

EI-Hub Case Management User Guide – Unit 8



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Revision History

| Version Number | Release Date | Author | Revision Summary |
|----------------|--------------|-------------------|---|
| v.0.1.0 | | Paul Michael Ross | First Draft |
| v.0.2.0 | | Paul Michael Ross | Edits and additions to the user guide |
| v.0.3.0 | | Paul Michael Ross | Edits and additions to the user guide |
| v.0.4.0 | 8.5.2021 | Paul Michael Ross | Sent to BEI for review |
| v.0.5.0 | 8.20.2021 | Paul Michael Ross | <p>Updated the following:</p> <ol style="list-style-type: none"> 1. Teams tab > renamed panel to "EIO/D / Service Coordinator." 2. From 'Initial/On-going Service Coordinator' 3. The 'Service' panel removed from the Teams tab 4. The 'Add Service Coordinator' button was renamed "EIO/D Add Service Coordinator." 5. I edited the labels and descriptions for the EIO/D Add Service Coordinator panel. 6. Removed the 'Service' panel (screenshot & descriptions) 7. Evaluation Tabs and Panels sections. |
| v.0.6.0 | 8.24.2021 | Paul Michael Ross | <p>Updated the following:</p> <ol style="list-style-type: none"> 1. Eval Tab > Birth/Medical Panel screenshot updated 2. Updated the Therapist sections based on the El-Hub Therapist Navigation Guide for C1 Testing Word document comments. 3. Added 837P Loader section. |
| v.0.7.0 | 9.10.2021 | Paul Michael Ross | <p>Updated the following:</p> <ol style="list-style-type: none"> 1. IFSP Screen captures 2. IFSP panels/sub-panels order |
| v.0.8.0 | 9.22.2021 | Paul Michael Ross | <p>Updated the following:</p> <ul style="list-style-type: none"> • Added Breadcrumb navigation to section 5 • Evaluation panels (screenshots) • Eligibility panels (screenshots) • Added/updated Provider sections |

| Version Number | Release Date | Author | Revision Summary | | |
|---|--|-------------------|---|---|--|
| v.0.9.0 | 9.27.2021 | Paul Michael Ross | <p>Updated the following:</p> <ul style="list-style-type: none"> • Change "Address Validation panel to "Address message pad." • Added the term "Therapist" within the Therapist sections | | |
| v.0.10.0 | 9.28.2021 | Paul Michael Ross | <p>Updated the following in section 5.1 Web Page Banner Buttons and Hyperlinks:</p> <ul style="list-style-type: none"> • Added NYEI logo/description • Added User Profile Files drop-down field • Added NY EI-Hub logo/description | | |
| v.0.11.0 | 10.1.2021 | Paul Michael Ross | <p>Reworded the correlation between Therapist and Therapist</p> | | |
| v.0.12.0 | 10.6.2021 | Paul Michael Ross | <p>Updated IFSP panel/pane orders and screenshots</p> | | |
| v.0.13.0 | 10.12.2021 | Paul Michael Ross | <p>Updated the following:</p> <ul style="list-style-type: none"> • For consistency, I made a global change for the 'Search text box as follows: <table border="1" data-bbox="948 1100 1470 1269"> <tr> <td data-bbox="948 1100 1106 1269">  Search </td><td data-bbox="1106 1100 1470 1269"> To search the results grid/table for a specific record, enter a keyword into this field. </td></tr> </table> <ul style="list-style-type: none"> • Updated Transition panels, pane order, and screenshots • Removed the following buttons in section 5: <ul style="list-style-type: none"> ○ Message ○ Tasks • Removed Task board section • Updated system user sign-in • Updated the Evaluation > Screening Tab > Screening Information panel (Screenshot + fields) • Added a 'Checkboxes' description (section 5.7) • Updated Eligibility sections |  Search | To search the results grid/table for a specific record, enter a keyword into this field. |
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. | | | | |

| Version Number | Release Date | Author | Revision Summary |
|-----------------|--------------|-------------------|---|
| v.0.14.0 | 11.3.2021 | Paul Michael Ross | <ul style="list-style-type: none"> Updated Screenshots for the Evaluation Tab > Waiver panel added and updated field descriptions. |
| v.0.15.0 | 11.29.2021 | Paul Michael Ross | <ul style="list-style-type: none"> Updated the Document Management Panel. Add a definition for the "Submit" button (listed in the Navigation section). I updated the Home tab dashboard section. I removed screenshots, fields, descriptions, and buttons for all tabs and panels and added a New Therapist (Therapist). The purpose is to reduce repetition, hence, decreasing the size of the overall CM User Guide. However, the user is referred to sections 8.3.1.3.1 – 8.3.1.5.1.1. I removed the Entering a Coordinator Menu selection and subsections (panels) from the user guide. Updated Attendance > "Billing to State" - Filter Options section Updated the Transition sections. |
| v.0.16.0 | 12.20.2021 | Paul Michael Ross | <ul style="list-style-type: none"> Updated Transfer, Exit Close panels Updated Provider sections (panels/sub-panels) I have reviewed/edited grammar through the user guide. Please note editing review is not final at this point. |
| v.0.17.0 | 1.6.2022 | Paul Michael Ross | <ul style="list-style-type: none"> Removed the sentence from the Excel button table, "An example of MS Edge browser downloading the excel file and options," which did not have an image. Updated the IFSP Outcome panel. Updated the Therapist Assignment panel. I removed sources referenced in the user guide that provides definitions or links that should be NYS Specific. In addition, reference sites need to be NYS EI approved, not general sites found from searching the internet, i.e., parenting articles. Section 8.1.4.2.1 Child Outcomes Summary Form (COSF) Tab/Panel, |

| Version Number | Release Date | Author | Revision Summary |
|-----------------|--------------|-------------------|--|
| | | | <p>corrected terms with This is NYS narrative taken directly from the COSF Entry and Exit forms explaining these terms (feedback provided by Mike I.)</p> <ul style="list-style-type: none"> • Updated IFSP Information panel • Updated IFSP Outcome panel • Updated Therapist Assignment panel • Updated Respite Services panel • Updated Transportation panel • Updated Waiver panel • Updated IFSP Service/Link IFSP Service panel • Natural Environments panel • Removed IFSP Meeting panel • Removed Service Information Tab/Panel, which references 'Please refer to section 8.1.2.7.9 IFSP Services Panel above for sub-panels and fields/descriptions. • Added the Caseworker panel |
| v.0.18.0 | 1.28.2022 | Paul Michael Ross | <ul style="list-style-type: none"> • Updated Section 6 (User Login) includes HCS > EI-Hub landing page > CM • Added HCS Sign Up instructions in Appendix 1. • Added the 'Path to Early Intervention Services' (Note: this will eventually have individual links to guide users to their specific roles). • I re-adjusted the Transition panels order. • NOTE: Next revision will have more narratives (e.g., the purpose of panels). |
| v.0.19.0 | 2.18.2022 | Paul Michael Ross | <ul style="list-style-type: none"> • I removed Reopen/Reactivate Child Record panel. • I added narratives and Child and Provider Management panels. • I added back the 'Task Board' section 6.2. • Removed sections 5.3 – 5.4 and added sections 6.5 – 6.7. • Removed IFSP Service Link Tab/IFSP Service Report Panel. • Updated the COSF Panel • Updated the Dashboards section. • I moved the "customized" EI-Hub UI sections to the Appendix section. • Update Attendance and Billing Reports. |

| Version Number | Release Date | Author | Revision Summary |
|----------------|--------------|-------------------|--|
| v.0.20.0 | 2.25.2022 | Paul Michael Ross | <ul style="list-style-type: none"> I renamed the Heading 1 Styles to "Unit" <chapter/section number (e.g., Unit 9. Child). I removed the Availability, Service Area, and Compliance Type grids/tables and panels from the Therapist module. I added a Catchment Area Grid/Table and panel. |
| v.0.21.0 | 1.4.2023 | Paul Michael Ross | <ul style="list-style-type: none"> Modify the document styles and footers for a sleeker presentation. Made edits/added BEI's comments from Unit 1 – Unit 8. Added Child Transfer popup panel. Removed 'Program Details Grid/Table section. Updated screenshots and fields (grids/tables & panels) for the IFSP and Transition sections. Updated BEI's second revisions w/Lee Ann, Jennifer, and Cindy. |

| EI-Hub Version | Release Date |
|----------------|--------------|
| 3.6.0.0 | 1.27.2023 |

Unit 8. Child

 Home / Child



Any child/family data shown in screenshots are fictional and only for instructional purposes.

8.1 Lookup

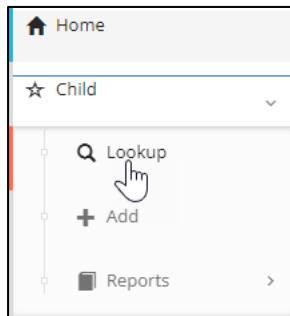
 Unit 8 is the most extensive section within the Case Management User Guide. This Unit provides an overview of all the parts of the Case Management component linked to a child's record, from creating the record to the exit from the EIP; this includes:

- Child demographics
- Referrals
- Family information
- Insurance information
- Evaluations
- Eligibility
- IFSP
- Staff supporting child throughout time EIP
- Services
- Transition
- Transfer, exit, and close

This Unit also highlights the available audit and reporting capabilities linked to a child's record.

 This section is where you look up a child to see if they currently exist in the system before adding the child. The examples (screenshots) in this section have test data, allowing you to see the functionality available, such as the add, edit, and delete buttons.

(i) All users will have the ability to do a child look-up. However, the user's functionality and children will see will vary by user role.

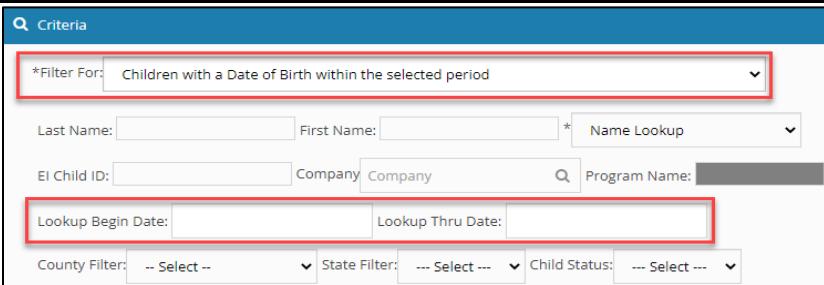


Lookup Panel (Criteria)

The screenshot shows the 'Criteria' search panel with the following fields:

- *Filter For: All Children
- Last Name: [disabled input]
- First Name: [disabled input]
- Name Lookup: [disabled dropdown]
- EI Child ID: [disabled input]
- Company: Company
- Program Name: [disabled input]
- Lookup Begin Date: [disabled input]
- Lookup Thru Date: [disabled input]
- County: -- Select --
- County of Residence: -- Select --
- State: -- Select --
- Child Status: -- Select --
- Search button
- Merge Duplicate Children button

| FIELD | DESCRIPTION |
|-------------|---|
| *Filter For | <p>To narrow your search, use the drop-down and select the appropriate item from the list.</p> <p>(i) The gray/disabled boxes are enabled based on your search parameters for the 'Filter For' selection (example below).</p> <p>Before</p> <p>After</p> |

| FIELD | DESCRIPTION |
|-------------------------|--|
| |  <p>The screenshot shows a search interface titled 'Criteria'. At the top, a dropdown menu is set to '*Filter For: Children with a Date of Birth within the selected period'. Below this are fields for 'Last Name', 'First Name', and 'Name Lookup'. Further down are fields for 'EI Child ID', 'Company', 'Program Name', and 'Search' button. At the bottom are date selection fields for 'Lookup Begin Date' and 'Lookup Thru Date', which are highlighted with a red box. Below these are dropdowns for 'County Filter', 'State Filter', and 'Child Status'.</p> <p>i The 'Program Name,' 'Lookup Begin Date,' and 'Lookup Thru Date' text fields are enabled except when selecting the following from the '*Filter For' drop-down list.</p> <ul style="list-style-type: none"> • "All Children" • "Children with a Date of Birth within the selected period" (only the 'Program Name' field is gray/disabled). • "Children with no enrollments yet." |
| Last Name | Enter the child's last name to narrow your search. |
| First Name | Enter the child's first name to narrow your search. |
| Name Drop-down Selector | To narrow your search, use the drop-down and select the appropriate item from the list. |
| EI Child ID | To narrow your search, enter the Early Intervention Identification number for the child to look up. |
| Company | To narrow your search, type in this field to search (lookup) for a company/agency that provides services for the child. |
| Program Name | To narrow your search, enter the associated program name with the child. |
| Lookup Begin Date | <p>To narrow your search, enter the beginning date or use the calendar picker (invoked by clicking this field).</p> <p>i If you select "Children with no enrollments yet" from the '*Filter For' drop-down list, the "Lookup Begin Date" and "Lookup Thru Date" fields are disabled (gray shaded).</p> |
| Lookup Thru Date | To narrow your search, manually enter the thru date or use the calendar picker (invoked by clicking this field). |

| FIELD | DESCRIPTION |
|----------------------|--|
| | <i>(i)</i> If you select "Children with no enrollments yet" from the "Filter For" drop-down list, the "Lookup Begin Date" and "Lookup Thru Date" fields are disabled (gray shaded). |
| County Filter | To narrow your search, use the drop-down and select the appropriate county from the list. |
| State | To narrow your search, enter the state where the child resides. |
| Child Status | To narrow your search, use the drop-down and select the appropriate status from the list. |

| BUTTON | DESCRIPTION |
|--|---|
| Search  | When clicked based on your criteria (fields populated above), the system will search the EI-HUB database and return the results (example below). <i>(i)</i> The more fields you add data to narrow your search, the more defined your list of children will appear. |

Results Grid/Table (An example below shows a specific result)

| Results | | | | | | | | | | | | |
|---|-----------|------------|------------|-------|------------------|--------|-------|------------|--------|---------------------|--------------|-------------------|
| <input type="text" value="Search..."/> Rows per page: 10 | | | | | | | | | | | | |
| El Child ID | Last Name | First Name | Birth Date | Phone | Address | City | State | Zip | County | Service Coordinator | Child Status | |
| 1668 | Quest | Jonny | 12/31/2019 | | 1315 CENTRAL AVE | ALBANY | NY | 12205-5282 | Albany | Homes, Johnny | Active | Edit |

| FIELD | DESCRIPTION |
|-----------------------|--|
| 🔍 Search | To search the results grid/table for a specific record, enter a keyword into this field. |

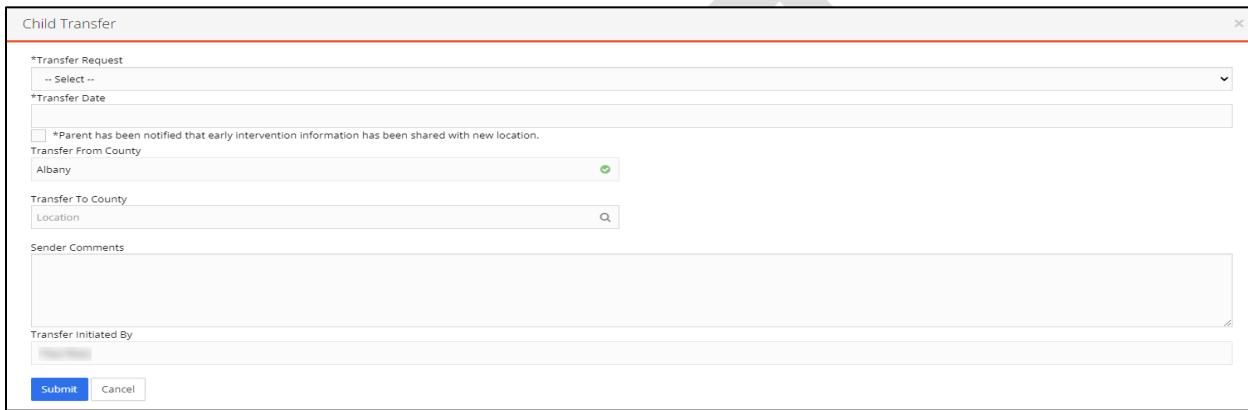
| COLUMN | DESCRIPTION |
|---------------------|--|
| El Child ID | This column displays the Early Intervention Identification number for the child. |
| Last Name | This column displays the last name of the child. |
| First Name | This column displays the first name of the child. |
| Birth Date | This column displays the DOB of the child. |
| Phone | This column displays the phone number where the child resides. |
| Address | This column displays the address where the child resides. |
| City | This column displays the city where the child resides. |
| State | This column displays the state where the child resides. |
| Zip | This column displays the zip where the child resides. |
| County | This column displays the county where the child resides. |
| Service Coordinator | This column displays the name of the service coordinator assigned to the child. |

| BUTTON | DESCRIPTION |
|-------------------|--|
| Edit | Click this button adjacent to a child record/row to view or edit an existing child record. When clicked, the system advances you to the Child/Edit multi-tabbed for the child (see Child/Edit Multi tabbed Panels below). |

| BUTTON | DESCRIPTION |
|--|---|
| Transfer  | With the appropriate role, you can transfer a child from Child Lookup. This button invokes the Child Transfer popup panel (shown below) when clicked. |

8.1.1 Child Transfer Popup Panel

 The county will directly access the Transfer, Exit, and Close tabs. In addition, users can enter the Child Transfer panel directly or go through the Child Lookup panel and search results by selecting/clicking the **Transfer** button.



The screenshot shows the 'Child Transfer' dialog box. It contains the following fields:

- *Transfer Request: A dropdown menu with options like "Select" and "Transfer".
- *Transfer Date: A date input field with a calendar icon.
- A checkbox labeled "Parent has been notified that early intervention information has been shared with new location." followed by a note: "Parent has been notified that early intervention information has been shared with new location."
- Transfer From County: A dropdown menu showing "Albany".
- Transfer To County: A search bar with a magnifying glass icon and a dropdown menu below it.
- Sender Comments: A text area for comments.
- Transfer Initiated By: A dropdown menu.
- Buttons at the bottom: "Submit" and "Cancel".

 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD / CHECKBOX | DESCRIPTION |
|--|---|
| *Transfer Request | Use this field drop-down and select the appropriate item (e.g., To Send, To Receive). |
| *Transfer Date | Enter the child's transfer date manually or use the calendar picker (invoked by clicking this field). |
| <input type="checkbox"/> Parent has been notified that early intervention information has been shared with new location. | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| *Transfer From County | Based on the child's county of residence, this field auto-populates. |
| *Transfer To County | To search for a county, begin to type (activates the type-ahead feature) and select the appropriate location from the list. |
| Sender Comments | If applicable, enter any additional sender comments. |

| FIELD / CHECKBOX | DESCRIPTION |
|-----------------------|---|
| Transfer Initiated By | A read-only field displays the person who initiated the transfer. |

| BUTTON | DESCRIPTION |
|--|---|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-HUB database, and the record updates the Child Transfer panel (grid/table). |
| Cancel  | To cancel the action for child transfer, click this button. When clicked, the Child Transfer popup panel closes. |

8.1.2 Child To Merge Popup Panel

 The 'Child Record to Keep' will continue as the active record when merging child records. The 'Children to Merge' or merged record will be labeled as a "duplicate" in the system. When data in the duplicate record is not already present in the kept record, that information is automatically copied into the active child record when the records are merged.

 Please note the 'Merge Duplicate Children' functionality is restricted and is only for users with specific roles.

Children To Merge

| | |
|---|---|
| Find Child to Keep | Find Children to Merge (into the one you want to keep) |
| Search for the Child whose records should be the primary set that are retained during the Children merge process. The basic information for these records will be retained, and information from the merged Children will be filled in when not present in these records. | |
| Child First Name: | Child First Name: |
| Child Last Name: | Child Last Name: |
| Date of Birth: | Date of Birth: |
| EI Child Code: | EI Child Code: |
| County: | County: |
| -- Select -- | -- Select -- |
| <input type="button" value="Search Children"/> <input type="button" value="Cancel"/> | |

Find Child to Keep Group

 Search for the child whose records should be the primary set retained during the Child(ren)-to-Merge process. The system maintains the essential information for the primary (kept) set of records, and essential information from the merged child populates when not already present in the primary record.

| FIELD | DESCRIPTION |
|-------------------------|--|
| Child First Name | Enter the first name of the child to keep. |
| Child Last Name | Enter the last name of the child to keep. |
| Date of Birth | Enter the DOB of the child to keep. |
| EI Child Code | Enter the Early Intervention code of the child to keep. |
| County | Use the drop-down and select the county from the list where the child resides. |

Find Child to Merge (into the one you want to keep) Group

 Search for children whose records merged into the "ChildToKeep" record. The system uses the child data in these records to fill in blank information in the kept records, and associated data like goals, services, etc., are then attached to the "ChildToKeep" record.

| FIELD | DESCRIPTION |
|-------------------------|---|
| Child First Name | Enter the first name of the child to merge. |
| Child Last Name | Enter the last name of the child to merge. |
| Date of Birth | Enter the DOB of the child to merge. |

| FIELD | DESCRIPTION |
|---------------|--|
| EI Child Code | Enter the Early Intervention code of the child to merge. |
| County | Use the drop-down and select the county from the list where the child resides. |

| BUTTON | DESCRIPTION |
|--|---|
| Search Children  | When clicked, based on your criteria (fields populated above), the system will search the EI-HUB database and return the results. |
| Cancel  | When clicked, the 'Child To Merge' panel closes. |
| <input checked="" type="checkbox"/> *Confirm Children To Merge Yes, I confirm that these are duplicate records for the same Child and should be merged | Select/tick this checkbox to confirm children to merge (shown below). |
| Merge Child Records  | Highlight both rows for the child listed in the Child to Keep grid/table and the Children to Merge (shown below) and click this button. |

Child to Keep and Children to Merge Results Grids/Tables

| Child to Keep | | | | | | |
|---------------|---------------|-----------|------------|---------------|--------|--------|
| Child ID | EI Child Code | Last Name | First Name | Date Of Birth | County | Region |
| 1668 | 1668 | Quest | Jonny | 12/31/2019 | | |

| Children to Merge | | | | | | |
|-------------------|---------------|-----------|------------|---------------|--------|--------|
| Child ID | EI Child Code | Last Name | First Name | Date Of Birth | County | Region |
| 1844 | 1844 | Quest | Johnny | 12/31/2019 | | |

Child to Keep ID: *Confirm Children To Merge Yes, I confirm that these are duplicate records for the same Child and should be merged



| BUTTON | DESCRIPTION |
|--|---|
| Merge Duplicate Children Merge Duplicate Children | When clicked, if the system finds the child's data after a user enters a child that already exists, they can merge the two records into one record. (i) Please note the 'Merge Duplicate Children' functionality is restricted and is only for users with specific roles. |

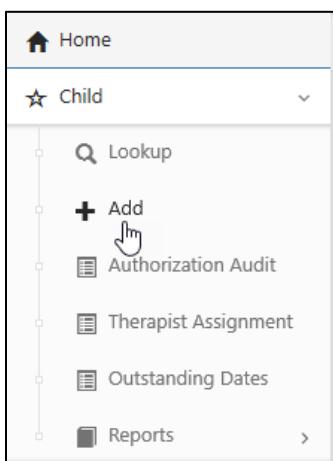
8.1.3 Child/Edit Multi-tabbed Panels

(i) Please reference section 8.1.4 and its subsections for these panel fields and button descriptions.

8.1.4 Add (New Child)

 Home / Add

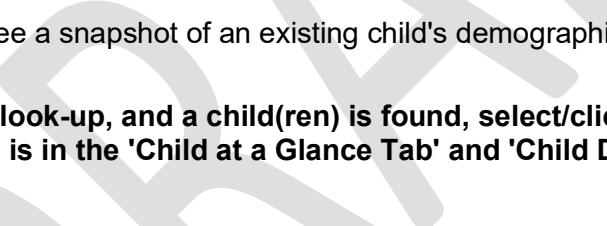
 Please ensure you perform a child lookup before adding a child to prevent duplicates.
Use this section when entering a new child.



8.1.4.1 Child at a Glance Tab (Child Exists in the EI-Hub)

 Use this tab to see a snapshot of an existing child's demographic data.

 If doing a child look-up, and a child(ren) is found, select/click the Edit button. The child's information is in the 'Child at a Glance Tab' and 'Child Demographics Summary Panel.'



