## FINANCIAL CASE MANAGEMENT

Child Name:	Financial Case Management Tool: Combined Enrollment Supplement
	First Steps Early Intervention Service System And
	Children's Special Health Care Services (CSHCS)

What early intervention service(s) are covered under this policy? Please complete this section based upon the identified service needs in your Individualized Family Service Plan (IFSP). You may need to update this section as new needs are identified or service needs change. Your Service Coordinator may assist you in locating this information.

Please check all that apply.

Service/Item/Materials/ Equipment/Supplies		In Patient					Out Patient				
	Covered in Policy	# of Days	PA Required	CoPay/ Deductible	Pre- Existing Exclusion	Covered in Policy	# of Visits/ Hours	PA Required	CoPay/ Deductible	Pre- Existing Exclusion	
Assistive Technology Services											
Audiology											
Developmental Therapy (special instruction)											
Family Training, Counseling and Home Visits											
Health Services											
Medical Services <b>ONLY</b> for Diagnostic or Evaluation purposes											
Nursing Services											
Nutrition Services											
Occupational Therapy											
Physical Therapy											
Psychological Services											
Service Coordination (case management/care coordination)											
Social Work Services											
Speech-Language Pathology											
Transportation											
Vision Services											