

**Department for Children and Families
Child Development Division**

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Agency of Human Services

To: Children's Integrated Services Practitioners and Private Therapists providing Oral Motor Services
From: Danielle Howes, MSW, CIS Part C Coordinator
Re: Oral Motor Billing for Vermont CIS Early Intervention services delivered to infants and toddlers
Date: February 6, 2017

The following policy is to be followed with billing for oral motor services provided to infants/toddlers under Vermont's Children's Integrated Services (CIS) Early Intervention (Part C if IDEA) services:

Requests for Prior Authorization for Oral Motor Services:

When submitting a request for Prior Authorization, providers must include a prescription from the doctor who ordered the services for the State's records. This prescription must include the length of time the service is needed, not to exceed six (6) months. If more than six (6) months of oral motor services are needed, a new prescription must be obtained (again, not to exceed six (6) months) and sent to the State office. CIS will not authorize Oral Motor services without this documentation.

For Oral Motor services provided to infants/toddlers with private insurance:

Oral motor services must first be billed to private insurance for those families with private insurance.

Early Intervention (CIS-EI) will pay any difference between a private insurance company's negotiated rate and the current Oral Motor rate on file through the Medicaid system for Early Intervention services. For example; if the insurance company pays \$75.00, the State CIS-EI system will pay \$25.00, which together add up to the current CIS-EI rate of \$100.00 (note: this State CIS-EI rate is subject to change). Invoices must be addressed to State of VT, Children's Integrated Services. *Copies of the provider invoices to insurance companies are not acceptable.*

To bill for any difference, the provider must include:

1. A copy of the "Explanation of Benefits" (EOB) from the private insurer. The EOB will indicate the portion paid by the private insurer. *(A summary statement of charges is not acceptable.);*
2. A prescription for the Oral Motor service signed by the child's physician within 30 days of the start date for the PA;
3. an invoice for the unpaid portion up to but not exceeding the current State CIS-EI rate. All invoices must include:
 - the provider's full name,
 - the provider's business name,
 - the child's full name,
 - the child's date of birth,
 - the date(s) of service, and
 - the amount being invoiced for each date of service and the total (up to, but not exceeding the difference between the private insurance reimbursement and the current State CIS-EI rate for Oral-Motor).