The screenshot shows the 'Criteria' and 'Results' sections of a search interface.

Criteria:

- *Filter For: All Children
- Last Name: [] First Name: [] * Name Lookup: []
- EI Child ID: [] Company: [] Q Program Name: []
- Lookup Begin Date: [] Lookup Thru Date: []
- County: [] County of Residence: [] State: [] Child Status: []
- Search button
- Merge Duplicate Children button

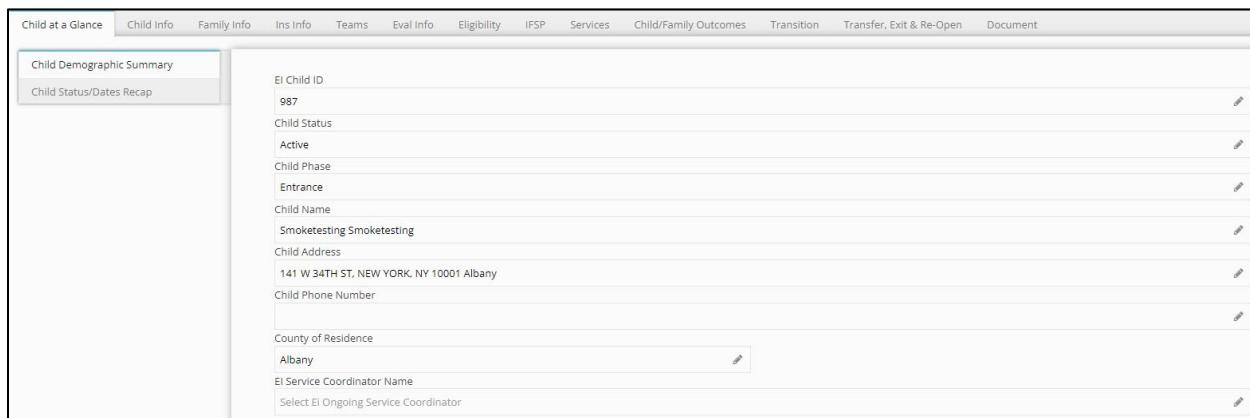
Results:

| El Child ID | Last Name | First Name | Birth Date | Phone | Address | City | State | Zip | County | County of Residence | Service Coordinator | Child Status | Action Buttons |
|-------------|-------------|------------|------------|-------|---------------|----------|-------|------------|--------|---------------------|---------------------|--------------|---|
| 1 | PCG-Gadsden | Pearl | 09/01/2020 | | 151 W 34TH ST | New York | NY | 10001-2101 | Albany | Albany | Mattis, John | Active |   |

8.1.4.1.1 Child Demographics Summary Panel

 The panel below is read-only; it shows pertinent information for the child.

 All the fields in the panel below are read-only.



The screenshot shows a read-only panel for a child's demographic summary. The top navigation bar includes tabs for Child at a Glance, Child Info, Family Info, Ins Info, Teams, Eval Info, Eligibility, IFSP, Services, Child/Family Outcomes, Transition, Transfer, Exit & Re-Open, and Document. The Child Info tab is selected. The main content area displays the following fields:

| | |
|-----------------------------|--|
| El Child ID | 987 |
| Child Status | Active |
| Child Phase | Entrance |
| Child Name | Smoketesting Smoketesting |
| Child Address | 141 W 34TH ST, NEW YORK, NY 10001 Albany |
| Child Phone Number | |
| County of Residence | Albany |
| El Service Coordinator Name | Select El Ongoing Service Coordinator |

 The fields below pull data from where the information resides in the Child Info panels.

| FIELD | DESCRIPTION |
|-----------------------------|--|
| El Child ID | This field displays the child's Early Intervention Identification number. |
| Child Status | This field displays the child's status ('Active' or Inactive') |
| Child Phase | This field displays the child's early intervention program phase (e.g., Transition). |
| Child Name | This field displays the child's name. |
| Child Address | This field displays the child's address. |
| Child Phone Number | This field displays the child's phone number. |
| County of Residence | This field displays the child's county of residence. |
| El Service Coordinator Name | This field displays the early intervention service coordinator's name. |

8.1.4.1.2 Child Status Dates Recap Panel

(i) All the fields in the panel below are read-only.

The screenshot shows a software interface with a top navigation bar containing links: Child at a Glance, Child Info, Family Info, Ins Info, Teams, Eval Info, Eligibility, IFSP, Services, Child/Family Outcomes, Transition, Transfer, Exit & Re-Open, and Document. Below the navigation bar, there is a sidebar with a tree view: Child Demographic Summary (selected), and Child Status/Dates Recap. The main content area displays a list of fields under 'Child Status' and 'Child At Risk Status', each with a small edit icon to its right. The fields listed are Active, Child Phase, Entrance, Date Closed, Exit Date, Child At Risk Status, and At-Risk Exit Date.

| FIELD | DESCRIPTION |
|----------------------|--|
| Child Status | This field displays the child's status. |
| Child Phase | This field displays the child's phase. |
| Date Closed | This field displays the date closed for the child receiving early intervention services. |
| Exit Date | This field displays the date the child exited the early intervention program. |
| Child At Risk Status | This field displays if the child is at risk. |
| At-Risk Exit Date | This field displays the date the child exited at risk. |

8.1.4.1.3 Child Info Tab



Use this panel to enter a referral and demographic information for a new child.

8.1.4.1.4 Basic Demographic Info Panel

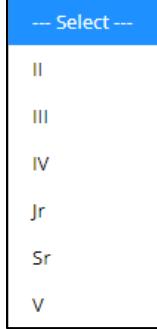


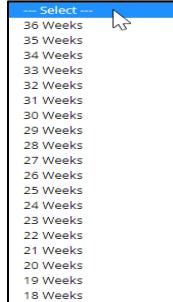
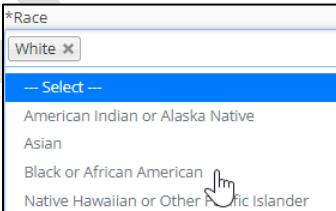
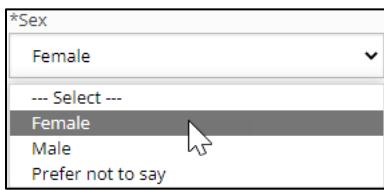
Use this panel to enter a referral and demographic information for a new child.

The screenshot shows the 'Basic Demographic Info' panel within a larger application menu. The menu bar includes options like Child at a Glance, Child Info, Family Info, Ins Info, Teams, Eval Info, Eligibility, IFSP, Services, Child/Family Outcomes, Transition, Transfer, Exit, & Close, and Document. The 'Child Info' tab is selected. On the left, a sidebar lists Referral, Referral At-Risk, Child Secondary Languages, Child Address, COFR Report, and Child Attribute Report. The main panel contains fields for Child Status (Active), EI Child ID (1), Child's First Name (Pearl), Child's Middle Name (judy), Child's Last Name (PCG-Gadsden), Alias, Child's Suffix (dropdown: ... Select ...), Birth Date (09/01/2019), Chronological Age (2 years 9 months 23 days), Adjusted Age (Unknown), Gestation Weeks (dropdown: ... Select ...), Ethnicity (Not Hispanic/Latino), Race (White), Sex (Male), Primary Language (Other), and If Other Language (test). There are also checkboxes for Multilingual, Interpreter Needed for Child, County of Residence (Albany), County of Fiscal Responsibility (dropdown: ... Select ...), School District (Albany: Albany City SD), Name of Other State/US Territory (dropdown: ... Select ...), and various other demographic details like Non-masked SSN (###-##-####), Masked SSN (###-##-####), If Declined, Why?, Parent Declined to Provide Child's SSN, Siblings enrolled in NY Early Intervention (past/present), Is child a ward of social services, Child Phase, Transition, Previous Child Phase, and Interim IFSP/Evaluation. A blue 'Submit' button is located at the bottom right.

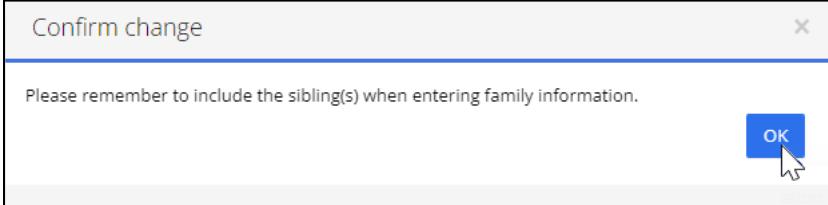
(i) An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

 Please select all that apply for the following checkboxes.

| FIELD | DESCRIPTION |
|---|---|
| Child Status | <p>Use this drop-down and select the appropriate status from the list (shown below).</p>  |
| EI Child ID | <p>This field displays (read-only) the Early Intervention Identification number for the child after the child has been entered into the EI-Hub system.</p> |
| *Child's First Name | <p>Enter the first name of the child.</p> |
| Child's Middle Name | <p>If applicable, enter the middle name of the child.</p> |
| * Child's Last Name | <p>Enter the last name of the child.</p> |
| Alias | <p>Enter another name that the child goes by as an alias.</p> |
| Child's Suffix | <p>If applicable, use this drop-down list and select the appropriate suffix for the child.</p>  |
| *Birth Date | <p>Manually enter the beginning date or use the calendar picker (invoked by clicking this field) for the child's birth date.</p> |
| Chronological Age (month and days) | <p>This field (read-only) displays a person's age as measured from birth to a given date for the child.</p> |
| Gestation Weeks | <p>Use this drop-down list and select the appropriate gestation weeks (shown below).</p> |

| FIELD | DESCRIPTION |
|--------------------------|---|
| |  <p>... Select ...</p> <ul style="list-style-type: none"> 36 Weeks 35 Weeks 34 Weeks 33 Weeks 32 Weeks 31 Weeks 30 Weeks 29 Weeks 28 Weeks 27 Weeks 26 Weeks 25 Weeks 24 Weeks 23 Weeks 22 Weeks 21 Weeks 20 Weeks 19 Weeks 18 Weeks |
| Adjusted Age | This field (read-only) displays the adjusted age, also called corrected age, a preemie's age if born before their due date. Doctors use adjusted age when evaluating a preemie's size and development. |
| | |
| *Ethnicity | Use this drop-down and select the appropriate ethnicity from the list identifying the child's origin. |
| |  <p>... Select ...</p> <ul style="list-style-type: none"> --- Select --- Hispanic/Latino Not Hispanic/Latino |
| *Race | Click in this field, use the drop-down, and select the appropriate ethnicity from the list identifying the child's origin (shown below). |
| |  <p>*Race</p> <p>White ✕</p> <p>... Select ...</p> <ul style="list-style-type: none"> American Indian or Alaska Native Asian Black or African American Native Hawaiian or Other Pacific Islander |
| *Sex | Use the drop-down and select the appropriate gender from the list for the child (shown below). |
| |  <p>*Sex</p> <p>Female</p> <p>... Select ...</p> <ul style="list-style-type: none"> Female Male Prefer not to say |
| *Primary Language | Use the drop-down and select the appropriate language from the list for the child |
| If Other Language | Enter a brief description of 'Primary Language.' |

| FIELD | DESCRIPTION |
|--|---|
| <input type="checkbox"/> Multilingual (if checked, please complete Secondary Language selection(s)) | Select/check this box if the child and family are multilingual. If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| <input type="checkbox"/> Interpreter Needed for Child | Select/check this box if the child requires an interpreter. If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| *County of Residence | Use the drop-down and select the appropriate county of residence where the child resides. |
| County of Fiscal Responsibility | Use the drop-down and select the appropriate fiscal responsibility county from the child's list. |
| <input type="checkbox"/> Has the child received Early Intervention Services in Another State or US Territory? | Select/check this box if the child has received EI services in another state. If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| School District | Use the drop-down and select the appropriate school district from the list for the child. |
| Name of Other State/US Territory | Use the drop-down and select the appropriate state abbreviation from the list where the child resides. |
| Non-masked SSN | The child's social security number (SSN) is not masked, displaying the entire SSN. |
| Masked SSN | The child's social security number is masked, only displaying the last four digits of the SS#. |
| <input type="checkbox"/> Parent Declined to Provide Child's SSN | Select/check this box if the child's parent/guardian decline to provide the child's social security number. If 'Yes,' select/tick the checkbox. If 'No,' leave blank. (i) When selected/ticked, the 'If Declined, Why' field is enabled. |
| If Declined, why? | Enter a brief description of why the child's parent/guardian declined to provide the child's social security number. |
| <input type="checkbox"/> Siblings enrolled in NY Early Intervention (past/present) | Select/check this box if the child has siblings enrolled in NY Early Intervention. If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |

| FIELD | DESCRIPTION |
|--|---|
| | <p>When selecting/ticking this checkbox, a message pad prompts you (shown below) a reminder ("Please remember to include the sibling(s) when entering family information.").</p>  |
| <input type="checkbox"/> Is child a ward of social services | If the child is currently a ward of social services, then select/tick this checkbox. If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Child Phase | This field (read-only) displays the child's early intervention program phase (e.g., Transition). |
| Previous Child Phase | This field (read-only) displays the child's previous early intervention program phase (e.g., Interim IFSP/Evaluation). |

| BUTTON | DESCRIPTION |
|--|--|
| Submit  | After filling out the Basic Demographic Info panel for the child, click this button. When clicked, the system runs a validation (e.g., required fields populated), keeping the information in the EI-HUB database. |

8.1.4.1.5 Referral Process

(i) Before creating a referral, you must enter the required basic information about the child into the EI-Hub.

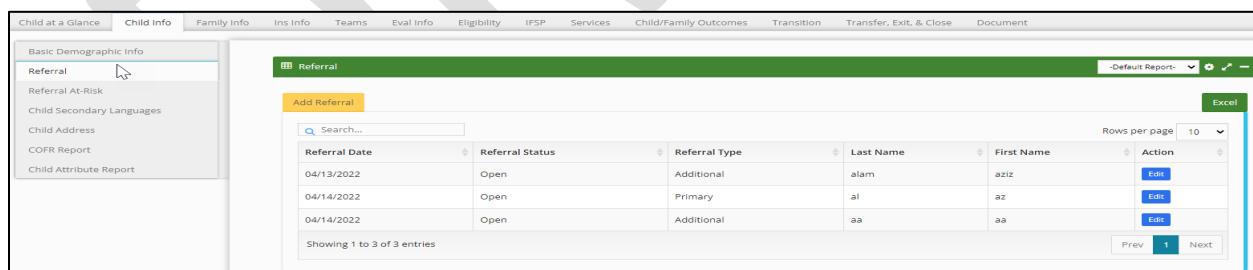
 The child information entered in the EI-Hub Case Management component is the foundation from which data is prepopulated into all forms, IFSPs, and other template documents and disseminated into the billing system. Therefore, system users must enter the Referral, Insurance, Demographic, and all other data carefully and correctly. It is also crucial that system users have processes to monitor and update child information (including parental consent) on time.

Children are entered individually, one at a time, and checked for duplicates already in the EI-Hub to ensure accuracy. The system creates a child record or updates a child record when a Referral to the Early Intervention Program or a Referral to the At-Risk Surveillance Program is received. If a child is referred directly to the At-Risk Surveillance Program, the child's demographic information is entered into the Case Management system. The child is monitored regularly with the option of being referred to the Early Intervention Program or being discharged from At-Risk Surveillance. The content to follow describes the Referral to the Early Intervention Program.

(i) Only your 'County/Muni' (roles of 'EIODNY,' 'MuniProgAIINY,' and 'MuniDataEntryNY' can enter a child's referral and assign an initial service coordinator or an agency that provides initial service coordination (for example, in NYC.)

8.1.4.1.5.1 Referral Grid/Table

 A child can be enrolled in either track, EIP, or At-Risk, but they cannot have active referrals in both. Instead, the child must be exited and re-referred to the appropriate track



The screenshot shows the EI-Hub software interface for managing referrals. The top navigation bar includes tabs for Child at a Glance, Child Info, Family Info, Ins Info, Teams, Eval Info, Eligibility, IFSP, Services, Child/Family Outcomes, Transition, Transfer, Exit, & Close, and Document. The left sidebar under 'Basic Demographic Info' lists 'Referral', 'Referral At-Risk', 'Child Secondary Languages', 'Child Address', 'COFR Report', and 'Child Attribute Report'. The main area is titled 'Referral' and contains a table with columns: Referral Date, Referral Status, Referral Type, Last Name, First Name, and Action (with 'Edit' buttons). The data in the table is as follows:

| Referral Date | Referral Status | Referral Type | Last Name | First Name | Action |
|---------------|-----------------|---------------|-----------|------------|--------|
| 04/13/2022 | Open | Additional | alam | aziz | Edit |
| 04/14/2022 | Open | Primary | al | az | Edit |
| 04/14/2022 | Open | Additional | aa | aa | Edit |

At the bottom of the grid, it says 'Showing 1 to 3 of 3 entries'. There are buttons for 'Prev', 'Next', and 'Excel'.



See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| BUTTON | DESCRIPTION |
|-------------------------|--|
| Add Referral | Click this button to add a 'Referral' record for the child. The Referral tab/panels appear (shown below). |
| Excel | Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet. To see your results in excel, click Open . Leaving all the Report Filters fields blank will show "all" results. The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the El-Hub system. |

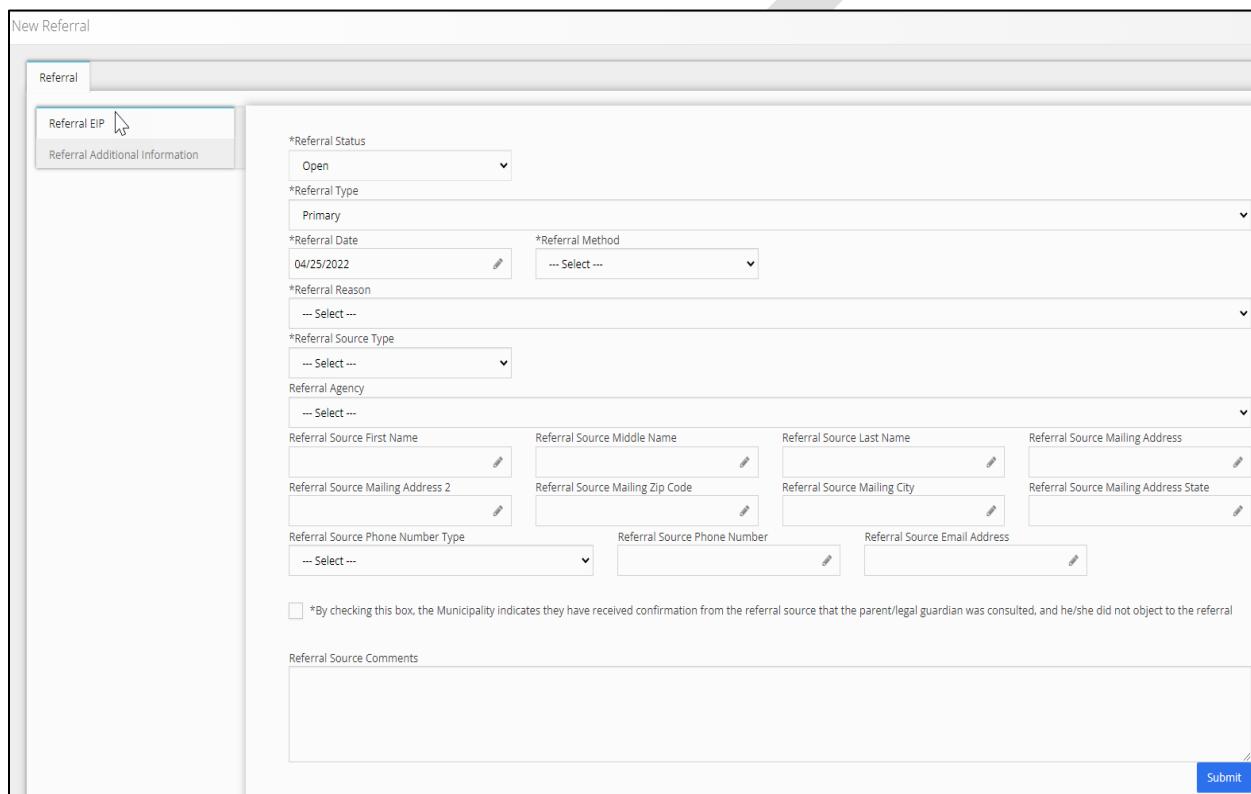
| COLUMN | DESCRIPTION |
|------------------------|--|
| Referral Date | This column displays the referral date for the child and family. |
| Referral Status | This column displays the status of the child and the family's referral. |
| Referral Type | This column displays the type of referral. |
| Last Name | This column displays the last name of the child. |
| First Name | This column displays the first name of the child. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

8.1.4.1.5.2 Referral Tab / Referral EIP Panel

 You must complete the Referral EIP panel first to establish the referral record. Once submitted, you may add additional information to the referral by selecting the "Referral Additional Information" panel.

 The County admin role, EIO/D, or EIO performs this action.

