



Policy Manual FAQ

This document contains answers to Frequently Asked Questions regarding the new First Steps policy manual effective Sept. 1, 2018. First Steps is a program of the Division of Disability and Rehabilitative Services in the Indiana Family and Social Services Administration.

Personnel Standards FAQ

Question: How will the new credentialing policy affect people who are currently in their first two years of enrollment?

- If you enrolled in 2016 and do not have an initial credential, you will follow your original two-year deadline.
- If you enrolled in 2017, you must apply for an initial credential by Jan. 1, 2019. If you enrolled in 2018, you must apply for an initial credential within one year of your enrollment date. Anyone can use the new credentialing forms beginning Sept. 1, 2018. Individuals have the option of credentialing using the old credentialing forms from Sept. 1, 2018, to Sept. 30, 2018. The new credentialing forms must be used by everyone beginning Oct. 1, 2018.
- For these individuals only, First Steps will accept training older than one year as long as it was taken within the individual's enrollment period.

Question: What is required for independent providers who are exempt from credentialing?

- All independent providers must enroll with First Steps and sign an agreement with DDRS on an annual basis. See the First Steps Enrollment Application for more information.

Question: Are developmental therapists required to get a National Provider Identifier?

- Yes. The taxonomy code for developmental therapy is 222Q00000X. A license is not required on the NPI application (it is optional). To apply for an NPI, go to <https://nppes.cms.hhs.gov/#/>.

Question: What trainings have already been approved for use as independent professional development activities?

- The use of independent professional activities will be approved on a case by case basis depending on the individual request. The approval request form can be found on the First Steps website at [FirstSteps.in.gov](https://www.firststepsin.gov). DDRS is committed to providing a wide range of professional development opportunities for First Steps personnel and anticipates few providers will need to rely on alternative/independent sources to meet credentialing requirements.

Question: How will the “State Required Trainings” be communicated to the therapists for credentialing requirements?

- State Required Trainings are communicated from the State Office to Provider Agencies, SPOEs, as well as through other mechanisms such as the newsletter. To sign up for the DDRS listserv, go to <https://public.gov-delivery.com/accounts/INFSSA/subscriber/new>, or send an email to FirstStepsWeb@fssa.IN.gov to be added to the First Steps newsletter distribution list.

Question: Will First Steps continue to require a newsletter quiz?

- After Sept. 1, 2018, newsletter quizzes will no longer be provided. However, valuable information will continue to be shared via the quarterly newsletter and all First Steps personnel are strongly encouraged to sign up for the DDRS listserv or the First Steps newsletter distribution list.

Question: Are the initial credential requirements the same for service providers and service coordinators?

- The initial credential requirements can be found on page 4 of the policy manual. The requirements are the same for service providers and service coordinators with one exception. DSP 101 is required prior to the provider’s first authorization and SC 101 is required within 30 days of enrollment as a service coordinator.

Question: Can the enrollment and credentialing forms be submitted electronically?

- Please note that we will only accept the provider’s actual signature (i.e., not a typed signature, although a scanned version of form is fine) OR the provider’s official electronic signature using the “Sign with a Digital ID” function in Adobe Acrobat.

Question: What is the “signed agreement with the Division of Disability and Rehabilitative Services?” When must it be signed?

- The “signed agreement” with DDRS refers to following:
 - “CRO agreement” = Agency and Independent Provider Agreement
 - “Rider A” = Provider Agreement
 - “Rider B” = Service Coordinator Agreement
- Independent providers must sign both the CRO agreement and Rider A. Service providers enrolled with an agency or a SPOE (to provide evaluations and assessments) must sign Rider A, and service coordinators sign Rider B. A signed agreement must be submitted with your enrollment application and every year thereafter, even for independent providers who are exempt from credentialing.

Question: What are the units for credentialing, i.e., points or hours?

- Beginning Sept. 1, 2018, First Steps will use hours for credentialing. Fifteen hours of professional development related to early intervention will be required annually. For more information, see pages 4 through 7 of the policy manual.

