	amended by changing Section 11 as follows:
6	(325 ILCS 20/11) (from Ch. 23, par. 4161)
7	Sec. 11. Individualized Family Service Plans.
8	(a) Each eligible infant or toddler and that infant's o
9	toddler's family shall receive:
10	(1) timely, comprehensive, multidisciplinar
11	assessment of the unique strengths and needs of eac
12	eligible infant and toddler, and assessment of th
13	concerns and priorities of the families to appropriatel
14	assist them in meeting their needs and identify support
15	and services to meet those needs: and

(2) a written Individualized Family Service Plan

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developed by a multidisciplinary team which includes the parent or guardian. The individualized family service plan shall be based on the multidisciplinary team's assessment of the resources, priorities, and concerns of the family and its identification of the supports and services necessary to enhance the family's capacity to meet the developmental needs of the infant or toddler, and shall include the identification of services appropriate to meet those needs, including the frequency, intensity, and method of delivering services. During and as part of the initial development of the individualized family services and any periodic reviews of the plan, plan, multidisciplinary team may seek consultation from the lead agency's designated experts, if any, to help determine appropriate services and the frequency and intensity of those services. All services in the individualized family services plan must be justified by the multidisciplinary assessment of the unique strengths and needs of the infant or toddler and must be appropriate to meet those needs. At the periodic reviews, the team shall determine whether modification or revision of the outcomes or services is necessary.

(b) The Individualized Family Service Plan shall be evaluated once a year and the family shall be provided a review of the Plan at 6-month 6 month intervals or more often where appropriate based on infant or toddler and family needs. The

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1 lead agency shall create a quality review process regarding Individualized Family Service Plan development and changes 2 3 thereto, to monitor and help ensure assure that resources are

being used to provide appropriate early intervention services.

(c) The initial evaluation and initial assessment and initial Plan meeting must be held within 45 days after the initial contact with the early intervention services system. The 45-day timeline does not apply for any period when the child or parent is unavailable to complete the initial evaluation, the initial assessments of the child and family, or the initial Plan meeting, due to exceptional family circumstances that are documented in the child's early intervention records, or when the parent has not provided consent for the initial evaluation or the initial assessment of the child despite documented, repeated attempts to obtain parental consent. As soon as exceptional family circumstances no longer exist or parental consent has been obtained, the initial evaluation, the initial assessment, and the initial Plan meeting must be completed as soon as possible. With parental consent, early intervention services may commence before the completion of the comprehensive assessment and development of the Plan. All early intervention services shall be initiated as soon as possible but not later than 30 calendar days after the consent of the parent or quardian has been obtained for the individualized family service plan, in accordance with rules adopted by the Department of Human

Services.

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- (d) Parents must be informed that early intervention services shall be provided to each eligible infant and toddler, to the maximum extent appropriate, in the natural environment, which may include the home or other community settings. Parents must also be informed of the availability of early intervention services provided through telehealth services. Parents shall make the final decision to accept or decline early intervention services, including whether accepted services are delivered in person or via telehealth services. A decision to decline such services shall not be a basis for administrative determination of parental fitness, or other findings or sanctions against the parents. Parameters of the Plan shall be set forth in rules.
- (e) The regional intake offices shall explain to each family, orally and in writing, all of the following:
 - (1) That the early intervention program will pay for all early intervention services set forth in the individualized family service plan that are not covered or paid under the family's public or private insurance plan or policy and not eligible for payment through any other third party payor.
 - (2) That services will not be delayed due to any rules or restrictions under the family's insurance plan or policy.
 - (3) That the family may request, with appropriate

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- documentation supporting the request, a determination of an exemption from private insurance use under Section 3 13.25.
 - (4) That responsibility for co-payments or co-insurance under a family's private insurance plan or policy will be transferred to the lead agency's central billing office.
 - (5) That families will be responsible for payments of family fees, which will be based on a sliding scale according to the State's definition of ability to pay which is comparing household size and income to the sliding scale and considering out-of-pocket medical or disaster expenses, and that these fees are payable to the central billing office. Families who fail to provide income information shall be charged the maximum amount on the sliding scale.
 - (f) The individualized family service plan must state whether the family has private insurance coverage and, if the family has such coverage, must have attached to it a copy of the family's insurance identification card or otherwise include all of the following information:
 - (1) The name, address, and telephone number of the insurance carrier.
- 24 (2) The contract number and policy number of the insurance plan.
 - (3) The name, address, and social security number of

- 1 the primary insured.
- 2 (4) The beginning date of the insurance benefit year.
- 3 (g) A copy of the individualized family service plan must 4 be provided to each enrolled provider who is providing early 5 intervention services to the child who is the subject of that 6 plan.
- (h) Children receiving services under this Act shall 7 8 receive a smooth and effective transition by their third 9 birthday consistent with federal regulations adopted pursuant 10 to Sections 1431 through 1444 of Title 20 of the United States 11 Code. Beginning January 1, 2022, children who receive early intervention services prior to their third birthday and are 12 13 found eligible for an individualized education program under the Individuals with Disabilities Education Act, 20 U.S.C. 14 15 1414(d)(1)(A), and under Section 14-8.02 of the School Code 16 and whose birthday falls between May 1 and August 31 may continue to receive early intervention services until the 17 18 beginning of the school year following their third birthday in order to minimize gaps in services, ensure better continuity 19 20 of care, and align practices for the enrollment of preschool 21 children with special needs to the enrollment practices of 22 typically developing preschool children.
- 23 (Source: P.A. 101-654, eff. 3-8-21; 102-104, eff. 7-22-21;
- 24 102-209, eff. 11-30-21 (See Section 5 of P.A. 102-671 for
- 25 effective date of P.A. 102-209); revised 12-1-21.)

- 1 Section 99. Effective date. This Act takes effect July 1,
- 2 2022.".