New Referral – Referral EIP Panel



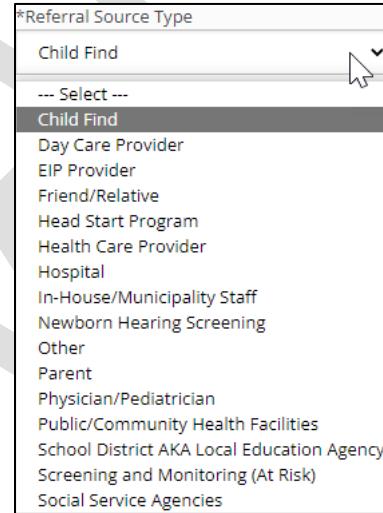
The screenshot shows the 'New Referral' page with the 'Referral EIP' tab selected. The form contains the following fields:

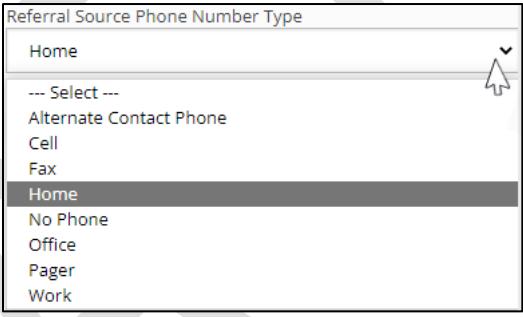
- *Referral Status: Open
- *Referral Type: Primary
- *Referral Date: 04/25/2022
- *Referral Method: (dropdown menu)
- *Referral Reason: (dropdown menu)
- *Referral Source Type: (dropdown menu)
- Referral Agency: (dropdown menu)
- Referral Source First Name, Referral Source Middle Name, Referral Source Last Name, Referral Source Mailing Address, Referral Source Mailing Address 2, Referral Source Zip Code, Referral Source City, Referral Source State, Referral Source Mailing Address State, Referral Source Phone Number Type, Referral Source Phone Number, Referral Source Email Address
- A checkbox with the text: "By checking this box, the Municipality indicates they have received confirmation from the referral source that the parent/legal guardian was consulted, and he/she did not object to the referral"
- Referral Source Comments: (text area)
- Submit button: (blue button at the bottom right)

 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

 Please note that the 'Referral Source First Name' and 'Referral Source Last Name' do not have asterisks but are required fields.

| FIELD | DESCRIPTION |
|------------------|---|
| *Referral Status | Use this drop-down and select the appropriate referral status: <ul style="list-style-type: none">• Open = The referral and the child are active.• Closed = The child has exited the program, and the referral is no longer active. |

| FIELD | DESCRIPTION |
|---------------------------------|---|
| *Referral Type | <p>Use this drop-down and select the appropriate referral type:</p> <ul style="list-style-type: none"> • Primary: A primary referral is the first referral received for a child. • Additional: Any referrals received while the primary or a re-referral is open are classified as “additional.” • Re-referral: A referral is classified as a re-referral if the child has been previously referred, exited, and is referred again. |
| *Referral Date | Manually enter the referral date or use the calendar picker (invoked by clicking this field). |
| *Referral Method | Use this drop-down and select the appropriate referral method (e.g., Phone, fax, etc.) from the list. |
| *Referral Reason | Use this drop-down and select the appropriate referral reason (Suspected Delay or Confirmed Diagnosed Condition) from the list. |
| *Referral Source Type | <p>Use this drop-down and select the appropriate referral source type (e.g., Day Care Provider, etc.) from the list (shown below).</p>  <pre> *Referral Source Type Child Find --- Select --- Child Find Day Care Provider EIP Provider Friend/Relative Head Start Program Health Care Provider Hospital In-House/Municipality Staff Newborn Hearing Screening Other Parent Physician/Pediatrician Public/Community Health Facilities School District AKA Local Education Agency Screening and Monitoring (At Risk) Social Service Agencies </pre> |
| Referral Agency | Use this drop-down and select the appropriate referral agency from the list. |
| Referral Source First Name | Enter the referral source's first name. |
| Referral Source Middle Name | Enter the referral source's middle name. |
| Referral Source Last Name | Enter the referral source's last name. |
| Referral Source Mailing Address | Enter the referral source's mailing address. |

| FIELD | DESCRIPTION |
|---|---|
| Referral Source Mailing Address 2 | Enter the referral source's mailing address 2 (e.g., APT#, PO Box). |
| Referral Source Mailing Zip Code | Enter the referral source's mailing zip code. |
| Referral Source Mailing City | Enter the referral source's mailing city. |
| Referral Source Mailing Address State | Enter the referral source's mailing address state. |
| Referral Source Phone Number Type | <p>Use this drop-down and select the appropriate phone number type from the list (shown below).</p>  |
| Referral Source Phone Number | Enter the referral source's phone number. |
| Referral Source Email Address | Enter the referral source's email address. |
| <input type="checkbox"/> *By checking this box, the Municipality indicates they have received confirmation from the referral source that the parent/legal guardian was consulted, and he/she did not object to the referral | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Referral Source Comments | Use this textbox field to enter relevant referral source comments about the child. |

| BUTTON | DESCRIPTION |
|--|--|
| Submit  | After filling out the Referral EIP panel, click this button. When clicked, the system runs a validation (e.g., required fields populated), keeping the information in the EI-HUB database. |

Referral Edit – Referral EIP Panel

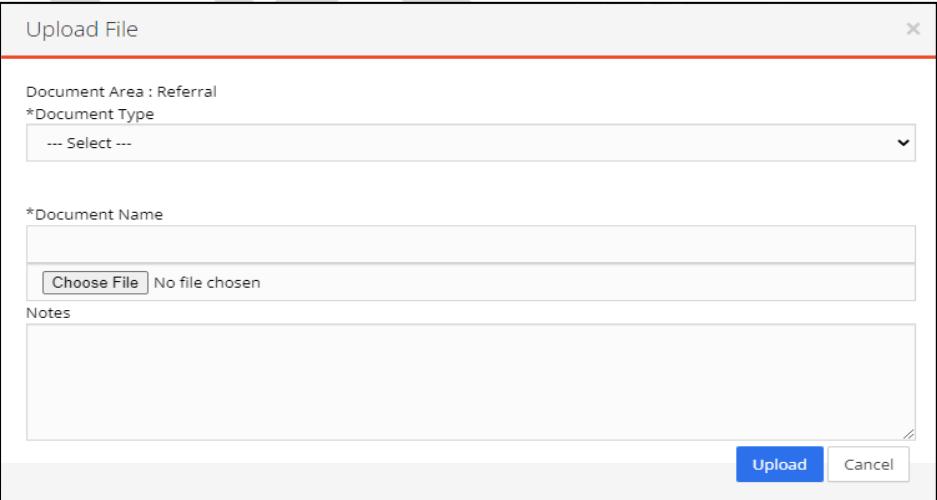


This panel/section describes **editing** an existing referral.

(i) An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|-------------------------|---|
| *Referral Status | This field (read-only) displays the referral status of the child. |
| *Referral Type | This field displays the referral type for the child. To edit, use this drop-down and select the appropriate referral type (e.g., Primary, Additional, or Re-referral etc.) from the list. |

| FIELD | DESCRIPTION |
|--|--|
| *Referral Date | This field displays the referral date for the child. To edit, manually enter the referral date or use the calendar picker (invoked by clicking this field). |
| *Referral Method | This field displays the referral method for the child. To edit, use this drop-down and select the appropriate referral method (e.g., Phone, fax, etc.) from the list. |
| *Referral Reason | This field displays the referral reason for the child. To edit, use this drop-down and select the appropriate referral reason (e.g., Confirmed Diagnosed Condition or Suspected Delay.) from the list. |
| *Referral Source Type | This field displays the referral source type for the child. To edit, use this drop-down and select the appropriate referral source type (e.g., Day Care Provider, etc.) from the list. |
| Referral Agency | This field displays the referral agency for the child. To edit, use this drop-down to select a different agency that referred the child. |
| Referral Source First Name | This field displays the referral source (first name). To edit, enter the referral source's first name. |
| Referral Source Middle Name | If applicable, this field displays the referral source (middle name). To edit, enter the referral source's middle name. |
| Referral Source Last Name | This field displays the referral source (last name). To edit, enter the referral source's last name. |
| Referral Source Mailing Address | Edit/enter the referral source's mailing address. |
| Referral Source Mailing Address 2 | If applicable, edit/enter the referral source's mailing address 2 (e.g., APT#, PO Box). |
| Referral Source Mailing Zip Code | Edit/enter the referral source's mailing zip code. |
| Referral Source Mailing City | Edit/enter the referral source's mailing city. |
| Referral Source Mailing Address State | Edit/enter the referral source's mailing address state. |
| Referral Source Phone Number Type | Edit/enter the referral source's phone number type (e.g., Home, Office, Mobil). |
| Referral Source Phone Number | Enter the referral source's phone number. |

| FIELD | DESCRIPTION |
|---|---|
| Referral Source Email Address | Edit/enter the referral source's email address. |
| <input type="checkbox"/> *By checking this box, the Municipality indicates they have received confirmation from the referral source that the parent/legal guardian was consulted, and he/she did not object to the referral | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Parent Document Upload and Upload Referral Document Parent Document Upload Upload Referral Document Upload Referral Document | <p>The referral must be submitted to create the electronic record. Then documents can be uploaded; hence the 'Upload' buttons appear when editing a referral and not when entering a new referral.</p> <p>(i) With a parent's informed written consent, please ATTACH RECORDS or REPORTS that would assist in determining eligibility for the Early Intervention Program.</p> <p>To upload, click either the Parent Document Upload or Upload Referral Document buttons; the functionality works the same way. The "Upload File" panel appears (shown below).</p>  <p>(i) An asterisk (*) adjacent to a field name/label means it is a required field you must populate. An asterisk (*) adjacent to a field name/label means it is a required field you must populate.</p> |

| FIELD | DESCRIPTION | |
|---------------------------------|---|--|
| | FIELD | DESCRIPTION |
| | *Document Type | Use this drop-down and select the appropriate document type (e.g., Medical Records, etc.) from the list. |
| | *Document Name | Enter the name of the document uploaded. |
| | Choose File <input type="button" value="Choose File"/> | To upload your file into the EI-Hub database, click this button. When clicked, your PC's web browser (e.g., MS Edge) prompts an "Open" window; navigate to where your document/file resides, click on the file (highlighted), and click the Open button on the window. The name of your file name should read adjacent to the 'Choose File' button. |
| | Notes | Use this textbox to enter relevant notes about your document file uploaded into the system. |
| | BUTTON | DESCRIPTION |
| | Upload <input type="button" value="Upload"/> | Click this button after populating the Upload File panel (mentioned above). When clicked, your file uploads into the EI-HUB database. |
| | Cancel <input type="button" value="Cancel"/> | To cancel the action for uploading a file, click this button. When clicked, the Upload File panel closes. |
| Referral Source Comments | Use this textbox field to edit/add/enter relevant referral source comments about the child. | |

8.1.4.1.5.3 Referral Additional Information Panel



Use this panel to provide additional information about developmental concerns. Include any previously completed testing and the child's functioning in one or more developmental areas that may constitute a developmental delay that would assist in determining the child's eligibility for the EIP.

Below, check all functional areas where the child is suspected of demonstrating a delay (including relevant comments or notes attached). The "Details" section, below the checkboxes for each domain, is a text box where you can write additional comments or information.

Early intervention focuses on skills in these five areas:

- 1. Physical skills** (reaching, crawling, walking, drawing, building)
- 2. Cognitive skills** (thinking, learning, solving problems)
- 3. Communication skills** (talking, listening, understanding others)
- 4. Self-help or adaptive skills** (eating, dressing)
- 5. Social or emotional skills** (playing, interacting with others)

New Referral – Referral Additional Panel

(i) This panel is not mandatory; this information is optional.

Provide additional information about developmental concerns. Include any testing that has been completed and child's functioning in one or more developmental areas that may constitute a development delay that may establish the child's eligibility for the EIP.

Please check all functional areas that the child is suspected of demonstrating a delay (including relevant comments or note that document attached):

*Capturing the information below requires that informed parental consent has been obtained. Your information will not be saved or submitted if you have not indicated that parental consent has been obtained

Adaptive
Adaptive Details

Cognitive
Cognitive Details

Communication
Communication Details

Physical (includes vision and hearing)
Physical Details

Social-Emotional
Social-Emotional Details

Diagnosis Condition(s) Search

Diagnosed Condition(s) Description
Select Some Options

ICD Codes Search

ICD Codes
Select Some Options

Additional Referral/Intake Phase Details

Signed Parental Consent Uploaded
Date of Consent

With parent's informed written consent please ATTACH RECORDS or REPORTS that would assist in determining eligibility for the Early Intervention Program.

Submit

(i) Please refer to the "Referral Edit – Referral Additional Panel" section for field descriptions. Also, there are buttons when editing a referral in the Referral Additional panel. They are as follows:

- **Concerns Document Upload**
- **Parent Document Upload**

Referral Edit – Referral Additional Panel

(i) This panel is not mandatory; this information is optional.

Provide additional information about developmental concerns. Include any testing that has been completed and child's functioning in one or more developmental areas that may constitute a developmental delay that may establish the child's eligibility for the EIP.

Please check all functional areas that the child is suspected of demonstrating a delay (including relevant comments or note that document attached):

*Capturing the information below requires that informed parental consent has been obtained. Your information will not be saved or submitted if you have not indicated that parental consent has been obtained

Adaptive
Adaptive Details

Cognitive
Cognitive Details

Communication
Communication Details

Physical (includes vision and hearing)
Physical Details

Social-Emotional
Social-Emotional Details

Concerns Document Upload

Diagnosis Condition(s) Search

Diagnosed Condition(s) Description

Select Some Options

ICD Codes Search

ICD Codes

Select Some Options

Additional Referral/Intake Phase Details

Signed Parental Consent Uploaded
Date of Consent

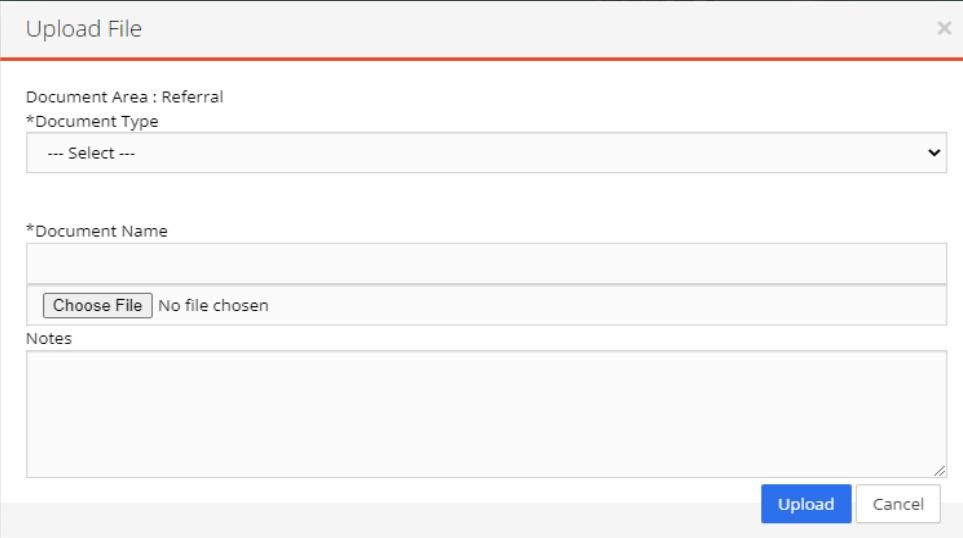
With parent's informed written consent please ATTACH RECORDS or REPORTS that would assist in determining eligibility for the Early Intervention Program.

Parent Document Upload

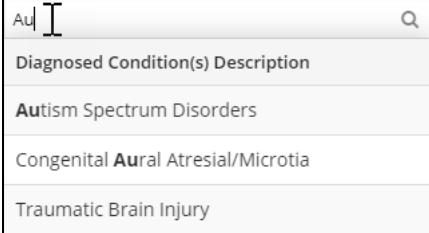
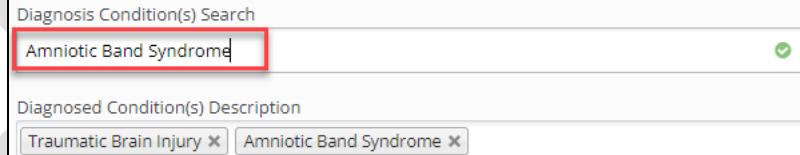
Submit

(i) An asterisk (*) adjacent to a field name/label means it is a required field that you must populate.

| FIELD | DESCRIPTION |
|--|---|
| <input type="checkbox"/> *Capturing the information below requires that informed parental consent has been obtained. Your information will not be saved or submitted if you have not indicated that parental consent has been obtained | <p>If 'Yes,' select/tick the checkbox. If 'No,' leave blank.</p> <p>(i) Your information will not be saved or submitted if you have not indicated that parental consent has been obtained.</p> |

| FIELD | DESCRIPTION |
|--|--|
| <input type="checkbox"/> Adaptive | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Adaptive Details | Provide details on the focus skill based on your selection ('Yes' or 'No'). |
| <input type="checkbox"/> Cognitive | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Cognitive Details | Provide details on the focus skill based on your selection ('Yes' or 'No'). |
| <input type="checkbox"/> Communication | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Communication Details | Provide details on the focus skill based on your selection ('Yes' or 'No'). |
| <input type="checkbox"/> Physical (includes vision and hearing) | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Physical Details | Provide details on the focus skill based on your selection ('Yes' or 'No'). |
| <input type="checkbox"/> Social-Emotional | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Social-Emotional Details | Provide details on the focus skill based on your selection ('Yes' or 'No'). |
| Concerns Document Upload | To upload the accommodating file, click this button. Then, the "Upload File" panel appears (shown below). |
| Concerns Document Upload |  <p>(i) An asterisk (*) adjacent to a field name/label means it is a required field that you must populate.</p> |

| FIELD | DESCRIPTION | |
|----------------|--|--|
| | FIELD | DESCRIPTION |
| *Document Type | | Use this drop-down and select the appropriate document type (e.g., Medical Records, etc.) from the list. |
| *Document Name | | Enter the name of the document uploaded. |
| Choose File | <input type="button" value="Choose File"/> | To upload your file into the EI-Hub database, click this button. When clicked, your PC's web browser (e.g., MS Edge) prompts an "Open" window; navigate to where your document/file resides, click on the file (highlighted), and click the Open button on the window. The name of your file name should read adjacent to the 'Choose File' button. |
| Notes | | Use this textbox to enter relevant notes about your document file uploaded into the system. |
| | BUTTON | DESCRIPTION |
| Upload | <input type="button" value="Upload"/> | Click this button after populating the Upload File panel (mentioned above). When clicked, your file uploads into the EI-HUB database. |
| Cancel | <input type="button" value="Cancel"/> | To cancel the action for uploading a file, click this button. When clicked, the Upload File panel closes. |

| FIELD | DESCRIPTION |
|--|--|
| Diagnosis Condition(s) Search | To add a diagnosis, begin typing (type ahead) in this field to activate a drop-down search list (example below) and select the appropriate diagnosis.  <p>(i) You can enter multiple diagnoses as follows.</p> <p>Step /Action</p> <ol style="list-style-type: none"> 1. Begin typing in the 'Diagnosis Condition(s) Search' field (type ahead invokes) and select the appropriate diagnosed description from the drop-down list. 2. After your selection appears in the 'Diagnosed Condition(s) Description' field below, delete the selected text listed in the 'Diagnosis Condition(s) Search' field (field referenced below). 3. To add another Diagnosis Condition, repeat step # 1.  |
| Diagnosis Condition(s) Description | Click in this field to activate the drop-down and choose [Select an Option(s)] the appropriate item(s) from the list. |
| ICD Codes Search | To add a diagnosis code, begin typing (type ahead) in this field to activate a drop-down search list and select the appropriate International Classification of Diseases (ICD) Code(s). |
| ICD Codes | Click this field to activate the drop-down and choose [Select an Option(s)] the appropriate ICD Code(s) from the list. |
| Additional Referral/Intake Phase Details | If applicable, enter a brief description of the referral/intake phase details. |
| <input type="checkbox"/> Signed Parental Consent Uploaded | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Date of Consent | Manually enter the date of consent or use the calendar picker (clicking this field). |

| FIELD | DESCRIPTION |
|--|--|
| Parent Document Upload <input type="button" value="Parent Document Upload"/> | <p>(i) With a parent's informed written consent, please ATTACH RECORDS or REPORTS that would assist in determining eligibility for the Early Intervention Program.</p> <p>To upload the accommodating file, click this button. Then, the "Upload File" panel appears (shown below).</p> |

8.1.4.1.5.3.1 Upload File Popup Panel

The screenshot shows a modal window titled "Upload File". Inside, there's a label "Document Area : Referral", a dropdown menu for "Document Type" set to "Parent Documents", a text input for "Document Name" with a "Choose File" button showing "No file chosen", a "Notes" text area, and two buttons at the bottom: "Upload" and "Cancel".

(i) An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|---|---|
| *Document Type | Use this drop-down and select the appropriate document type (e.g., Medical Records, etc.) from the list. |
| *Document Name | Enter the name of the document uploaded. |
| Choose File <input type="button" value="Choose File"/> | To upload your file into the EI-Hub database, click this button. When clicked, your PC's web browser (e.g., MS Edge) prompts an "Open" window; navigate to where your document/file resides, click on the file (highlighted), and click the Open button on the window. The name of your file name should read adjacent to the 'Choose File' button. |

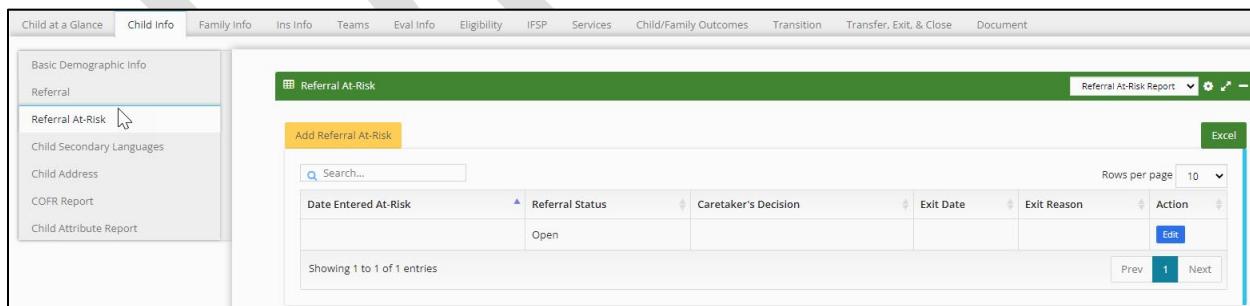
| FIELD | DESCRIPTION |
|-------|---|
| Notes | Use this textbox to enter relevant notes about your document file uploaded into the system. |

| BUTTON | DESCRIPTION |
|--|---|
| Upload  | Click this button after populating the Upload File panel (mentioned above). When clicked, your file uploads into the EI-HUB database. |
| Cancel  | To cancel the action for uploading a file, click this button. When clicked, the Upload File panel closes. |

| BUTTON | DESCRIPTION |
|---|---|
| Submit  | After filling out the Referral Additional Information panel, click this button. When clicked, the system runs a validation (e.g., required fields populated), keeping the information in the EI-HUB database. |

8.1.4.1.5.4 Referral At-Risk Grid/Table

 In the EI-Hub system, a service coordinator can directly refer a child to the at-risk program. A child's record should already be in the EI-Hub, either the minimum information entered when a referral is first made or more information if the child is referred from the Early Intervention Program (EIP) to the At-Risk.



 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

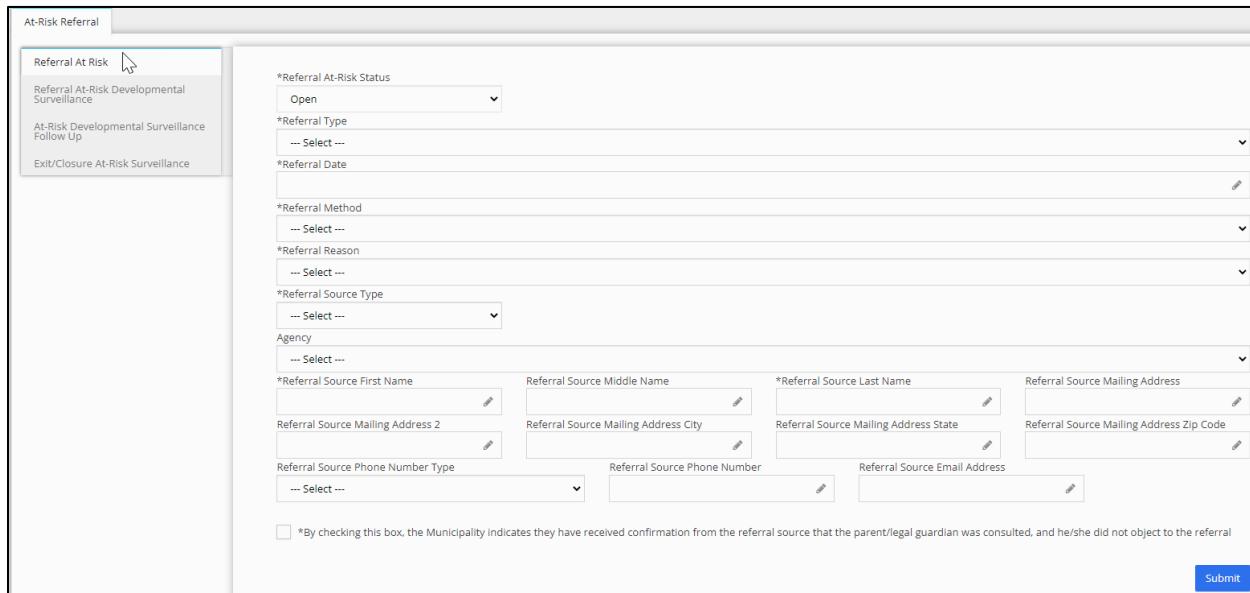
| COLUMN | DESCRIPTION |
|----------------------|--|
| Date Entered At-Risk | This column displays the user entered the date for the child At-Risk. |
| Referral Status | This column displays the referral status. |
| Caretaker's Decision | This column displays the caretaker's decision. |
| Exit Date | This column displays the exit date from At-Risk. |
| Exit Reason | This column displays the exit reason from At-Risk. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|---|---|
| Add Referral At-Risk  | Click this button to add a 'Referral At-Risk' record for the child. The At-Risk Referral tab with the following panels appears: Referral At-Risk, Referral At-Risk Development Surveillance , At-Risk Development Surveillance Follow Up , and Exit/Closure At-Risk Surveillance (shown below). |
| Edit  | Select/click this button adjacent to the record/row you want to edit an existing record. When clicked, the At-Risk Referral tab with the following panels appears: Referral At-Risk , Referral At-Risk Development Surveillance , At-Risk Development Surveillance Follow Up , and Exit/Closure At-Risk Surveillance (shown below). |

8.1.4.1.5.4.1 At-Risk Referral Tab

8.1.4.1.5.4.1.1 Referral At-Risk Panel

 You must complete the child's at-risk information in this panel (New Referral At-Risk).