Question: Can you clarify the change from DT-HI to D/HH Specialist and DT-VI to B/LV Specialist?

- Beginning Sept. 1, 2018, we will use the terms Deaf or Hard of Hearing Specialist and Blind or Low Vision Specialist for providers formerly known as developmental therapists with a focus area in hearing or vision impairments. A couple of important things to note:
 - D/HH Specialists and B/LV Specialists are still considered providers of developmental therapy. Please see page 14 of the manual for the developmental therapy service definition.
 - For a D/HH or B/LV Specialist who is dually enrolled as a DT-EC or DT-C, the discipline of record should be based on the child’s diagnosis (i.e., whether the child has a diagnosis related to hearing or vision).

Question: Can a D/HH Specialist or B/LV Specialist who meets the requirements of a DT-EC enroll under both disciplines?

- Yes. This can be indicated in the “Second discipline” field under “Personnel Information” on any of the enrollment or credentialing forms.

Question: What is the requirement for getting training in the DEC early intervention competency areas?

- ▶ Training for the annual credential should cover at least three of the DEC early intervention competency areas. Sometimes competency areas may be identified on training information, but ultimately the provider will need to self-identify which of the competency area(s) are covered. The DEC early intervention competencies are on page 7 of the policy manual. To see the DEC competencies in full, go to <https://divisionearlychildhood.egnyte.com/dl/tgv6GUXhVo>.

Question: Can you clarify the enrollment of individuals with a temporary license?

- ▶ Individuals with a temporary license in occupational therapy or physical therapy, or speech language pathologists in their Clinical Fellowship Year can enroll in First Steps at the discretion of the hiring agency. These individuals must submit the name, professional license, and First Steps credential of their supervising provider at the time of enrollment. If these individuals provide services in First Steps before becoming licensed, they are expected to follow any and all supervision requirements associated with their temporary license.

Question: How will credentialing dates work? (e.g., will providers get a new annual credential date every year?)

- ▶ A provider may receive a new credentialing date after completing an initial credential; however, after the initial credential is completed, the provider's annual credential date will remain the same. DDRS will work with Provider Enrollment on improving the consistency of credentialing dates in the future.

Evaluation and Assessment FAQ

Question: When does the family assessment need to be completed?

- ▶ Any time prior to the initial IFSP being written.

Question: What is the difference between evaluation and assessment?

- Evaluation means the procedures used by qualified personnel to determine a child's eligibility for early intervention services in accordance with 34 CFR 303.321 (a)(2)(i). A child may be determined eligible based on a medical diagnosis in accordance with 34 CFR 303.321 (a)(3)(i) and there are specific procedural requirements pertaining to this process. Assessment means the ongoing procedures used by qualified personnel to identify a child's unique strengths and needs and the early intervention services appropriate to meet those needs in accordance with 34 CFR 303.321 (a)(2)(ii). First Steps uses a single tool, the AEPS, for both evaluation and assessment purposes.

Question: What are the evaluation and assessment requirements for children who are eligible due to a medical diagnosis?

- Initial: Children who are eligible due to a medical diagnosis must be assessed using the AEPS prior to the development of their initial IFSP. Annual: On an annual basis, the child's progress must be assessed utilizing, at a minimum, the ongoing provider's quarterly reports and communication with the ongoing provider(s) as needed. While the AEPS is not required for medically eligible children on an annual basis, it can be completed as needed at the discretion of the IFSP team.

IFSP and Service Delivery FAQ

Question: If the co-treat is listed as a strategy in the IFSP is the co-treat allowed for the duration of the IFSP?

- Any strategy used in the IFSP should be individualized based on the needs of the child and family and reviewed as part of the overall IFSP review that occurs every six months at a minimum. There is nothing in First Steps policy that would prohibit co-treatment from being used for the duration of the IFSP as long as said duration is used in response to the needs of the child and family and justification is provided in the IFSP.



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