The screenshot shows the 'At-Risk Referral' tab selected. On the left, there is a sidebar with options: 'Referral At Risk' (selected), 'Referral At-Risk Developmental Surveillance', 'At-Risk Developmental Surveillance Follow Up', and 'Exit/Closure At-Risk Surveillance'. The main area contains the following fields:

- *Referral At-Risk Status: Open (disabled dropdown)
- *Referral Type: ... Select ...
- *Referral Date: (disabled field)
- *Referral Method: ... Select ...
- *Referral Reason: ... Select ...
- *Referral Source Type: Agency (disabled dropdown)
- Referral Source First Name, Middle Name, Last Name, Mailing Address, City, State, Zip Code, Phone Number Type, Phone Number, Email Address: Input fields with edit icons.
- A checkbox note: *By checking this box, the Municipality indicates they have received confirmation from the referral source that the parent/legal guardian was consulted, and he/she did not object to the referral.
- A blue 'Submit' button.

 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|--------------------------|---|
| *Referral At-Risk Status | When adding a new Referral At-Risk, this field section defaults to display 'Open' and is read-only. If editing an existing Referral At-Risk, the drop-down field is enabled; use this drop-down and select the appropriate referral status (e.g., Open). |
| *Referral Type | Use this drop-down field and select the appropriate referral type for the child. |
| *Referral Date | Enter the child's referral date manually or use the calendar picker (invoked by clicking this field) for the case. A user can only change a referral date if the referral date is today and the user corrects the error today. The system validations are as follows: <ul style="list-style-type: none">• If the referral date was yesterday, then the referral date cannot be changed.• When entering a referral date, the system defaults to the current date.• As currently developed, no user type can change a referral date. |

| FIELD | DESCRIPTION |
|--|---|
| |  When entering a referral, the referral date defaults to the current day's date. However, the user can change that date, and there are validations in place to ensure the referral date entered is after the child's date of birth and is not a future date. |
| *Referral Method | Use this drop-down field and select the appropriate referral method for the child. |
| *Referral Reason | Use this drop-down field and select the appropriate referral reason for the child. |
| *Referral Source Type | Use this drop-down field and select the appropriate referral source type for the child. |
| Agency | Use this drop-down field and select the agency name that made a referral for the child. |
| *Referral Source First Name | Enter the first name of the person who made the child's referral. |
| Referral Source Middle Name | Enter the middle name of the person who made the child's referral. |
| *Referral Source Last Name | Enter the last name of the person who made the child's referral. |
| Referral Source Mailing Address | Enter the mailing address of the person who made the child's referral. |
| Referral Source Mailing Address 2 | Enter the mailing address 2 of the person who made the child's referral. |
| Referral Source Mailing Address City | Enter the city of the person who made the child's referral. |
| Referral Source Mailing Address State | Enter the state of the person who made the child's referral. |
| Referral Source Mailing Address Zip Code | Enter the zip code of the person who made the child's referral. |
| Referral Source Phone Number Type | Use this drop-down field and select the appropriate source phone number type (e.g., cell) for the person who made the child's referral. |
| Referral Source Phone Number | Enter the phone number of the person who made the child's referral. |

| FIELD | DESCRIPTION |
|---|--|
| Referral Source Email Address | Enter the email address of the person who made the child's referral. |
| <input type="checkbox"/> *By checking this box, the Municipality indicates they have received confirmation from the referral source that the parent/legal guardian was consulted, and he/she did not object to the referral | Selecting/ticking this box means the Municipality has received confirmation from the referral source that you consulted the parent/legal guardian. In addition, the parent/legal guardian did not object to the referral. If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |

| BUTTON | DESCRIPTION |
|--|--|
| Submit  | After filling out the Referral At-Risk panel, click this button. When clicked, the system runs a validation (e.g., required fields populated), keeping the information in the EI-HUB database. |

Editing a Referral At-Risk record

When editing an existing At-Risk Referral record, the panel (shown below) has two buttons, the **Parent Document Upload** and **Referral Document Upload**.

The screenshot shows the 'At-Risk Referral' editing screen. On the left, there's a sidebar with buttons for 'Referral At-Risk', 'Referral At-Risk Developmental Surveillance', 'At-Risk Developmental Surveillance Follow Up', and 'Exit/Closure At-Risk Surveillance'. The main area contains various input fields: 'Referral At-Risk Status' (Open), 'Referral Type' (Primary), 'Referral Date' (04/13/2022), 'Referral Method' (Department's Secure Website), 'Referral Reason' (At Risk), 'Referral Source Type' (Child Find), 'Agency' (test), 'Referral Source First Name' (az), 'Referral Source Middle Name' (), 'Referral Source Last Name' (a.), 'Referral Source Mailing Address' (151 w 34th street), 'Referral Source Mailing Address 2' (), 'Referral Source Mailing Address City' (NEW YORK), 'Referral Source Mailing Address State' (NY), 'Referral Source Mailing Address Zip Code' (10001), 'Referral Source Phone Number Type' (--- Select ---), 'Referral Source Phone Number' (436-353-4534), 'Referral Source Email Address' (test@test.com). Below these fields is a checkbox with the text: 'By checking this box, the Municipality indicates they have received confirmation from the referral source that the parent/legal guardian was consulted, and he/she did not object to the referral'. Underneath the checkbox are two blue buttons: 'Parent Document Upload' and 'Referral Document Upload'. In the bottom right corner of the form is a 'Submit' button.

To upload, click either the **Parent Document Upload** or **Referral Document Upload** buttons; the functionality works the same way. The "Upload File" panel appears (shown below).

The screenshot shows the 'Upload File' panel. It has a title bar 'Upload File' with a close button. The main area contains fields: 'Document Area : ReferralAtRisk', 'Document Type' (--- Select ---), 'Document Name' (with a 'Choose File' button and 'No file chosen' message), and a 'Notes' text area. At the bottom right are 'Upload' and 'Cancel' buttons.



An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|---|--|
| *Document Type | Use this drop-down and select the appropriate document type (e.g., Medical Records, etc.) from the list. |
| *Document Name | Enter the name of the document uploaded. |
| Choose File <input type="button" value="Choose File"/> | To upload your file into the EI-Hub database, click this button. When clicked, your PC's web browser (e.g., MS Edge) prompts an "Open" window; navigate to where your document/file resides, click on the file (highlighted), and click the Open button on the window. The name of your file name should read adjacent to the 'Choose File' button. |
| Notes | Use this textbox to enter relevant notes about your document file uploaded into the system. |

| BUTTON | DESCRIPTION |
|---|---|
| Upload <input type="button" value="Upload"/> | Click this button after populating the Upload File panel (mentioned above). When clicked, your file uploads into the EI-HUB database. |
| Cancel <input type="button" value="Cancel"/> | To cancel the action for uploading a file, click this button. When clicked, the Upload File panel closes. |

8.1.4.1.5.4.1.2 Referral At-Risk Developmental Surveillance Panel

You use this panel to either refer a child directly to an At-Risk referral, or a child can exit the Early Intervention Program (EIP) and then be referred to At-Risk.

the At-Risk Developmental Surveillance Follow Up panel is utilized to capture developmental information to monitor the child's developmental status



A child can be exited from At-Risk and discharged, or exited/withdrawn from At-Risk and then referred to the EIP. However, they cannot have an active EIP referral and a simultaneous At-Risk referral.

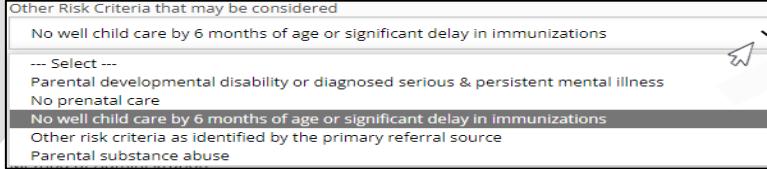
At-Risk Referral

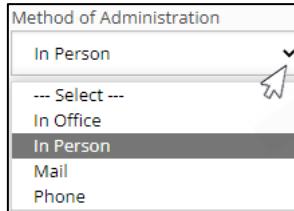
| | |
|--|---|
| Referral At-Risk <ul style="list-style-type: none"> Referral At-Risk Developmental Surveillance At-Risk Developmental Surveillance Follow Up Exit/Closure At-Risk Surveillance | <p>*Referral At-Risk Status <input checked="" type="checkbox"/> Open</p> <p>*Date Child Entered At-Risk Surveillance 06/17/2022</p> <p>Initial Contact with Caregiver 06/20/2022</p> <p>Document attempts to contact Caregiver Yes</p> <p><input type="checkbox"/> Developmental Surveillance track explained to family If At-Risk-Hearing, results of initial hearing screening: Pass</p> <p>If At-Risk-Hearing, results of second hearing screening: Pass</p> <p>Date of second hearing screening</p> <p>If no second hearing screening, why? First passed</p> <p>At Risk Criteria</p> <p><input type="checkbox"/> Failure of initial newborn infant hearing screening</p> <p>Other Risk Criteria that may be considered</p> <p>No well child care by 6 months of age or significant delay in immunizations</p> <p>*Name of Surveillance Tool Utilized Child Behavior Checklist for Ages 1.5-5 years, Communicative Development Inven.(CDI)</p> <p>Date Initial Developmental Surveillance Tool mailed/administered 06/17/2022</p> <p>Method of Administration In Person</p> <p>Mailed/Administered by</p> <p>Title</p> <p>Agency test</p> <p>Date Initial Developmental Surveillance Tool received or completed 06/20/2022</p> <p><input type="checkbox"/> Developmental Surveillance Tool not returned</p> <p>Physical Result Not appreciated</p> <p>Communication Result Not appreciated</p> <p>Adaptive Result Checked</p> <p>Cognitive Result Checked</p> <p>Social Emotional Result Checked</p> <p>Administered/Interpreted by: Johnson PhD</p> <p>Date Caretaker Informed of Results (date mailed, called or visited) 06/06/2022</p> <p>Caretaker's Decision: Concern - Refer to Early Intervention Program</p> <p>Notes/Comments All things are good.</p> <p style="text-align: right;"><input type="button" value="Submit"/></p> |
|--|---|



An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|---------------------------------|--|
| *Referral At-Risk Status | This field (read-only) displays the child's referral at-risk status. |

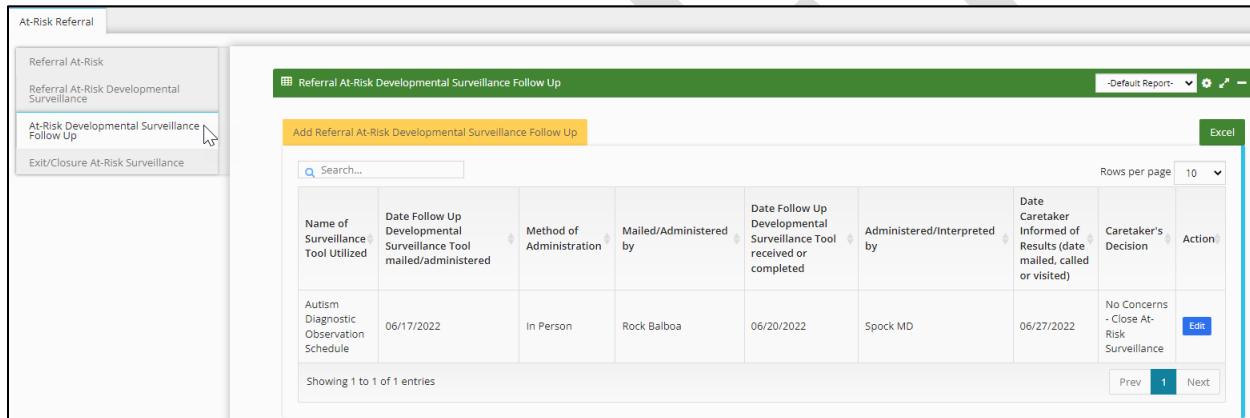
| FIELD | DESCRIPTION |
|--|--|
| *Date Child Entered At-Risk Surveillance | Manually enter the child's at-risk surveillance date or use the calendar picker (invoked by clicking this field) for the case. |
| Initial Contact with Caregiver | Enter the name of the initial contact with the caregiver. |
| Document attempts to contact Caregiver | Providers use this text field to document the date, time, and how they attempted to contact the caregiver. For example, they could enter on 5/6/22 @ 10:15 AM—an attempted phone call to the parent to discuss the latest screening results. |
| <input type="checkbox"/> Developmental Surveillance track explained to family | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| If At-Risk-Hearing results of initial hearing screening | Use this drop-down and select the appropriate item ('Pass' or 'Fail') from the list. |
| If At-Risk-Hearing results of second hearing screening | Use this drop-down and select the appropriate item ('Pass' or 'Fail') from the list. |
| Date of second hearing screening | If applicable, enter the second hearing date manually or use the calendar picker (invoked by clicking this field) for the case. |
| If no second hearing, why? | Enter the reason why there was no second hearing surveillance. |
| At-Risk Criteria | Use this drop-down and select the appropriate item from the list. |
| Other Risk Criteria that may be considered | Use this drop-down and select the appropriate item from the list (shown below).  |
| *Name of Surveillance Tool Utilized | Use this drop-down and select the appropriate item from the list. |
| Date Initial Developmental Surveillance Tool mailed/administered | Manually enter the date for the initial developmental surveillance tool mailed/administered or use the calendar picker (invoked by clicking this field). |

| FIELD | DESCRIPTION |
|--|--|
| Method of Administration | Use this drop-down and select the appropriate item from the list (shown below).  |
| Mailed/Administered by | Enter the name of the person who mailed/administered the development surveillance tool. |
| Title | Enter the title of the person who mailed/administered the development surveillance tool. |
| Agency | Enter the agency name of the person who mailed/administered the development surveillance tool. |
| Date Initial Developmental Surveillance Tool received or completed | Manually enter the date for the initial developmental surveillance tool received or completed, or use the calendar picker (invoked by clicking this field). |
| <input type="checkbox"/> Developmental Surveillance Tool not Returned | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Physical Result | Enter the child's Physical results (e.g., reaching, crawling, walking, drawing, building). |
| Communication Result | Enter the child's Communication results (e.g., talking, listening, understanding others). |
| Adaptive Result | Enter the child's Self-help or Adaptive results (e.g., eating, dressing). |
| Cognitive Result | Enter the child's Cognitive results (e.g., thinking, learning, solving problems). |
| Social-Emotional Result | Enter the child's Social-Emotional results (e.g., playing and interacting with others). |
| Administered/Interpreted by: | Enter the person who administered/interpreted the results. |
| Date Caretaker informed of Results (date mailed, called, or visited) | Manually enter the caregiver informed of the results date or use the calendar picker (invoked by clicking this field) for the case. |

| FIELD | DESCRIPTION |
|------------------------------|--|
| Caretaker's Decision: | Enter the caregiver's decision based on the administered/interpreted results. |
| Notes/Comments | Enter additional notes if the child exhibits some delays; refer to early intervention. |

| BUTTON | DESCRIPTION |
|--|---|
| Submit  | After filling out the Referral At-Risk Developmental Surveillance panel, click this button. When clicked, the system runs a validation (e.g., required fields populated), keeping the information in the EI-HUB database. |

8.1.4.1.5.4.1.3 At-Risk Developmental Surveillance Follow Up Grid/Table



| Name of Surveillance Tool Utilized | Date Follow Up Developmental Surveillance Tool mailed/administered | Method of Administration | Mailed/Administered by | Date Follow Up Developmental Surveillance Tool received or completed | Administered/Interpreted by | Date Caretaker Informed of Results (date mailed, called or visited) | Caretaker's Decision | Action |
|--|--|--------------------------|------------------------|--|-----------------------------|---|--|---|
| Autism Diagnostic Observation Schedule | 06/17/2022 | In Person | Rock Balboa | 06/20/2022 | Spock MD | 06/27/2022 | No Concerns - Close At-Risk Surveillance |  |

Showing 1 to 1 of 1 entries

 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

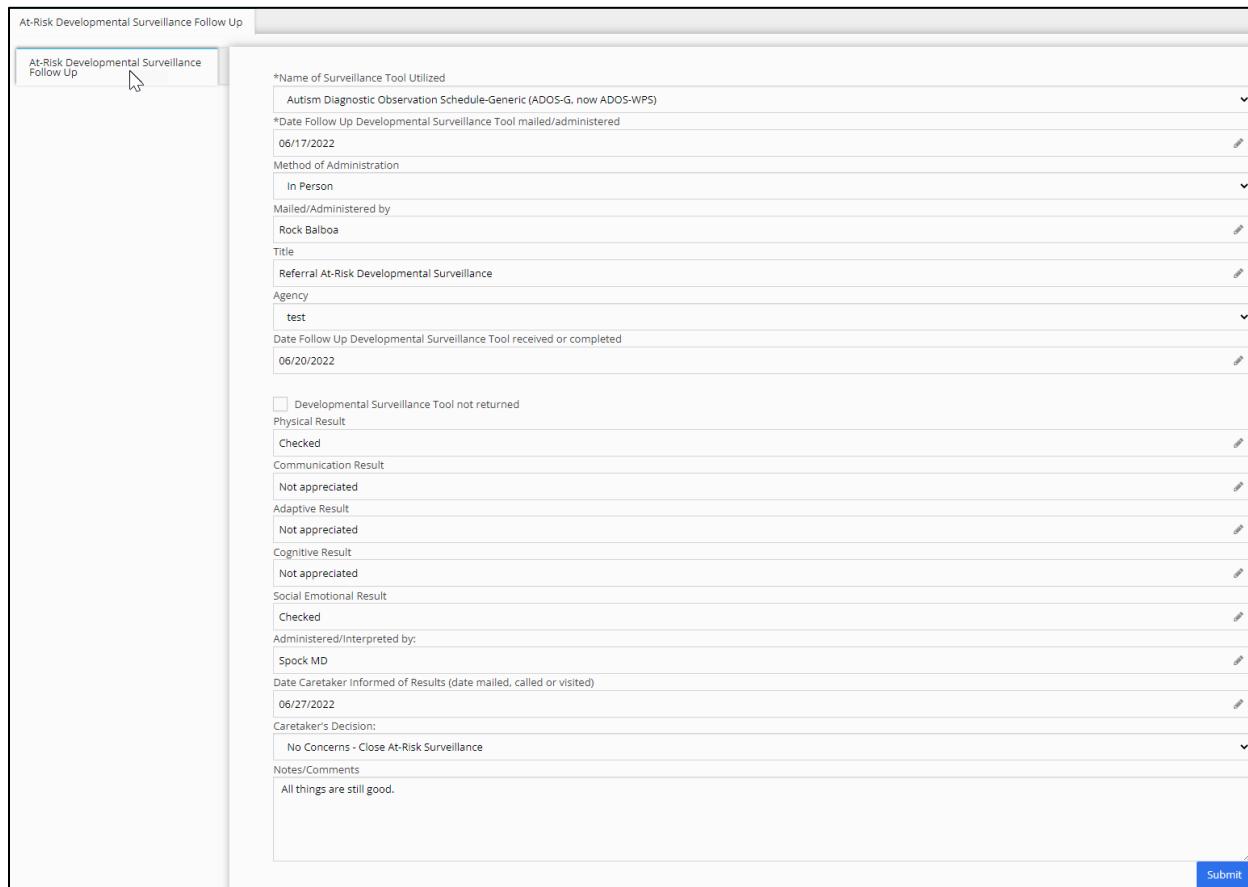
| COLUMN | DESCRIPTION |
|---|--|
| Name of Surveillance Tool Utilized | This column displays the name of the surveillance tool used. |
| Date Follow Up Developmental Surveillance Tool mailed/administered | This column displays the date the follow-up developmental surveillance tool was mailed/administered. |
| Method of Administration | This column displays the method of administration. |
| Mailed/Administered by | This column displays the name of the person who mailed or administered the mail process. |

| COLUMN | DESCRIPTION |
|--|--|
| Date Follow Up Developmental Surveillance Tool received or completed | This column displays the date the follow-up developmental surveillance tool was received or completed. |
| Administered/Interpreted by | This column displays the person who administered/interpreted the results. |
| Date Caregiver informed of Results (date mailed, called, or visited) | This column displays the date caregiver informed of the results (date mailed, called, or visited). |
| Caretaker's Decision: | This column displays the caretaker's decision for the child. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|--|---|
| Add Referral At-Risk Development Surveillance Follow Up  | Click this button to add a 'Referral At-Risk Development Surveillance Follow Up' record for the child. The ' At-Risk Development Surveillance Follow Up ' tab/ ' At-Risk Development Surveillance Follow Up ' panel appears (see below). |
| Edit  | To edit an existing 'Referral At-Risk Development Surveillance Follow Up' record for the child, click this button adjacent to the appropriate record/row. The ' At-Risk Development Surveillance Follow Up ' tab/ ' At-Risk Development Surveillance Follow Up ' panel appears (the same fields are shown below). |

8.1.4.1.5.4.1.3.1 At-Risk Developmental Surveillance Follow Up Panel

 The Muni At-Risk manager uses this panel to follow the child and receives notifications to check in with the family/child. The case manager records these check-ins on this panel.



The screenshot shows a web-based form titled "At-Risk Developmental Surveillance Follow Up". The form includes fields for entering surveillance details, physical results, communication results, adaptive results, cognitive results, social emotional results, and caretaker information. A "Submit" button is located at the bottom right of the form area.

*Name of Surveillance Tool Utilized
Autism Diagnostic Observation Schedule-Generic (ADOS-G, now ADOS-WPS)

*Date Follow Up Developmental Surveillance Tool mailed/administered
06/17/2022

Method of Administration
In Person

Mailed/Administered by
Rock Balboa

Title
Referral At-Risk Developmental Surveillance

Agency
test

Date Follow Up Developmental Surveillance Tool received or completed
06/20/2022

Developmental Surveillance Tool not returned

Physical Result
Checked

Communication Result
Not appreciated

Adaptive Result
Not appreciated

Cognitive Result
Not appreciated

Social Emotional Result
Checked

Administered/Interpreted by:
Spock MD

Date Caretaker Informed of Results (date mailed, called or visited)
06/27/2022

Caretaker's Decision:
No Concerns - Close At-Risk Surveillance

Notes/Comments
All things are still good.

Submit



An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

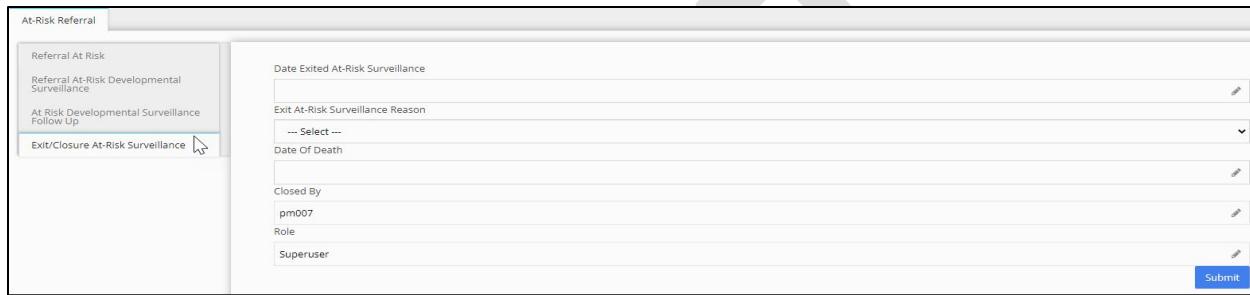
| FIELD | DESCRIPTION |
|---|--|
| *Name of Surveillance Tool Utilized | Use this drop-down and select the appropriate referral status (e.g., Open). |
| *Date Follow Up Developmental Surveillance Tool mailed/administered | Manually enter the child's at-risk surveillance date or use the calendar picker (invoked by clicking this field) for the case. |
| Method of Administration | Use this drop-down and select the appropriate method of administration. |

| FIELD | DESCRIPTION |
|--|--|
| Mailed/Administered by | Enter the name of the person who mailed or administered the Surveillance Tool; this would be the person who administered the tool if done in person, in the office, or by phone. |
| Title | Enter the title of the individual mailing or administering the surveillance instrument. |
| Agency | Use this drop-down list and select the appropriate agency from the list. |
| Date Follow Up Developmental Surveillance Tool received or completed | Manually enter the follow-up date or use the calendar picker (invoked by clicking this field) for the developmental surveillance tool received or completed. |
| <input type="checkbox"/> Developmental Surveillance Tool not Returned | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Physical Result | Enter the child's Physical results (e.g., reaching, crawling, walking, drawing, building). |
| Communication Result | Enter the child's Communication results (e.g., talking, listening, understanding others). |
| Adaptive Result | Enter the child's Self-help or Adaptive results (e.g., eating, dressing). |
| Cognitive Result | Enter the child's Cognitive results (e.g., thinking, learning, solving problems). |
| Social-Emotional Result | Enter the child's Social-Emotional results (e.g., playing and interacting with others). |
| Administered/Interpreted by: | Enter the person who administered/interpreted the results. |
| Date Caretaker informed of Results (date mailed, called, or visited) | Manually enter the caregiver informed of the results date or use the calendar picker (invoked by clicking this field) for the case. |
| Caretaker's Decision: | Enter the caregiver's decision based on the administered/interpreted results. |
| Notes/Comments | Enter any additional/relevant notes on the administered/interpreted results. |

| BUTTON | DESCRIPTION |
|--|---|
| Submit  | After filling out the Referral At-Risk Development Surveillance Follow-up panel, click this button. When clicked, the system runs a validation (e.g., required fields populated), keeping the information in the EI-HUB database. |

8.1.4.1.5.4.1.4 Exit/Closure At-Risk Surveillance Panel

 The formal closure process will happen in this panel when the child is no longer appropriate for At-Risk Surveillance (e.g., family withdrawal, not eligible (age appropriate), or no response from the family).



| FIELD | DESCRIPTION |
|--|---|
| Date Exited At-Risk Surveillance | Manually enter the exited At-Risk Surveillance date or use the calendar picker (invoked by clicking this field) for the case. |
| Exit At-Risk Surveillance Reason | Use this drop-down and select the appropriate exit at-risk surveillance reason from the list (shown below). |
|  Date Of Death | If the child has passed, manually enter the death date, or use the calendar picker (invoked by clicking this field) for the case. |
| Closed By | This read-only field displays the username logged in the EI-Hub Case Management module. |
| Role | This read-only field displays the user's role in the EI-Hub Case Management module. |

| BUTTON | DESCRIPTION |
|--|---|
| Submit  | After filling out the Exit/Closure At-Risk Surveillance panel, click this button. When clicked, the system runs a validation (e.g., required fields populated), keeping the information in the EI-HUB database. |

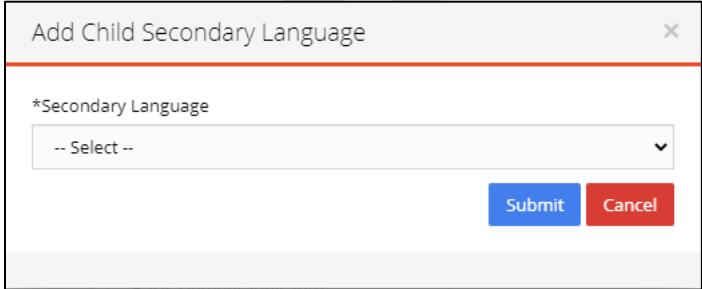
8.1.4.1.6 Child Secondary Languages Panel

 After the referral, the child is assigned to an EIO/D, who will assign an initial service coordinator. Then, they start the intake process. In this grid/table, you can indicate a secondary language if applicable and record as many additional languages as needed.



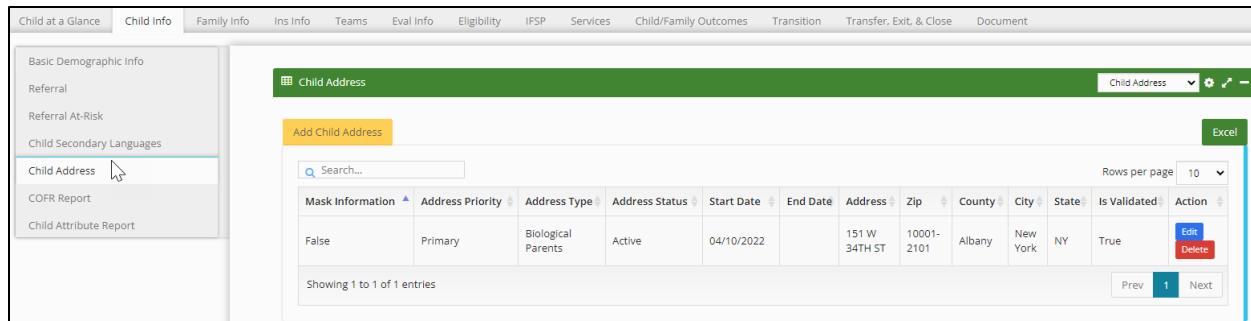
 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| BUTTON | DESCRIPTION |
|--|---|
| Add  | <p>Step / Action</p> <ol style="list-style-type: none"> 1. To add a secondary language for the child, click the Add button. When clicked, the system opens an "Add Child Secondary Language" popup panel (shown below). 2. Use the drop-down arrow, select the appropriate second language and click Submit to accept; the system adds your selection to the Secondary Language column of the Child Secondary Languages panel. <ul style="list-style-type: none"> o Click Cancel to disregard additional language, and the popup panel closes.  <p>i If you select “Other” for a Secondary Language, a second field (“Other Language” appears (example below). Use this field to enter the name of a second language not in the Secondary Language drop-down list.</p>  |

8.1.4.1.7 Child Address Grid/Table

 Use this grid/table to separate the child's and family members' addresses. This grid/table captures the addresses where the child resides or spends time at. For example, these addresses could reflect the child's home address, grandparents' home address, daycare address, etc. You can also indicate here the type of address you are entering. In addition, this information is essential for those providing home and community-based visits (e.g., a therapist).



| Mask Information | Address Priority | Address Type | Address Status | Start Date | End Date | Address | Zip | County | City | State | Is Validated | Action |
|------------------|------------------|--------------------|----------------|------------|----------|---------------|------------|--------|----------|-------|--------------|---|
| False | Primary | Biological Parents | Active | 04/10/2022 | | 151 W 34TH ST | 10001-2101 | Albany | New York | NY | True | Edit Delete |

 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|-------------------------|--|
| Mask Information | This column displays ('True' or 'False') if the child's social security numbers appear in the record. |
| Address Priority | This column displays the address priority.  If there is a secondary address, then this would not be the only address where the child resides. |
| Address Type | This column displays the type of address. |
| Address Status | This column displays the address status. |
| Start Date | This column displays the start date. |
| End Date | This column displays the end date. |
| Address | This column displays the primary address. |

| COLUMN | DESCRIPTION |
|---------------------|--|
| Zip | This column displays the zip code. |
| County | This column displays the county. |
| City | This column displays the city. |
| State | This column displays the state. |
| Is Validated | This column displays if the address is validated. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|---|---|
| Add Child Address  | To add a child's 'Address' record for the child, click this button. Then, the 'Add Child Address' popup panel appears (shown below). |
| Edit  | Click this button to view or edit a 'child address' record. ⓘ The fields and descriptions for editing the Child Address popup panel are the same for adding; the Child Address popup panel appears (ref. below). |
| Delete  | Click this button adjacent to the appropriate child address row/record. When clicked, a message pad appears (shown below). <div style="border: 1px solid #ccc; padding: 10px; margin-top: 10px;"> Confirm Child Address Deletion <p>This action cannot be reversed. Are you sure you want to continue?</p> <div style="text-align: right; margin-top: 10px;"> Delete Cancel </div> </div> <ul style="list-style-type: none"> • To confirm the removal of the child's address, select/click the Delete button. • To retract from deleting the child's address, select/click the Cancel button. |

8.1.4.1.7.1 Add Child Address Popup Panel



This panel appears when selecting/clicking the Add Child Address button.

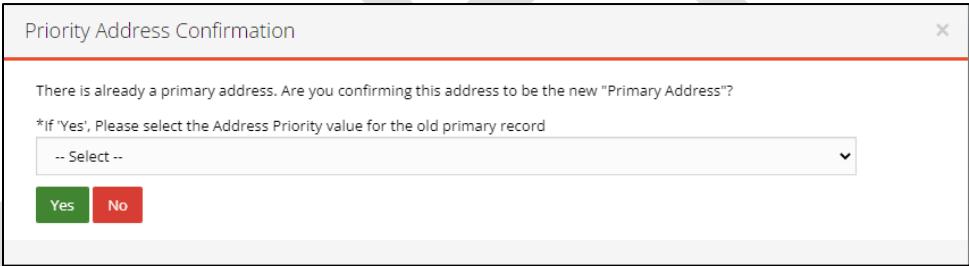
Add Child Address

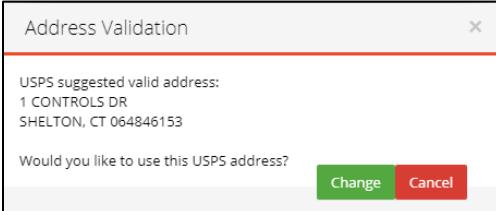
| | |
|---|---|
| County of Residence Fulton | <input type="checkbox"/> Mask Information |
| *Address Type -- Select -- | |
| *Address Status -- Select -- | |
| *Start Date | |
| End Date | |
| *Address Priority -- Select -- | |
| *Address Line 1 | |
| Address Line 2 | |
| Address Line 3 | |
| *Zip Code | |
| City/Town | |
| Address State -- Select -- | |
| Address County -- Select -- | |
| <input type="button" value="Address Validate"/> <input type="button" value="City / State / Zip Lookup"/> <input type="button" value="Submit"/> <input type="button" value="Cancel"/> | |



An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|--|--|
| County of Residence | This read-only field displays/defaults the county of residence. |
| <input type="checkbox"/> Mask Information | <p>(i) The mask information checkbox is for printed documents (such as an IFSP) and is not used for masking information on the panel/screen.</p> <p>If 'Yes,' select/tick the checkbox. If 'No,' leave blank.</p> |
| *Address Type | Use this drop-down and select the appropriate address type for the child (e.g., Biological Parents, Foster Care Parents, etc.). |
| *Address Status | Use this drop-down and select the appropriate address status (e.g., 'Active' or 'Inactive'). |

| FIELD | DESCRIPTION |
|-------------------|--|
| *Start Date | Manually enter the start date or use the calendar picker (invoked by clicking this field). |
| End Date | Manually enter the end date or use the calendar picker (invoked by clicking this field). |
| *Address Priority | <p>Use this drop-down and select the appropriate address priority (e.g., Primary or Secondary) from the list.</p> <p>(i) Please note the child can only have one primary address.</p> <p>If you add a 'Primary' address that the child's record already has, the system prompts a 'Priority Address Confirmation' popup (shown below). The system notifies you, "There is already a primary address. Are you confirming this address to be the new "Primary Address"? If 'Yes,' select the Address Priority value for the old primary record" using the field drop-down. The system message changes if there happens to be already a 'Secondary' address.</p>  |
| * Address Line 1 | Enter the child's address. |
| Address Line 2 | Enter the child's address 2 (e.g., APT#, etc.) if applicable. |
| Address Line 3 | If applicable, enter the child's address (e.g., mail sent to a PO Box) |
| *Zip Code | Enter the zip code. |
| City/Town | Enter the name of the city or town. |
| Address State | Use this drop-down and select the state abbreviation. |
| Address County | Use this drop-down and select the county. |

| BUTTON | DESCRIPTION |
|---|---|
| Address Validate  | To validate the child's address, click this button. When clicked, the system prompts a panel (example below), and you have the option to correct/edit (click Change) or to leave your entry as is (click Cancel).  (i) The address validation function automatically replaces the previously entered Address if the 'Change' button is selected/clicked. |
| City / State / Zip Lookup  | You must select/click the 'Address Validate' button to save the address information. Note you do not have to select/click the 'City/State/Zip Lookup' button to validate; however, you must enter values in the city, state, and zip fields. Alternatively, you can enter the zip and select/click the 'City/State/Zip Lookup' button to populate the remaining fields. Then select/click the 'Address Validate' button. |
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-HUB database, and the record updates the Child Address panel. |
| Cancel  | To cancel your entry, click this button: the information entered in the Child Address panel does not save and closes. |

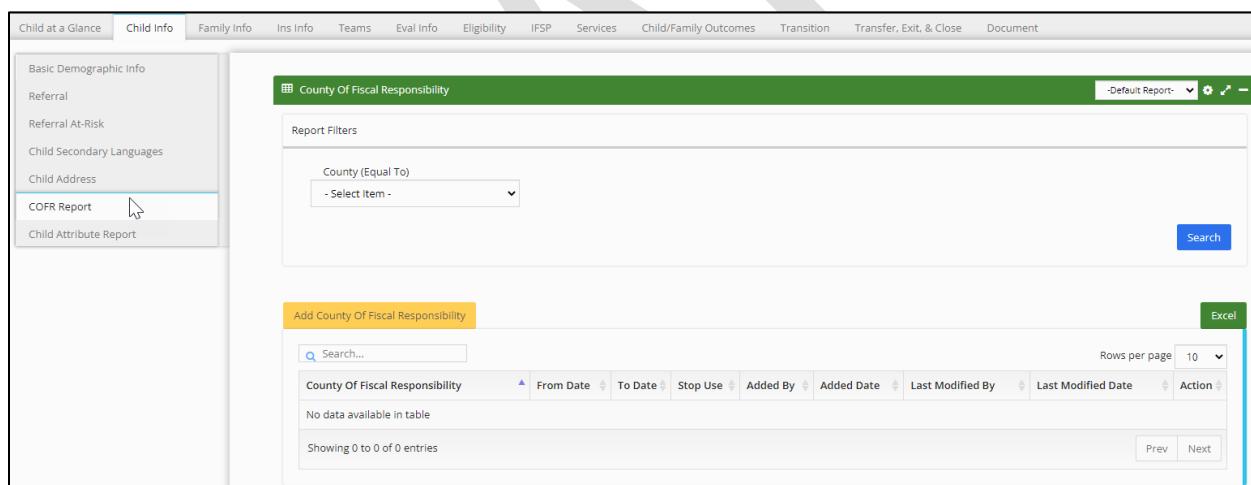
| BUTTON | DESCRIPTION |
|--|--|
| Edit  | Click this button adjacent to the appropriate record/row to view or edit a Child Address record. When clicked, the "Edit Child Address" panel appears (shown below). |

8.1.4.1.8 County Of Fiscal Responsibility (COFR) Report Filters Panel and Results Grid/Table/

 The County of Fiscal Responsibility . is the county through which a child was initially enrolled in the Early Intervention Program. When a child is placed in foster care or a similar program, the county of residence may change depending on the placement. The COFR does not change. However, there are other instances where this is not always the case. For example, a child's permanent residence may be in Albany County, but they temporarily live in Monroe County. Therefore, Albany County would maintain fiscal responsibility. Still, Monroe County would be responsible for providing EI services to the child while they are residing in Monroe County. The EIO/D or EIO will assign the COFR based on the child's specific situation.

The COFR Report does not impact service provision to a child, and the child's service providers do not complete this information. This Report is available because counties must reconcile service costs once a year based on the child's county of residence and fiscal responsibility. The State will reimburse the county of residence for service costs, and the county of fiscal responsibility will be charged their share to pay for escrow.

 **The COFR is usually the county where the child was first enrolled in EI. However, there are other cases where this is not true. For example, if the child is in foster care, the county where the child entered foster care would be the COFR.**

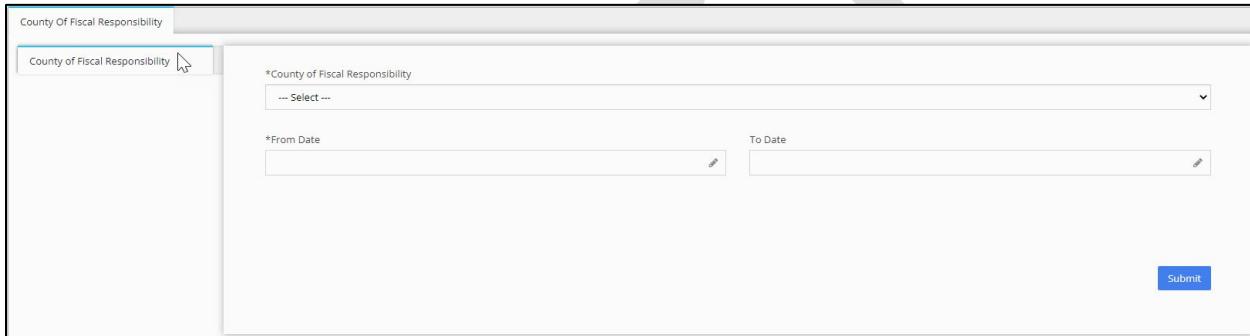


 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section Home Tab Controllers; selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|-------------------|--|
| County (Equal To) | Use this drop-down menu and select the appropriate county of temporary residency that provided the services from the list. |

| BUTTON | DESCRIPTION |
|---|---|
| Search  | After selecting your county above, click this button. |
| Add County Of Fiscal Responsibility  | To add a county of fiscal responsibility, click this button. When clicked, the County of Fiscal Responsibility panel appears (Shown below). |

8.1.4.1.8.1.1 County of Fiscal Responsibility Panel



 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|---|--|
| *County of Fiscal Responsibility | Use this drop-down menu and select the appropriate county from the list. |
| *From Date | Manually enter the county 'from' date or use the calendar picker (invoked by clicking this field). |
| To Date | To end a county of fiscal responsibility, manually enter the county end (To) date or use the calendar picker (invoked by clicking this field). |

| BUTTON | DESCRIPTION |
|--|---|
| Submit  | After filling out the County of Fiscal Responsibility panel, click this button. When clicked, the system runs a validation (e.g., required fields populated), keeping the information in the EI-HUB database. |

8.1.4.1.9 Child Attributes Panel

 The Child Attributes panel is an area to collect non-reportable data (unable to produce reports) on a child and their family. For example, the Child Attributes panel gathers information, such as a passcode required to enter an apartment complex. Also, this is an area where team members can review information about the child's home, child care program, family, and other important information that will be valuable to providers.

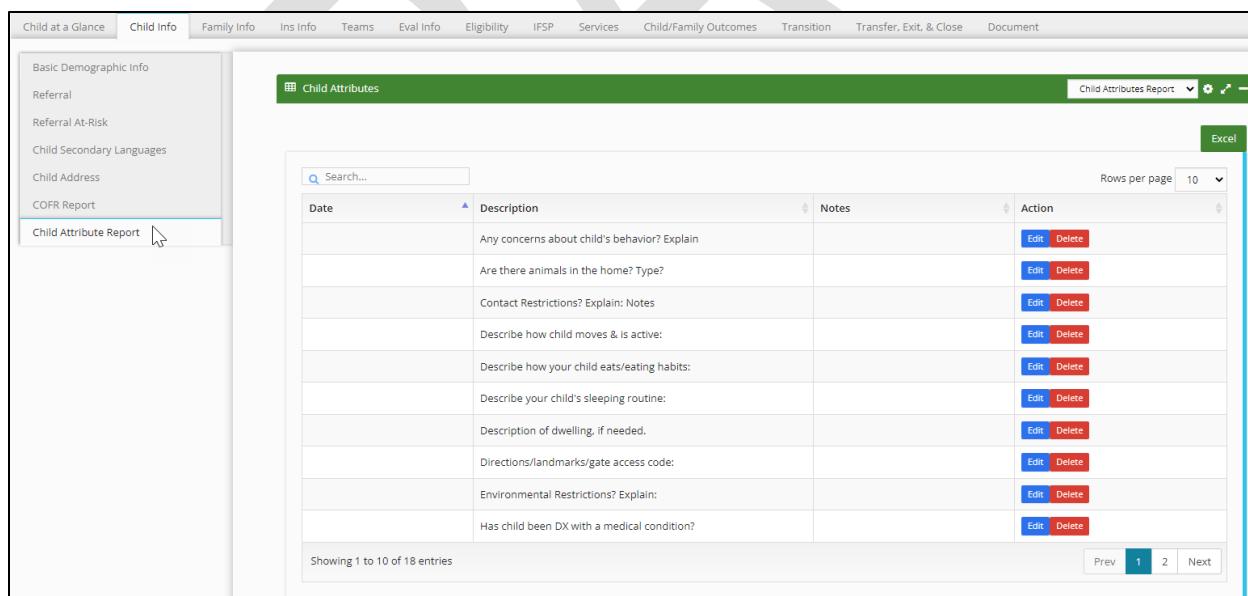
Child Attributes are not connected to the IFSP and cannot be pulled into a report. However, they are part of the child's EI Hub record.

Child Attributes will be helpful when the child is receiving services. However, adding any attributes regarding the child received during the referral or intake process is valuable to maintain robust documentation and ensure all providers are informed of the child's situation.

Child Attributes are labeled by type and category for easy access and organization.

Each child will have categories already in the child attributes table. Service Coordinators can add details to the attributes relevant to the child.

 Any optional information entered in the Child Attributes panel does not show in any reports. There is no history maintained. If you enter information and something changes, you cannot track it. Data entry in this panel can be an area for random notes, e.g., the family has a pet or directions with additional identifying information such as the house color. If there is a non-custodial parent, you can enter this information in this panel.



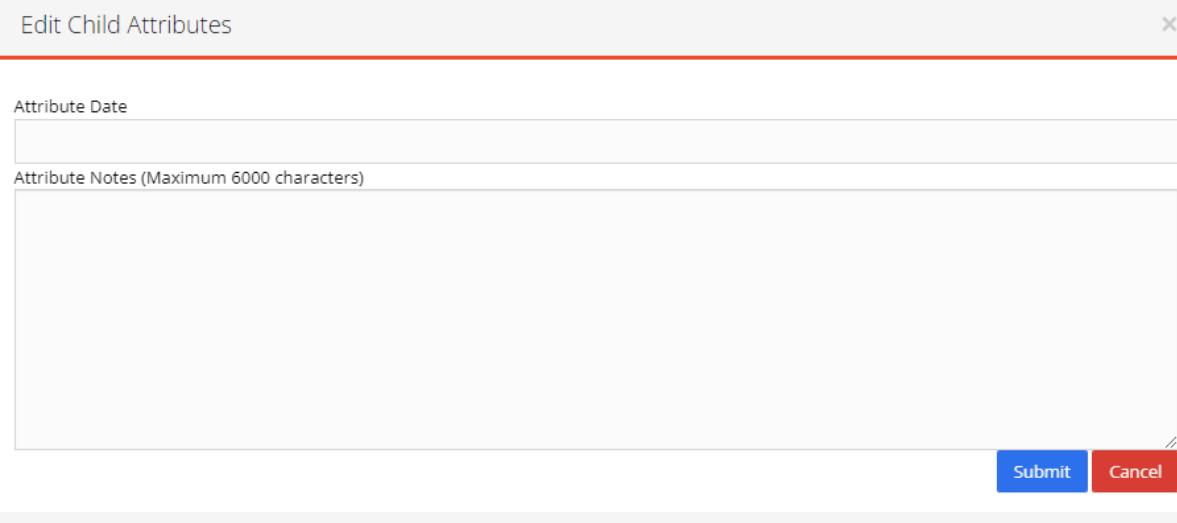
| Date | Description | Notes | Action |
|------|--|-------|-------------|
| | Any concerns about child's behavior? Explain | | Edit Delete |
| | Are there animals in the home? Type? | | Edit Delete |
| | Contact Restrictions? Explain: Notes | | Edit Delete |
| | Describe how child moves & is active: | | Edit Delete |
| | Describe how your child eats/eating habits: | | Edit Delete |
| | Describe your child's sleeping routine: | | Edit Delete |
| | Description of dwelling, if needed. | | Edit Delete |
| | Directions/landmarks/gate access code: | | Edit Delete |
| | Environmental Restrictions? Explain: | | Edit Delete |
| | Has child been DX with a medical condition? | | Edit Delete |

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|--------------------|--|
| Date | This column displays the date information is added in the Attribute. |
| Description | This column displays information you want to collect on a child's record. |
| Notes | This column displays the notes related to the Attribute. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|--|--|
| Edit  | Click this button adjacent to the appropriate record/row to view or edit a Child Attribute record. When clicked, the "Edit Child Attribute" panel appears (shown below). |

8.1.4.1.9.1 Edit Child Attribute Popup Panel



The screenshot shows a modal dialog titled "Edit Child Attributes". At the top right is a close button (X). Below the title is a horizontal red line. The main area contains two input fields: "Attribute Date" and "Attribute Notes (Maximum 6000 characters)". Both fields have placeholder text. At the bottom right of the modal are two buttons: "Submit" (blue) and "Cancel" (red).

| FIELD | DESCRIPTION |
|------------------------|--|
| Attribute Date | Manually enter the attribute date or use the calendar picker (invoked by clicking this field). |
| Attribute Notes | If applicable, enter a brief description of the Attribute edited. |

| BUTTON | DESCRIPTION |
|--|---|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-HUB database, and the record updates the Child Attributes panel. |
| Cancel  | To cancel your entry, click this button. The information entered in the Child Attribute panel does not save and closes. |
| Delete  | Click this button adjacent to the appropriate child attribution row/record to delete. When clicked, a message pad appears (shown below). <div style="border: 1px solid #ccc; padding: 10px; margin-top: 10px;"> Confirm Child Attributes Deletion <p>This action cannot be reversed. Are you sure you want to continue?</p> <div style="text-align: right; margin-top: 10px;">   </div> </div> <ul style="list-style-type: none"> • To confirm the removal of the child's address, select/click the Delete button. • To retract from deleting the child's address, select/click the Cancel button. |

8.1.4.2 Family Info Tab

 When a child enters the system for the first time, the child's family will automatically populate with the child's last name. No action should be needed here; a child's family is automatically created. However, there may be certain circumstances where the child's last name differs from the family's last name. Therefore, the family's last name must be modified to reflect the correct information. For example, the child's mother gives birth and gives the child her last name. However, the child lives with their biological father, whose last name differs from that of the child's mother.

8.1.4.2.1 Family Grid/Table

 This grid/table is a section where you add people relevant to the child. The data entered does not have to be limited to individuals in a biological relationship as long as the individuals have a relevant relationship with the child, e.g., foster care worker or identified respite provider. In addition, the grid/table can be used to explain why you added a person to the child's family.

 You need to denote a primary contact. The system can only have one (1) primary contact. For example, if a child lives with both parents and co-parents, they can only list one as the primary.

 When adding addresses or phone numbers, never change/edit the records; always populate the 'End Date' and then add a new record to maintain the history. [NYEIS Difference]

| Family | | | | | | |
|--|------------|------------|-------------|-----------------------|--|--|
| Add Family | | | | | | |
| <input type="text" value="Search..."/> | | | | | | |
| Family ID | Start Date | End Date | Last Name | Action | | |
| 3 | 04/11/2022 | 06/05/2022 | PCG-Gadsden | <button>Edit</button> | | |
| 104 | 04/21/2022 | | Ward | <button>Edit</button> | | |
| 116 | 04/22/2022 | 06/07/2022 | rind | <button>Edit</button> | | |

 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|-------------------|--|
| Family ID | This column displays the family identification number (ID) added to the EI-Hub database. |
| Start Date | This column displays the family member's start date added to the EI-Hub database. |
| End Date | This column displays the family member's end date that is no longer valid. |
| Last Name | This column displays the family's last name. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|--|---|
| Excel  | Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet. To see your results in excel, click Open file .  The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system. |
| Add Family  | Click this button to add a 'Family' record for the child. Then, the 'Family' Tab and panels appear (shown below). |

8.1.4.2.1.1 Family Tab

 Home / Child / Edit / Family Add

8.1.4.2.1.1.1 Family Member Grid/Table

 This grid/table is a section where you begin adding people relevant to the child. Use the start/end dates when a family member is no longer relevant, and users can end date a contact.

 You need to denote a primary contact. The system can only have one (1) primary contact. If a child lives with both parents and co-parents, they can only list one as the primary.

 When adding addresses or phone numbers, never change/edit the records; always populate the 'End Date' and then add a new record to keep the history. [NYEIS Difference]

 How can a family 'Status' be 'Inactive'? A family would be 'Active' unless the family base had to be deactivated (e.g., replaced).

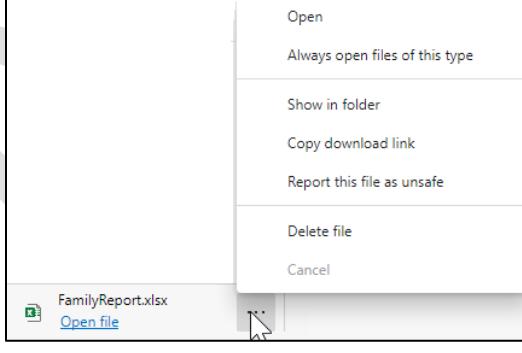
| Family Members | | | | | | | | | | | | | | | |
|--------------------|---------------|---------------|------|-------------------|----------------|-------------------|---------------|---------------------|-----------------------------|-----------|----------------|------------------------------|-------|-------|------------------------|
| Add Family Members | | | | | | | | | | | | | | | |
| Rows per page 10 | | | | | | | | | | | | | | | |
| Fix | Date of Birth | Email Address | Sex | Contact Type | Marital Status | Dominant Language | Multilingual? | Interpreter Needed? | Written Translation Needed? | Education | Household Size | Permission to Always Contact | Notes | Phone | Action |
| | 01/01/2010 | | | Primary Contact | | English | False | False | False | | | False | | | Remove |
| | | | | Alternate Contact | | English | False | False | False | | | False | | | Edit |
| | | | | Alternate Contact | | English | False | False | False | | | False | | | Edit |
| | 04/09/2022 | | Male | | | Armenian DNU | False | False | | | | | | | Edit |

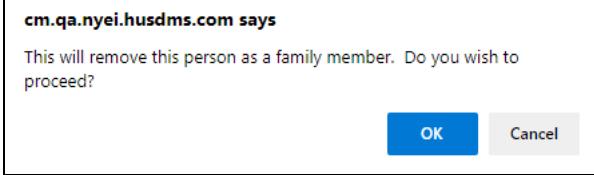
 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|----------------------------|---|
| Mask Information | This column displays ('True' or 'False') if the child's social security numbers appear in the record. |
| EI Child ID | This column displays the child's Early Intervention Identification number. |
| Family Type | This column displays the family type for the child. |
| If Other | If applicable, this column displays another family type responsible or associated with the child. |
| Start Date | This column displays the start date for the family member currently involved with the child. |
| End Date | This column displays the end date for the family member currently involved with the child. |
| Status | This column displays the family member status involved with the child. |
| Salutation | This column displays the family member's salutation. |
| First Name | This column displays the family member's first name. |
| Last Name | This column displays the family member's last name. |
| Middle Name | This column displays the family member's middle name. |
| Suffix | This column displays the family member's suffix. |
| Date of Birth | This column displays the family member's date of birth. |
| Email Address | This column displays the family member's email address. |
| Sex | This column displays the family member's sex (gender). |
| Contact Type | This column displays the family member's contact type. |
| Martial Status | This column displays the family member's marital status. |
| Dominant Language | This column displays the family member's dominant language. |
| Multilingual? | This column displays if the family member is multilingual. |
| Interpreter Needed? | This column displays if an interpreter for the family member is required. |

| COLUMN | DESCRIPTION |
|-------------------------------------|--|
| Written Translation Needed? | This column displays if a written translation ('True' or 'False') for the family member is required. |
| Education | This column displays the highest level of education of the family member. |
| Household Size | This column displays the family member's household size. |
| Permission to Always Contact | This column displays 'True' or 'False' for permission to contact the family member. |
| Notes | This column displays any relevant notes about the family member. |
| Phone | This column displays the family member's phone number. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Remove or Edit). |

| BUTTON | DESCRIPTION |
|--|--|
| Excel  | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet. An example of MS Edge browser downloading the excel file and options (shown below):</p>  <p>To see your results in excel, click Open file.</p> <p>(i) The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the El-Hub system.</p> |
| Add Family Members  | To add family members for the child, click this button. Then, the Demographics tab/panels appear (shown below). |

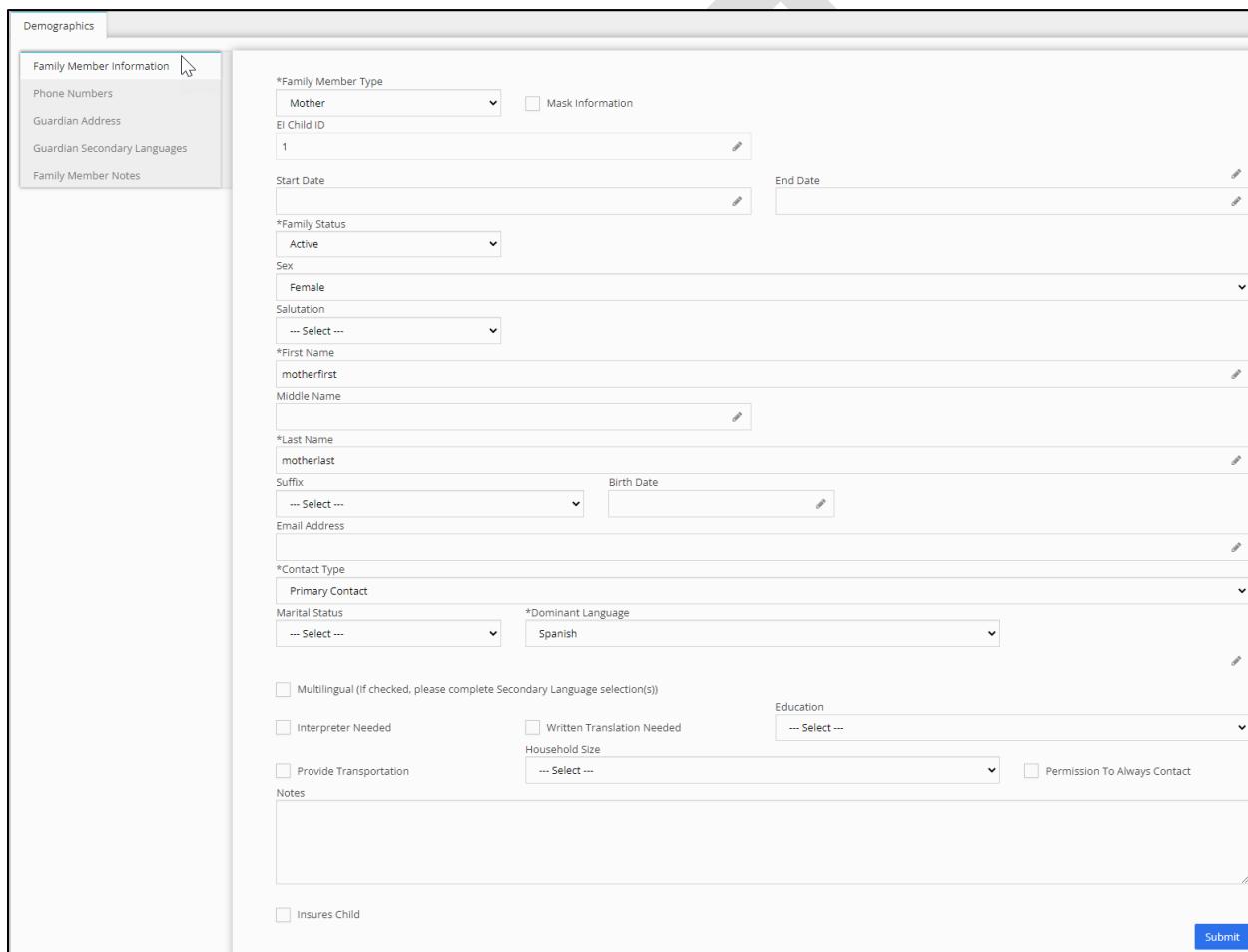
| BUTTON | DESCRIPTION |
|--|--|
| Remove  | Click this button adjacent to the appropriate family member row/record to remove a family member (i.e., relative) record. When clicked, a message prompt appears (shown below). Select/click 'OK' to remove the family member or 'Cancel' to retract.  <p>cm.qa.nyei.husdms.com says This will remove this person as a family member. Do you wish to proceed? OK Cancel</p> <p>(i) You'll get the first error message (shown above) when you try to remove a family member (e.g., a parent). You only get the second error message (shown) below when you try to delete the actual (anchor) child.</p>  <p>Error Occured X You cannot remove the Anchor Child.</p> |
| Edit  | To view or edit a 'Family Member record, click this button. Then, the Demographics tab and the 'Family Member Information panel appear (shown below). (i) If you select/click an Edit button on an enrolled child, an error message pad appears (shown below). You must modify an enrolled child on the child form and can not edit them in the Family Members section.  <p>cm.qa.nyei.husdms.com says Enrolled children must be modified on the child form. Enrolled children can not be edited in Family Members section. OK</p> |

8.1.4.2.1.1.1.1 Demographics Tab

 The family demographics tab is where you enter the family information, phone numbers, guardian address, guardian's secondary languages, and Family Member Notes.

8.1.4.2.1.1.1.2 Family Information Panel

 The user must select 'Active' when entering a family member and 'Inactive' when entering an 'End Date' for a family member; this will assist in maintaining a visual record of family members associated with the child.



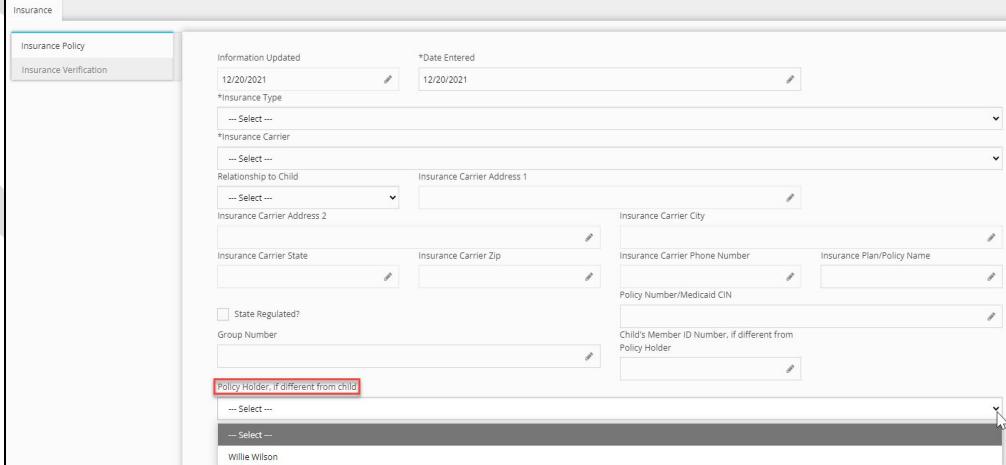
The screenshot shows a web-based form titled 'Demographics'. On the left, there is a sidebar with links: 'Family Member Information' (which is currently selected), 'Phone Numbers', 'Guardian Address', 'Guardian Secondary Languages', and 'Family Member Notes'. The main panel contains the following fields:

- *Family Member Type: Mother (dropdown)
- El Child ID: 1
- Start Date: (text input)
- End Date: (text input)
- *Family Status: Active (dropdown)
- Sex: Female (dropdown)
- Salutation: ... Select ... (dropdown)
- *First Name: motherfirst
- Middle Name: (text input)
- *Last Name: motherlast
- Suffix: ... Select ... (dropdown)
- Birth Date: (text input)
- Email Address: (text input)
- *Contact Type: Primary Contact (dropdown)
- Marital Status: ... Select ... (dropdown)
- *Dominant Language: Spanish (dropdown)
- Multilingual (if checked, please complete Secondary Language selection(s))
- Interpreter Needed
- Written Translation Needed
- Household Size: ... Select ... (dropdown)
- Provide Transportation
- Education: ... Select ... (dropdown)
- Notes: (text area)
- Permission To Always Contact
- Insures Child

At the bottom right of the form is a blue 'Submit' button.

 An asterisk (*) adjacent to a field name/label means it is a required field that you must populate.

| FIELD | DESCRIPTION |
|---|--|
| *Family Member Type | Use this drop-down and select the appropriate family member type (e.g., Mother) from the list. |
| <input type="checkbox"/> Mask Information | <p> The mask information checkbox is used for printed documents (such as an IFSP), not for masking information on the panel/screen.</p> <p>If 'Yes,' select/tick the checkbox. If 'No,' leave blank.</p> |
| EI Child ID | Enter the child's assigned an early intervention identification number. |
| Start Date | Manually enter the start date or use the calendar picker (invoked by clicking this field) to add the family member's information. |
| End Date | Manually enter the end date or use the calendar picker (invoked by clicking this field) to use the family member's information. |
| *Family Status | Use this drop-down and select the appropriate family member status (Active or Inactive) from the list. |
| Sex | Use this drop-down and select the appropriate family member sex from the list. |
| Salutation | Use this drop-down and select the appropriate salutation from the list. |
| *First Name | Enter the family member's first name. |
| Middle Name | If applicable, enter the family member's middle name. |
| *Last Name | Enter the family member's last name. |
| Suffix | Use this drop-down and select the appropriate suffix from the list. |
| Birth Date | Manually enter the family member's date of birth or use the calendar picker (invoked by clicking this field) for the family member. |
| Email Address | Enter the family member's email address. |
| *Contact Type | Use this drop-down and select the appropriate contact type from the list. |
| Marital Status | Use this drop-down and select the family member's appropriate marital status from the list. |
| *Dominant Language | Use this drop-down and select the family member's dominant language from the list. |
| <input type="checkbox"/> Multilingual (If checked, please complete Secondary) | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |

| FIELD | DESCRIPTION |
|---|---|
| Language selection(s)) | |
| <input type="checkbox"/> Interpreter Needed | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| <input type="checkbox"/> Written Translation Needed | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Education | Use this drop-down and select the highest level of education completed by the family member. |
| <input type="checkbox"/> Provide Transportation | If 'Yes,' select/tick the checkbox. If 'No,' leave blank |
| Household Size | Use this drop-down and select the household size where the family member resides. |
| <input type="checkbox"/> Permission To Always Contact | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Notes | Enter any relevant notes about the family member that would be helpful. |
| <input checked="" type="checkbox"/> Insures Child | <p>If 'Yes,' select/tick the checkbox. If 'No,' leave blank.</p> <p>(i) To populate the <u>Insurance Policy Panel</u>, you must check this box if the family member is the insurance policy holder.</p>  |

8.1.4.2.1.1.1.3 Phone Numbers Grid/Table

(i) See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|--------|--|
| Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|---------------------|--|
| Phone Number | This column displays the family member's contact number. |
| Is Primary | This column displays the family member's primary contact number. |
| Type | This column displays the type of number (e.g., cell phone). |
| Ok To Text | This column displays 'Yes' or 'No' for the family member to receive text messages. |
| Notes | This column displays any relevant notes regarding contacting the family member. |

| BUTTON | DESCRIPTION |
|--------|---|
| Add | To add a family member's phone number, click this button. When clicked, the Add Guardian Phone Number popup panel appears (shown below). |
| Edit | To edit a family member's phone number, click this button. When clicked, the Edit Guardian Phone Number popup panel appears (not shown). (i) The fields and functionality are the same for the 'Add Guardian Phone Number' popup panel. |

8.1.4.2.1.1.1.3.1 Add Guardian Phone Number Popup Panel

The screenshot shows a modal window titled "Add Guardian Phone Number". It contains the following fields:

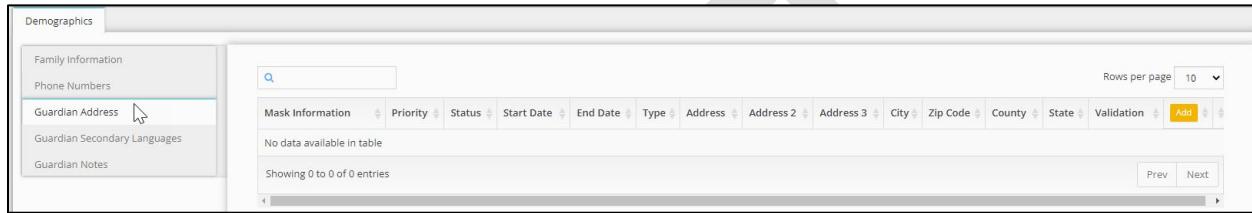
- *Phone Number Type: A dropdown menu with the placeholder "-- Select --".
- *Phone Number: A text input field.
- Is Primary Phone?: A checkbox.
- Okay To Text?: A dropdown menu with the placeholder "Select".
- Notes: A text area.
- Submit: A blue button.
- Cancel: A white button.

(i) An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|--|---|
| *Phone Number Type | Use this drop-down and select the appropriate phone number type (e.g., Cell, etc.). (i) Selecting "Cell" enables the 'Okay to Text?' drop-down list ('Yes,' 'No,' or 'Unknown.'). |
| *Phone Number | Enter the family member's primary contact number. |
| <input type="checkbox"/> Is Primary Phone? | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Okay To Text | Use this drop-down and select Yes or No for the family member to receive text messages. (i) This field is only enabled when selecting "Cell" for the 'Phone Number Type.' |
| Notes | Enter any relevant notes regarding contacting the family member. |

| BUTTON | DESCRIPTION |
|--|---|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-HUB database, and the record updates the Phone Numbers panel. |
| Cancel  | To cancel your entry, click this button. Your data does not save in the Add Guardian Phone Number popup panel, which then closes. |

8.1.4.2.1.1.1.4 Guardian Address Grid/Table



 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| COLUMN | DESCRIPTION |
|-------------------------|---|
| Mask Information | This column indicates if the guardian's information is masked on printed documents. |
| Priority | This column displays the guardian's contact info as to its priority level. |
| Status | This column displays the guardian's address status (Active or Inactive). |
| Start Date | This column displays the recorded start date for the guardian's residence. |
| End Date | This column displays the end date (e.g., no longer place of residence). |
| Type | This column displays the type of residence. |
| Address | This column displays the guardian's address. |
| Address 2 | If applicable, this column displays the guardian's address 2. |
| Address 3 | If applicable, this column displays the guardian's address 3. |
| City | This column displays the guardian's city of residence. |
| Zip Code | This column displays the zip code per the guardian's address. |

| COLUMN | DESCRIPTION |
|------------|---|
| County | This column displays the guardian's county of residence. |
| State | This column displays the guardian's state of residence. |
| Validation | This column displays that the guardian's address was validated. |

| BUTTON | DESCRIPTION |
|--|---|
| Add  | To add a guardian address, click this button. The Add Guardian Address popup panel appears (shown below). |

8.1.4.2.1.1.1.4.1 Add Guardian Address Popup Panel

Add Guardian Address X

Mask Information

*Address Type
-- Select --

*Address Status
-- Select --

*Start Date
06/06/2022

End Date

List of Child Addresses - Select a Child Address -

Receive Family Outcome Survey?

*Address Priority
-- Select --

*Address Line 1

Address Line 2

Address Line 3

*Zip Code

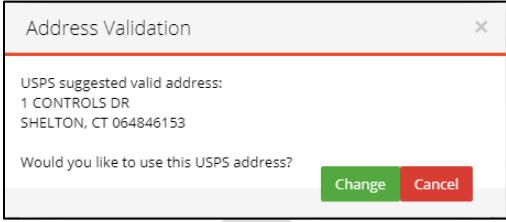
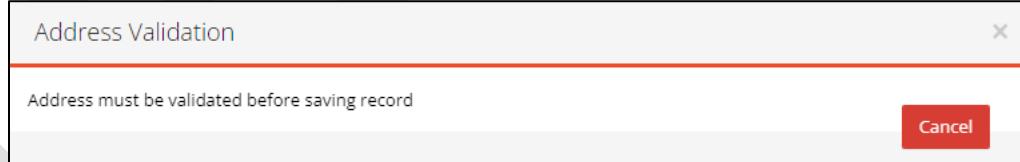
City/Town

Address State
-- Select --

Address County
-- Select --

 An asterisk (*) adjacent to a field name/label means it is a required field that you must populate.

| FIELD | DESCRIPTION |
|---|---|
| <input type="checkbox"/> Mask Information | <p> The mask information checkbox is used for printed documents (such as an IFSP), not for masking information on the panel/screen.</p> <p>If 'Yes,' select/tick the checkbox. If 'No,' leave blank.</p> |
| *Address Type | Use the drop-down and select the appropriate address type from the list. |
| *Address Status | Use the drop-down and select the appropriate address status from the list. |
| *Start Date | Enter the start date or use the calendar picker (invoked by clicking this field) to add the guardian's current address. |
| End Date | Enter the end date or use the calendar picker (invoked by clicking this field) for the guardian's address. |
| List of Child Addresses | Use the drop-down and select the child's address associated with the guardian. |
| <input type="checkbox"/> Receive Family Outcome Survey? | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| *Address Priority | Use the drop-down and select the appropriate address priority (e.g., Primary or Secondary) associated with the guardian from the list. |
| Address Line 1 | Enter the guardian's address. |
| Address Line 2 | If applicable, enter the guardian's address 2. |
| Address Line 3 | If applicable, enter the guardian's address 3. |
| *Zip Code | Enter the zip code for the guardian's residence. |
| City/Town | Enter the guardian's city/town of residence. |
| Address State | Enter the guardian's state of residence. |
| Address County | Enter the guardian's county of residence. |
| <input type="checkbox"/> Address is Validated | <p>Select/tick this checkbox if you're certain this is the correct address or AFTER running the system' Address Validate' check (shown below).</p> <p> After clicking the 'Change' button (shown below), the system automatically selects this checkbox.</p> |

| BUTTON | DESCRIPTION |
|---|--|
| Address Validate  | To validate the guardian's address, click this button. When clicked, the system prompts a panel (example below), and you have the option to correct/edit (click Change) or to leave your entry as is (click Cancel).  i The address validation function automatically replaces the previously entered Employer Address if the 'Change' button is selected/clicked. |
| City / State / Zip Lookup  | You must select/click the 'Address Validate' button to save the address information. Note you do not have to select/click the 'City/State/Zip Lookup' button to validate; however, you must enter values in the city, state, and zip fields. Alternatively, you can enter the zip and select/click the 'City/State/Zip Lookup' button to populate the remaining fields. Then select/click the 'Address Validate' button. |
| Submit  | After filling out the Add Guardian Address popup panel, click this button. When clicked, the system runs a validation (e.g., required fields populated), and the information saves in the EI-Hub database. You must click/run the system's 'Address Validate" before submitting/saving your Guardian Address information. If you do not, the Address Validation message pad appears (shown below).  |
| Cancel  | To cancel your entry, click this button. Your data does not save in the Add Guardian Address popup panel, which then closes. |

8.1.4.2.1.1.1.5 Guardian Secondary Languages Grid/Table

| Demographics | | | |
|--|----------|-------------|--------|
| <input type="text" value="Secondary Language"/> Rows per page | | | |
| Secondary Language | Added By | Modified By | Add |
| Spanish | bhogi | bhogi | Delete |
| Showing 1 to 1 of 1 entries | | | |
| Prev Next | | | |

(i) See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| COLUMN | DESCRIPTION |
|--------------------|--|
| Secondary Language | This column displays the guardian's secondary language, if applicable. |
| Added By | This column displays the system user's name, who added the record. |
| Modified By | This column displays the system user's name who modified the record. |

| BUTTON | DESCRIPTION |
|--------|---|
| Add | To add a secondary guardian language, click this button. When clicked, the Add Guardian Secondary Language popup panel appears (shown below). |

8.1.4.2.1.1.1.5.1 Add Guardian Secondary Language Popup Panel

Add Guardian Secondary Language

*Language

-- Select --

Submit
Cancel

Step / Action

1. Use the ***Language** drop-down and select the guardian's appropriate secondary language from the list.
2. Click the **Submit** button to accept and close the popup panel.
3. Or click **Cancel**, and the changes will not save.

(i) If you select “Other” for a Secondary Language, a second field (“Other Language” appears (example below). Use this field to enter the name of a second language not available in the Secondary Language drop-down list.

8.1.4.2.1.1.1.6 Family Member Notes Panel

| FIELD | DESCRIPTION |
|-------|---|
| Notes | Enter any additional comments relevant to the guardian’s contact information and/or demographics. |

8.1.4.2.1.1.2 Parent Consent Detail Report Grid/Table

(i) Use this grid/table to capture different consent forms required for Early Intervention (EI). After families complete the consent forms, Service Coordinators can record that information in the system. The signed forms can also be uploaded into the system (Upload Document functionality on the 'Parent Consent Detail Panel' below).

(i) See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section Home Tab Controllers; selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|---|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|--------------------------------|--|
| Consent Form Name | This column displays the name of the consent form. |
| Parent Or Guardian Name | This column displays the name of the parent or guardian. |
| Provider Name | This column displays the name of the provider. |
| PHI Access | This column displays if consent was given to obtain and/or release PHI. |
| Parent Consent | This column displays whether the parent or guardian is consenting to this form. |
| Consent Date | This column displays the date the parent or guardian provided consent. |
| Revocation Date | If applicable, this column displays the date the parent or guardian revoked their consent. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|--|---|
| Add Parental Consent Detail  Add Parental Consent Detail | To add Parental Consent Detail information, click this button. When clicked, the Parent Consent Detail Panel appears (shown below). |

8.1.4.2.1.1.2.1 Parent Consent Detail Panel

The screenshot shows a web-based form titled "Parental Consent Detail". On the left, there's a sidebar with a tree view showing "Parental Consent Detail" expanded, and "Parent Consent Detail Panel" selected. The main area contains several input fields: "Consent Form Name" (dropdown), "Parent/Guardian" (dropdown), "Provider Name" (dropdown), "PHI Access" (dropdown), "Communicates" (dropdown), "Provider Email from Record" (text input), "Additional Email" (text input), "Secondary Email" (text input), an "Upload Document" button, "Provider Name Other" (text input), "Provider Agreement Type Other" (text input), and three checkboxes: "Parental Consent" (unchecked), "Consent Date" (text input), and "Revocation Date" (text input). A "Submit" button is located at the bottom right.

An asterisk (*) adjacent to a field name/label means it is a required field that you must populate.

| FIELD | DESCRIPTION |
|----------------------------|--|
| *Consent Form Name | Use this drop-down and select the appropriate consent form name from the list. |
| *Parent/Guardian | Use this drop-down and select the appropriate parent or guardian from the list. |
| Provider Name | Use this drop-down and select the appropriate provider from the list. |
| PHI Access | Use this drop-down and select the appropriate entry from the list. |
| Communicates | Use this drop-down and select the appropriate entry from the list. |
| Provider Email from Record | If available, the provider's email from the report displays here. |
| Additional Email | Enter an alternate (additional) email address for the provider. |
| Secondary Email | Enter a secondary email address for the provider. |
| Provider Name Other | If the rendering provider's name is not available in the dropdown list, enter it here. |

| FIELD | DESCRIPTION |
|---|---|
| Provider Agreement Type Other | If Provider Name Other is selected, complete this field as needed. If other, enter the provider agreement type. |
| <input type="checkbox"/> Parental Consent | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Consent Date | Manually enter the consent date or use the calendar picker (invoked by clicking this field). |
| Revocation Date | Manually enter the revocation date or use the calendar picker (invoked by clicking this field). |

| BUTTON | DESCRIPTION |
|--|---|
| Upload Document <input type="button" value="Upload Document"/> | To upload documentation, click this button to activate the 'Upload Document' popup panel (shown below). |

8.1.4.2.1.1.2.2 Upload Document Popup Panel

The screenshot shows a modal dialog titled "Upload Document". Inside, there's a label "Document Area : Family", a required field "Document Type" with a dropdown menu showing "--- Select ---", a required field "Document Name" with a text input field, a "Choose File" button with the text "No file chosen", and a "Notes" text area. At the bottom right are "Upload" and "Cancel" buttons.

(i) An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|---|--|
| *Document Type | Use this drop-down and select the appropriate document type (Family Expenses or Payroll Stubs) from the list. |
| *Document Name | Enter the name of the document uploaded. |
| Choose File <input type="button" value="Choose File"/> | To upload your file into the EI-Hub database, click this button. When clicked, your PC's web browser (e.g., MS Edge) prompts an "Open" window; navigate to where your document/file resides, click on the file (highlighted), and click the Open button on the window. The name of your file name should read adjacent to the 'Choose File' button. |
| Notes | Use this textbox to enter relevant notes about your document file uploaded into the system. |

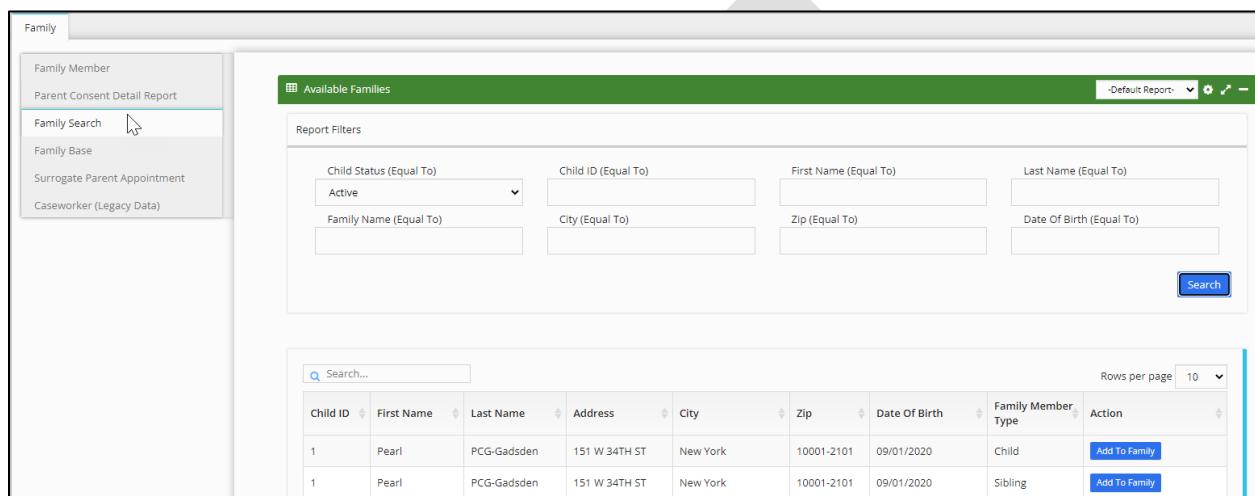
| BUTTON | DESCRIPTION |
|---|---|
| Upload <input type="button" value="Upload"/> | Click this button after populating the Upload Document popup panel (mentioned above). When clicked, your file uploads into the EI-HUB database. |
| Cancel <input type="button" value="Cancel"/> | To cancel the action for uploading a file, click this button. When clicked, the Upload Document popup panel closes. |

| BUTTON | DESCRIPTION |
|---|---|
| Submit <input type="button" value="Submit"/> | To save your entry, click this button. When clicked, the system keeps the information in the EI-HUB database, and the record updates the Parental Consent Detail panel. |

8.1.4.2.1.1.3 Family Search – Report Filters Panel and Results Grid/Table

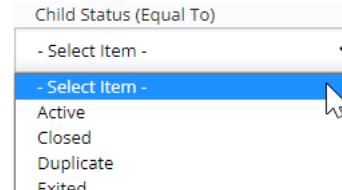
 Use the report filters panel to search the system to check if the current child has siblings that were previously or are currently enrolled in the EIP. You can attach a sibling to the current child's record if found. The sibling will then appear in the current child's family member list. When an edit is needed with other family members, you can use this grid/table to access the family member's record. However, any linked child's information must be changed/updated in the linked child's original record.

 It is not required to enter all search elements. However, you must enter at least one search element.



| Child ID | First Name | Last Name | Address | City | Zip | Date Of Birth | Family Member Type | Action |
|----------|------------|-------------|---------------|----------|------------|---------------|--------------------|--------------------------------|
| 1 | Pearl | PCG-Gadsden | 151 W 34TH ST | New York | 10001-2101 | 09/01/2020 | Child | <button>Add To Family</button> |
| 1 | Pearl | PCG-Gadsden | 151 W 34TH ST | New York | 10001-2101 | 09/01/2020 | Sibling | <button>Add To Family</button> |

Report Filters

| FIELD | DESCRIPTION |
|--------------------------------|---|
| Child Status (Equal To) | Use this drop-down and select the appropriate child status from the list.  |
| Child ID (Equal To) | Enter the child's EI identification number. |
| First Name (Equal To) | Enter the child's first name of the potential sibling. |
| Last Name (Equal To) | Enter the child's last name of the potential sibling. |
| Family Name (Equal To) | Enter the family's last name. |

| FIELD | DESCRIPTION |
|--------------------------|---|
| City (Equal To) | Enter the name of the city where the child resides. |
| Zip (Equal To) | Enter the zip code of the city where the child resides. |
| Date Of Birth (Equal To) | Enter the date of birth of the potential sibling. |

| BUTTON | DESCRIPTION |
|--|---|
| Search <input type="button" value="Search"/> | <p>After populating the above fields or leaving the fields blank to show all possible siblings already in the system, click this button. The data results appear in the grid/table below.</p> <p>(i) All possible matches will appear in the search by leaving all fields blank or only filling in one field (e.g., first name). To make it more manageable and have fewer search results, the more information entered in the fields, the better.</p> |

Available Families grid/table

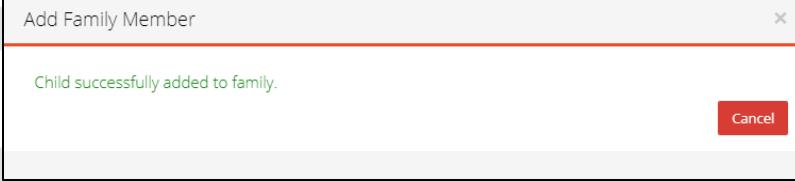
Your search results will provide (or show) the following information.

(i) See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|--|--|
| Search | To search the results grid/table for a specific record, enter a keyword into this field. |
| Show Results <input type="button" value="10"/> | Use this drop-down to control the number of results you want to appear per page in the grid/table. Click the drop-down arrow and select the appropriate amount from the list. (i) The system default shows '10.' |

| COLUMN | DESCRIPTION |
|----------|---|
| Child ID | This column displays the child's /sibling's early intervention identification number. |

| COLUMN | DESCRIPTION |
|---------------------------|--|
| First Name | This column displays the child/sibling's first name. |
| Last Name | This column displays the child/sibling's last name. |
| Address | This column displays the child/sibling's address. |
| City | This column displays the name of the city where the child/sibling resides. |
| Zip | This column displays the city's zip code where the child/sibling resides. |
| Date Of Birth | This column displays the child/sibling's date of birth. |
| Family Member Type | This column displays the family member type (e.g., child, sibling). |

| BUTTON | DESCRIPTION |
|--|---|
| Add To Family  | To add a family member to a child, click this button adjacent to a Child ID record/row. When clicked, the Add Family Member popup panel appears (shown below).  1. Click the 'X' to accept and close the popup panel. 2. Click Cancel not to save the change. |

8.1.4.2.1.1.4 Family Base Panel

The screenshot shows a software interface titled 'Family'. On the left is a sidebar with links: 'Family Member', 'Parent Consent Detail Report', 'Family Search' (which is underlined), 'Family Base' (with a cursor icon over it), 'Surrogate Parent Appointment', and 'Caseworker'. The main area has three input fields: 'Start Date' (07/20/2020), 'End Date' (empty), and 'Family Last Name' (295HopesChild). A blue 'Submit' button is at the bottom right.

| FIELD | DESCRIPTION |
|-------------------------|--|
| Start Date | The system populates this field with the current date. To edit the date, manually enter the start date or use the calendar picker (clicking this field). |
| End Date | Enter the end date or use the calendar picker (clicking this field). |
| Family Last Name | Enter the child's family's last name. |

| BUTTON | DESCRIPTION |
|--|---|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database. |

8.1.4.2.1.1.5 Surrogate Parent Appointment Grid/Table

 This grid/table reflects the history of the Surrogate Parent(s) that the Early Intervention Official has appointed.

"(d) The Early Intervention Official shall appoint a qualified surrogate parent for any eligible child or potentially eligible child when the child is a ward of the state or when the child is not a ward of the state, but his or her parents by birth or adoption are unavailable, after reasonable efforts to facilitate their participation. Such appointment shall be made within 30 days after making a determination of the child's need for a surrogate parent."

"(e) The early intervention official shall allow an available birth parent or adoptive parent to voluntarily appoint a surrogate parent upon written consent."

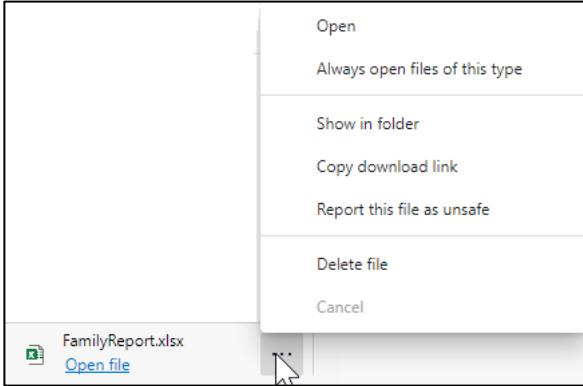
Source: [Section 69-4.16 - Parents, persons in parental relation, and surrogate parents](#)

(i) The grid doesn't populate until the Surrogate Appointment panel is completed and the parent is appointed.

(i) See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section Home Tab Controllers; selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|---------------|--|
| Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|-----------------------------------|--|
| Surrogate Parent Appointed | This column displays the name of the surrogate parent appointed. |
| Foster Care Agency | This column displays the name of the foster care agency, if applicable. |
| Appointment Reason | This column displays the appointment reason for the surrogate parent. |
| Appointment Effective Date | This column displays the surrogate parent's appointment effective date. |
| Removal Reason | If applicable, this column displays the current surrogate parent's appointment removal reason. |
| Removal Effective Date | This column displays the surrogate parent's removal effective date. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|--|---|
| Excel  | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet. An example of MS Edge browser downloading the excel file and options (shown below):</p>  <p>To see your results in excel, click Open file.</p> <p>i The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system.</p> |
| Add Surrogate Parent Appointment  | <p>Click this button to add a 'Surrogate Parent Appointment' for the child. When clicked, the Surrogate Parent Appointment tab/panel appears (shown below).</p> |

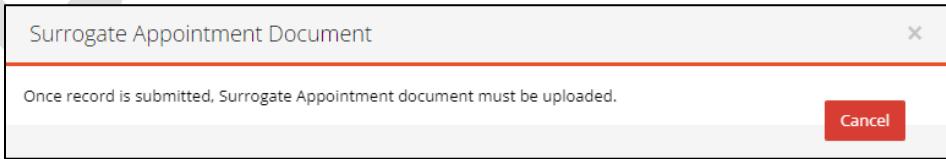
8.1.4.2.1.1.5.1 Surrogate Parent Appointment Tab/Panel

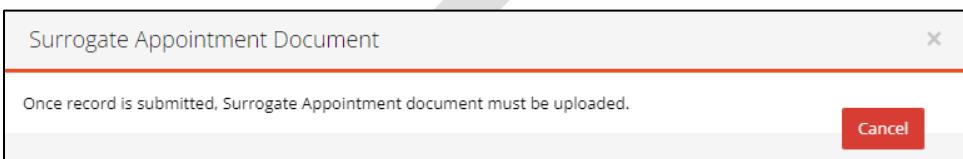
 You must first enter the surrogate in the Family Member panel before entering any information in this tab/panel. Once the Early Intervention Official Designee (EIO/D) provides documentation indicating the appointment of a surrogate parent, the service coordinator will record the information and upload the appropriate signed documents here. If the surrogate parent appointment has ended, the service coordinator would also make a note of that in this panel and again upload the appropriate signed documents.





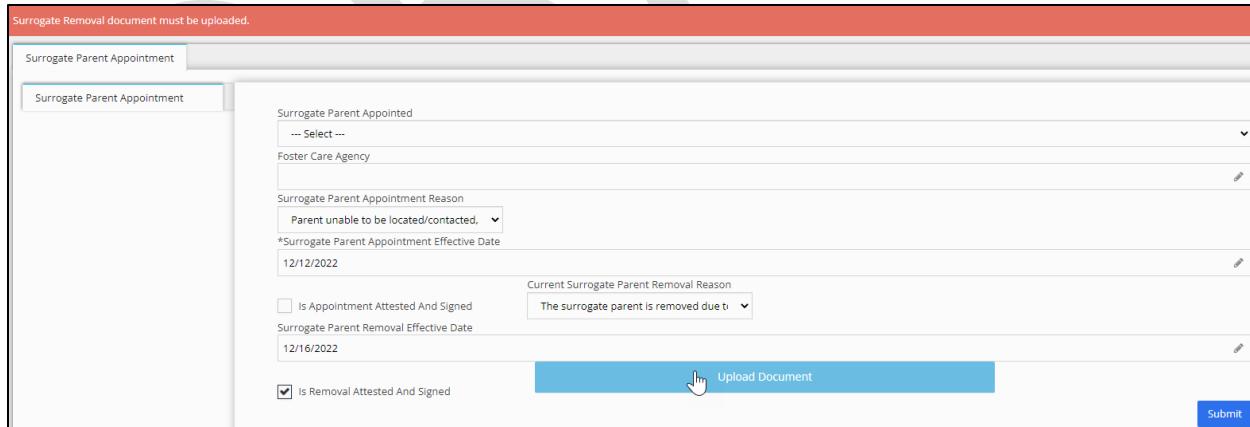
An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|--|--|
| Surrogate Parent Appointed | To appoint (add) a surrogate parent for a child, click this drop-down and select the appropriate surrogate parent. (i) If the Surrogate Parent Appointed drop-down list is blank, you need to add Surrogates to a child's family (Family tab > Family Member grid > Add Family Member > Demographics Tab and populate the associated panels) before appearing in this field. |
| Foster Care Agency | Enter the name of the foster care agency where the child resides, if applicable. (i) This could be Foster Care Agency that manages the Foster Care placement, but the child doesn't live at the agency. |
| Surrogate Parent Appointment Reason | To appoint a surrogate parent for a child, click this drop-down and select the appropriate reason from the list. (i) To find more information regarding the appointment of surrogate parents, please see Early Intervention Regulations Section 69-4.16, Parents, persons in parental relation, and surrogate parents . |
| *Surrogate Parent Appointment Effective Date | Enter the appointed effective date manually or use the calendar picker (invoked by clicking this field). |
| <input type="checkbox"/> Is Appointment Attested And Signed | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. (i) Selecting this checkbox, the user is prompted by a message pad/box as follows:  |
| Current Surrogate Parent Removal Reason | To remove an existing surrogate parent for a child, click this drop-down and select the appropriate reason from the list. |

| FIELD | DESCRIPTION |
|---|--|
| Surrogate Parent Removal Effective Date | Enter the effective removal date manually or use the calendar picker (invoked by clicking this field). |
| <input type="checkbox"/> Is Remove Attested And Signed | If 'Yes,' select/tick the checkbox. If 'No,' leave blank.  Selecting this checkbox, the user is prompted by a message pad/box as follows:  |

| BUTTON | DESCRIPTION |
|--|---|
| Submit  | To save your entry, click this button. After the panel is completed and submitted, the electronic record is created. At that point, the Upload button is available. |

8.1.4.2.1.1.5.2 Surrogate Parent Appointment Panel w/Upload



Surrogate Removal document must be uploaded.

Surrogate Parent Appointment

Surrogate Parent Appointed
... Select ...

Foster Care Agency

Surrogate Parent Appointment Reason
Parent unable to be located/contacted.

*Surrogate Parent Appointment Effective Date
12/12/2022

Is Appointment Attested And Signed

Current Surrogate Parent Removal Reason
The surrogate parent is removed due to

Surrogate Parent Removal Effective Date
12/16/2022

Is Removal Attested And Signed

Upload Document

Submit

| BUTTON | DESCRIPTION |
|---|---|
| Upload Document  | To upload documentation, click this button to activate the 'Document Upload' popup panel (shown below). |

8.1.4.2.1.1.5.2.1 Document Upload Popup Panel

Document Area : Surrogate

*Document Type

--- Select ---

*Document Name

Choose File No file chosen

Notes

Upload Cancel

(i) An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|--------------------------------|---|
| *Document Type | Use this drop-down and select the appropriate document type (Surrogate Appointed or Surrogate Removal) from the list. |
| *Document Name | Enter the name of the document uploaded. |
| Choose File Choose File | To upload your file into the EI-Hub database, click this button. When clicked, your PC's web browser (e.g., MS Edge) prompts an "Open" window; navigate to where your document/file resides, click on the file (highlighted), and click the Open button on the window. The name of your file name should read adjacent to the 'Choose File' button. |
| Notes | Use this textbox to enter relevant notes about your document file uploaded into the system. |

| BUTTON | DESCRIPTION |
|----------------------|---|
| Upload Upload | Click this button after populating the Upload Document popup panel (mentioned above). When clicked, your file uploads into the EI-HUB database. |

| BUTTON | DESCRIPTION |
|---|---|
| Cancel  | To cancel the action for uploading a file, click this button. When clicked, the Upload Document popup panel closes. |

| BUTTON | DESCRIPTION |
|---|--|
| Submit  | After uploading your document, select/click this button to save your upload entry. |

8.1.4.2.1.1.6 Caseworker Grid/Table

 This grid/table captures legacy data from NYEIS and can only be viewed.

 New information regarding Caseworkers is added to the Family Member panel where the Family Member Type is 'Caseworker.' The system does not tie the Caseworkers listed in the 'Caseworker (Legacy Data)' panel to any dropdowns. Instead, the Caseworker listed in the Family Member Type field will connect to any logic associated with that field. (e.g., if another field under the child pulls from this list).

 When compiling information regarding the child's team, the service coordinator must include any caseworkers involved with the child as a family member on the Family Member panel.



 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|-------------------------|--|
| Caseworker Name | This column displays the caseworker's full name. |
| Caseworker Phone | This column displays the caseworker's phone number. |
| Caseworker Email | This column displays the caseworker's email address. |

| BUTTON | DESCRIPTION |
|--|--|
| Excel  | Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet. An example of MS Edge browser downloading the excel file and options (shown below): To see your results in excel, click Open file .  The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system. |
| Add Case Workers  | To add a 'Caseworker' for the child, click this button. The Case Worker tab/panel appears (shown below). |

8.1.4.2.1.1.6.1 Caseworker Tab/Panel



| FIELD | DESCRIPTION |
|-------------------------|---------------------------------------|
| Caseworker Email | Enter the caseworker's email address. |
| Caseworker Name | Enter the caseworker's full name. |
| Caseworker Phone | Enter the caseworker's phone number. |

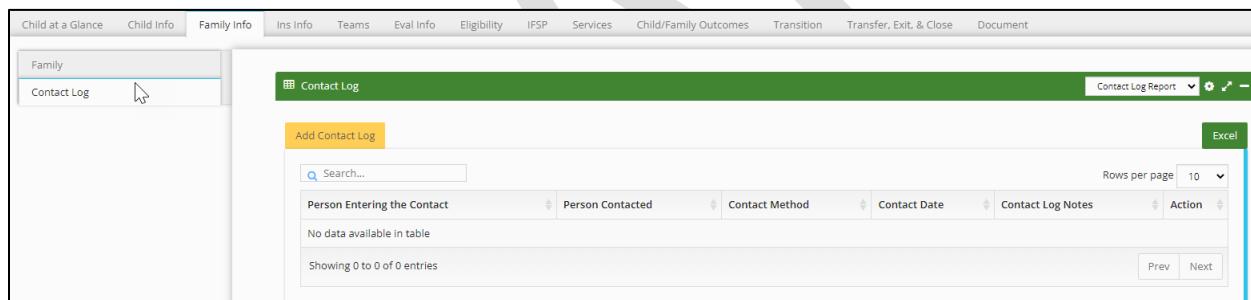
| BUTTON | DESCRIPTION |
|--|---|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database. |

8.1.4.2.1.1.7 Contact Log Grid/Table

 This is an optional panel that service coordinators (SC) can use to record contacts with families or other providers/individuals involved with the child. Information added to the Contact Log may be helpful not only to the service coordinator but also to all other users involved with the child. For example, the Service Coordinator (SC) called the parent and left a message asking for an update about how their child is doing in the new daycare setting. The SC documents why they called the parent in the Contact Log, and all other EI-Hub users can see this information and address it further with the family as needed.

 Any user with access to the child's record could enter a contact log.

 This information is not linked to billing; if you need to bill for something, you will still need to complete a service log.



 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| COLUMN | DESCRIPTION |
|------------------------------------|---|
| Person Entering the Contact | This column displays the name of the person who made contact. |
| Person Contacted | This column displays the name of the person contacted. |
| Contact Method | This column displays the contact method. |
| Contact Date | This column displays the contact date. |

| COLUMN | DESCRIPTION |
|-------------------|--|
| Contact Log Notes | If applicable, this column displays any relevant notes about the person contacted. |

| BUTTON | DESCRIPTION |
|--|--|
| Add Contact Log  | To add a contact log to a child, click this button. Then, the Contact Log tab/panel appears (shown below). |

8.1.4.2.1.1.7.1 Contact Log Tab/Panel



The screenshot shows a 'Contact Log' form window. At the top left is a 'Contact Log' tab. Below it are several input fields: 'Contact Date' (with a calendar icon), 'Person Entering the Contact' (containing 'paross1'), 'Person Contacted' (with a dropdown arrow), 'Contact Method' (a dropdown menu showing '--- Select ---'), and 'Contact Log Notes' (a large text area). In the bottom right corner of the form area is a blue 'Submit' button.

 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|------------------------------|---|
| *Contact Date | Enter the contact date manually or use the calendar picker (clicking this field). |
| Person Entering the Contact: | A read-only field displays the username logged in the EI-Hub Case Management module. |
| *Person Contacted | Enter the name of the person contacted. |
| *Contact Method | Use this drop-down and select the appropriate contact method (e.g., phone, etc.) from the list. |
| *Contact Log Notes | Enter any relevant notes about the person contacted. |

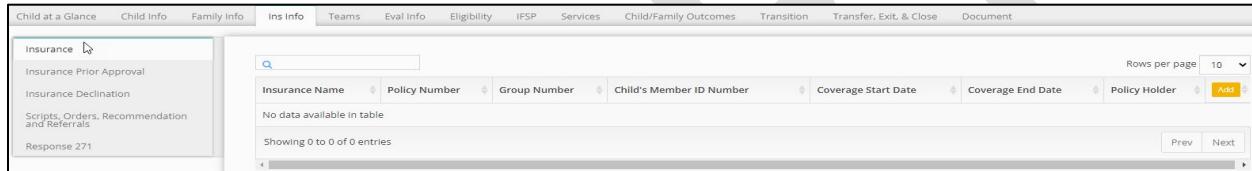
| BUTTON | DESCRIPTION |
|--|---|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-HUB database, and the record updates the Contact Log panel. |

8.1.4.3 Insurance Info Tab

 This section is for entering the child's insurance information for billing/claiming purposes.

8.1.4.3.1 Insurance Grid/Table

 Complete this section during the intake process. Gather all information about the child's insurance coverage; this includes commercial and Medicaid insurance.



 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|---------------------------------|--|
| Insurance Name | This column displays the name of the insurance company/carrier for the child. |
| Policy Number | This column displays the insurance policy number for the child. |
| Group Number | This column displays the Group Number found on the child's health insurance ID card, unique to the insurance company. |
| Child's Member ID Number | This column displays the child's health insurance member ID number, allowing healthcare providers and staff to verify coverage and arrange payment for services. You can also use the child's member ID number to look up specific members and answer questions about claims and benefits. |

| COLUMN | DESCRIPTION |
|----------------------------|---|
| Coverage Start Date | This column displays the child's coverage start date. |
| Coverage End Date | This column displays the child's coverage end date. |
| Policy Holder | <p>This column displays the policyholder (e.g., child, parent, guardian) for the insurance used for a claim.</p> <p>(i) Remember, in the 'Family Member Panel' section of this guide, the policyholder must be entered as a member of the child's family on the 'Family Info Tab.' In addition, the checkbox "Insures Child" must also be selected/ticked for the name to be listed in the dropdown.</p> |

| BUTTON | DESCRIPTION |
|--|---|
| Add  | To add insurance for the child, click this button. Then, the Insurance tab with two panels, the Insurance Policy and Insurance Verification , appear (shown below). |

8.1.4.3.1.1 Insurance Policy Panel

 Use this panel to collect relevant information on a child's insurance coverage. Service Coordinators (SCs) must review insurance information quarterly with the parent/family. Therefore, SCs must verify the insurance every 3-months, and the notice comes up every three (3) months in the EI-Hub.

(i) Service Coordinators will receive a pop-up reminder every three (3) months to verify insurance information.

Insurance

| | |
|---|---|
| <input type="button" value="Insurance Policy"/> <input type="button" value="Insurance Verification"/> | Information Updated: <input type="text" value="10/12/2022"/> *Date Entered: <input type="text" value="10/12/2022"/> *Insurance Type: <input type="text" value="... Select ..."/> *Insurance Carrier: <input type="text" value="... Select ..."/> Relationship to Child: <input type="text" value="... Select ..."/> Insurance Carrier Address 1: <input type="text"/> Insurance Carrier Address 2: <input type="text"/> Insurance Carrier State: <input type="text"/> Insurance Carrier Zip: <input type="text"/> Insurance Carrier Phone Number: <input type="text"/> Insurance Plan/Policy Name: <input type="text"/> <input type="checkbox"/> State Regulated? Policy Number/Medicaid CIN: <input type="text"/> <input type="checkbox"/> CHIP Group Number: <input type="text"/> Child's Member ID Number, if different from Policy Holder: <input type="text"/> Policy Holder, if different from child: <input type="text" value="... Select ..."/> Does the policy holder work for a school district?: <input type="text" value="... Select ..."/> School District: <input type="text" value="... Select ..."/> Policy Holder Address: <input type="text"/> Policy Holder City: <input type="text"/> Policy Holder DOB: <input type="text"/> *Coverage Start Date: <input type="text" value="... Select ..."/> Coverage End Date: <input type="text"/> Policy Holder's Employer (if applicable): <input type="text"/> Policy Holder's Employer Address 1: <input type="text"/> Policy Holder's Employer Address 2: <input type="text"/> Policy Holder's Employer City: <input type="text"/> Employer State: <input type="text" value="... Select ..."/> Policy Holder's Employer Zip: <input type="text"/> Occupation: <input type="text"/> Notes: <input type="text"/> |
| <input type="button" value="Address Validate"/> <input type="button" value="City / State / Zip Lookup"/> | |
| *Insurance Policy Priority: <input type="text" value="... Select ..."/> Does the back of insurance card, indicate that some claims should be submitted to another Payer?: <input type="text" value="... Select ..."/> Other Insurance Payer Name: <input type="text" value="... Select ..."/> Other Insurance Payer Service Types: <input type="text" value="... Select ... X"/> Possible Preauthorization Needed for other Payer?: <input type="text" value="... Select ..."/> | |
| <input type="button" value="Submit"/> | |



An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

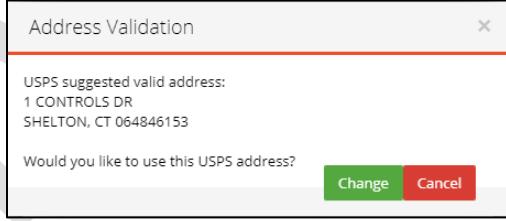
| FIELD | DESCRIPTION |
|---------------------|---|
| Information Updated | This read-only field displays when the child's insurance was last updated. |
| *Date Entered | The system auto-populates this field with the current date. Enter the date manually or use the calendar picker (clicking this field). |

| FIELD | DESCRIPTION |
|---|--|
| *Insurance Type | Use this drop-down to select the appropriate insurance type (e.g., Medicaid, Commercial, etc.) from the list for the child. |
| *Insurance Carrier | Use this drop-down to select the appropriate insurance carrier from the list for the child. Once selected, the following fields populate Insurance Carrier Address 1 , Insurance Carrier Address 2 (if applicable), Insurance Carrier City , Insurance Carrier State , Insurance Carrier Zip , Insurance Carrier Phone , Insurance Plan/Policy Name , and Policy Number/Medicaid CIN . |
| Relationship to Child | Use this drop-down to select the appropriate relationship (e.g., Mother, Foster Mother, etc.) to the child from the list. |
| Insurance Carrier Address 1 | ⓧ This field is read-only and is prepopulated by the system if the information is available. |
| Insurance Carrier Address 2 | ⓧ This field is read-only and is prepopulated by the system if the information is available. |
| Insurance Carrier City | ⓧ This field is read-only and is prepopulated by the system if the information is available. |
| Insurance Carrier State | ⓧ This field is read-only and is prepopulated by the system if the information is available. |
| Insurance Carrier Zip | ⓧ This field is read-only and is prepopulated by the system if the information is available. |
| Insurance Carrier Phone Number | ⓧ This field is read-only and is prepopulated by the system if the information is available. |
| Insurance Plan/Policy Name | Enter the name of the Insurance Plan/Policy. |
| <input type="checkbox"/> State Regulated? | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| <input type="checkbox"/> CHIP | If 'Yes,' select/tick the checkbox. If 'No,' leave blank.  Children's Health Insurance Program (CHIP) is an “insurance program that provides low-cost health coverage to children in families that earn too much money to qualify for Medicaid but not enough to buy private insurance. In some states, CHIP covers pregnant women.” |

| FIELD | DESCRIPTION |
|--|--|
| Policy Number/Medicaid CIN | Enter the child's insurance policy number or Medicaid Client Identification Number. (CIN).  Medicaid issues a unique CIN, or identification number, to each enrollee in the state program. |
| Group Number | Enter the Group Number. The Group Number found on the policyholder's health insurance ID card is unique to the insurance company. |
| Child's Member ID Number, if different from Policy Holder | If different from the child's Policy Holder number, enter the child's member identification number of the child's health insurance plan; this unique ID number allows healthcare providers and their staff to verify coverage and arrange payment for child services provided. You can also use the child's member ID number to look up specific members and answer questions about claims and benefits. |
| Policy Holder, if different from child | If the Policy Holder is different from the child, use this drop-down to select the appropriate Policy Holder from the list for the child. |
| Policy Holder Address | 🚫 This field is read-only and is prepopulated by the system if the information is available. |
| Does the policy holder work for a school district? | Use this drop-down to select the appropriate answer ('Yes' or 'No'). |
| School District | If the policyholder works for a school district, use the drop-down and select the appropriate school district from the list. |
| Policy Holder Address | 🚫 This field is read-only and is prepopulated by the system if the information is available. |
| Policy Holder Address 2 | 🚫 This field is read-only and is prepopulated by the system if the information is available. |
| Policy Holder City | 🚫 This field is read-only and is prepopulated by the system if the information is available. |
| Policy Holder State | 🚫 This field is read-only and is prepopulated by the system if the information is available. |
| Policy Holder Zip | 🚫 This field is read-only and is prepopulated by the system if the information is available. |
| Policy Holder DOB | Enter the Policy Holder's date of birth (DOB) or use the calendar picker (clicking this field). |

| FIELD | DESCRIPTION |
|---|---|
| *Policy Status | Use this drop-down and select the appropriate policy status ('Active' or 'Inactive') from the list. |
| *Coverage Start Date | Manually enter the start date for insurance carrier coverage or use the calendar picker (invoked by clicking this field) for the insured child. |
| Coverage End Date | Manually enter the end date for insurance carrier coverage or use the calendar picker (invoked by clicking this field) for the insured child. |
| Policy Holder's Employer (if applicable) | If applicable, enter the name of the policyholder's employer (if applicable) for the insured child. |
| Policy Holder's Employer Address 1 | Enter the policyholder's employer address. |
| Policy Holder's Employer Address 2 | If applicable, enter the policyholder's employer address. |
| Policy Holder's Employer City | Enter the policyholder's employer city. |
| Employer State | Use this drop-down and select the policyholder's employer state from the list. |
| Policy Holder's Employer Zip | Enter the policyholder's employer zip code. |
| Occupation | Enter the policyholder's occupation. |
| Notes | Enter any important notes in the textbox about the insurance policy for the child that needs to be known. |
| *Insurance Policy Priority | <p>Use the drop-down and select the appropriate insurance policy priority (Primary, Secondary, or Tertiary) from the list.</p> <p>(i) If the child has more than one insurance plan, you can add all applicable insurance plans to the child's record in the EI-Hub.</p> |
| Does the back of the insurance card indicate that some claims should be submitted to another Payer? | Use this drop-down to select the appropriate answer ('Yes' or 'No'). |
| Other Insurance Payer Name | If another insurance payer name exists, use the drop-down and select the appropriate name from the list. |

| FIELD | DESCRIPTION |
|---|---|
| Other Insurance Payer Service Types | <p>To add other insurance payer service types, begin typing (type ahead) in this field to activate a drop-down search list and select the appropriate diagnosis.</p> <p>(i) You can enter multiple payer insurance types as follows.</p> <p>Step /Action</p> <ol style="list-style-type: none"> 1. Begin typing in the 'Other Insurance Payer Service Types' field (type ahead invokes) and select the appropriate payer insurance type from the drop-down list. 2. After your selection appears in the "Other Insurance Payer Service Types" field, add another payer insurance type, and repeat step # 1. |
| Possible Preauthorization Needed for other Payer? | Use this drop-down to select the appropriate answer ('Yes' or 'No'). |

| BUTTON | DESCRIPTION |
|--|--|
| Address Validate  | <p>To validate a Policy Holder Employer address, click this button. When clicked, the system prompts a panel (example below) with the option to correct/edit the address (click Change) or to leave your entry as is (click Cancel).</p>  <p>(i) The address validation function automatically replaces the previously entered Employer Address if the 'Change' button is selected/clicked.</p> |
| City / State / Zip Lookup  | You must select/click the 'Address Validate' button to save the address information. Note you do not have to select/click the 'City/State/Zip Lookup' button to validate; however, you must enter values in the city, state, and zip fields. Alternatively, you can enter the zip and select/click the 'City/State/Zip Lookup' button to populate the remaining fields. Then select/click the 'Address Validate' button. |

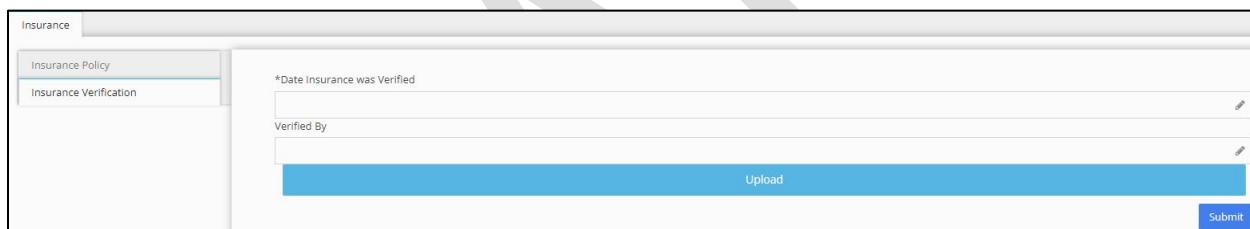
| BUTTON | DESCRIPTION |
|---|--|
| Submit  | After filling out the Insurance Policy panel, click this button. When clicked, the system runs a validation (e.g., required fields populated) and saves the information in the EI-Hub database. |

8.1.4.3.1.2 Insurance Verification Panel

 Use to indicate the day you verified the insurance coverage. After entering a new date, the system resets the tracker. Insurance validation can be done anytime during the next three (3) months. The tracker will update (reset) based on the last entered date.

 The pop-up reminder triggers every three (3) months allowing you to validate a child's insurance. You must complete this process for each insurance policy the child is covered.

 This action is not a hard stop and will not prohibit the user from working in the EI-Hub.



The screenshot shows the 'Insurance' tab selected. Under the 'Insurance Policy' section, there is a 'Date Insurance was Verified' field with an asterisk (*) indicating it is required. Below it is a 'Verified By' field. At the bottom of the panel is a large blue horizontal bar labeled 'Upload' with a small edit icon. In the bottom right corner of the panel is a blue 'Submit' button.

 An asterisk (*) adjacent to a field name/label means it is a required field that you must populate.

| FIELD | DESCRIPTION |
|------------------------------|---|
| *Date Insurance was Verified | Manually enter the date when the insurance was verified using the calendar picker (invoked by clicking this field). |
| Verified By | Enter the name of the person who verified the insurance |

| BUTTON | DESCRIPTION |
|---|---|
| Upload  | To upload the accommodating file, click this button. Then, the "Upload File" panel appears (shown below). |

8.1.4.3.1.2.1 Upload File Popup

Upload File

Document Area : Insurance

*Document Type

--- Select ---

*Document Name

No file chosen

Notes

| FIELD | DESCRIPTION |
|----------------|--|
| *Document Type | Use this drop-down and select the appropriate document type (e.g., Medical Records, etc.) from the list. |
| *Document Name | Enter the name of the document uploaded. |
| Choose File | To upload your file into the EI-Hub database, click this button. When clicked, your PC's web browser (e.g., MS Edge) prompts an "Open" window; navigate to where your document/file resides, click on the file (highlighted), and click the Open button on the window. The name of your file name should read adjacent to the 'Choose File' button. |
| Notes | Use this textbox to enter relevant notes about your document file uploaded into the system. |

| BUTTON | DESCRIPTION |
|---|---|
| Upload  Upload | Click this button after populating the Upload File panel (mentioned above). When clicked, your file uploads into the EI-Hub database. |
| Cancel  Cancel | To cancel the action for uploading a file, click this button. When clicked, the Upload File panel closes. |
| Submit  Submit | After filling out the Insurance Verification, click this button. When clicked, the system runs a validation (e.g., required fields populated), and the information saves in the EI-Hub database.  If the system validation fails, the system prompts with a message. |

8.1.4.3.2 Insurance Prior Approval Grid/Table

 Some insurance plans require prior authorization before providing services for the child. Record the approval in this panel. This panel is not required if the insurance does not require prior approval.

 According to recent guidance, for dates of service on and after January 1, 2022, prior authorization is no longer needed.



 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|----------------------------|---|
| Prior Authorization Number | This column displays the child's prior authorization number obtained from the insurance company. |
| From Date | This column displays the start date of the prior authorization for the child. |
| To Date | This column displays the date when the prior authorization ends. |
| Description | This column displays a summary of the information contained in the prior authorization for the child. For example, some plans only require a prior auth for certain services. |
| Service Type | This column displays the child's service type (e.g., Assistive Technology, etc.). |
| Units | This column displays the number of sessions/units of service authorized for the child on the prior authorization. |

| BUTTON | DESCRIPTION |
|--|--|
| Add  | Click this button to add an 'insurance prior approval' record for the child. When clicked, the "Add Insurance Prior Approval" popup panel appears (shown below). |

8.1.4.3.2.1 Add Insurance Prior Approval Popup Panel

Add Insurance Prior Approval

| | |
|---|--|
| Prior Authorization Number | <input type="text"/> |
| From Date | <input type="text"/> |
| To Date | <input type="text"/> |
| Description | <input type="text"/> |
| Service Type | <input type="text"/> --- Select --- <input type="button" value="▼"/> |
| Units | <input type="text"/> |
| <input type="button" value="Submit"/> <input type="button" value="Cancel"/> | |

| FIELD | DESCRIPTION |
|----------------------------|---|
| Prior Authorization Number | Enter the prior authorization number for the child. |
| From Date | Manually enter the start date or use the calendar picker (invoked by clicking this field) the child's prior authorization begins. |
| To Date | When the child's prior authorization ends, manually enter the end date or use the calendar picker (invoked by clicking this field). |
| Description | Enter a summary of the prior authorization information for the child. |
| Service Type | Use this drop-down and select the appropriate service type (e.g., Assistive Technology, etc.) from the list. |
| Units | <p>Enter the appropriate number of units (sessions/number of DME items) authorized in the prior authorization.</p> <p>(i) A unit of insurance represents a fixed monetary value of insurance coverage. For example, prior authorizations are service authorized for ten visits (sessions), one motorized wheelchair, etc. Commonly dollar amounts are not mentioned.</p> |

| BUTTON | DESCRIPTION |
|--|---|
| Submit  | To save your entry, click this button. When clicked, the system saves the information in the EI-Hub database and the information updates in the Insurance Prior Approval panel. |
| Cancel  | To cancel your entry, click this button, and the data does not save in the Add Insurance Prior Approval popup panel, which then closes. |

8.1.4.3.3 Insurance Declaration Grid/Table

 Use this grid/table and popup panel to document if the parent attested that they do not have insurance or Medicaid.

 **Parents must provide their insurance information or attest that they have no insurance.**



| Parent Attested | Date Declined | Family Member | Start Date | End Date | Add |
|--|---------------|---------------|------------|----------|-----|
| Parent Attested that they have no Insurance/Medicaid | | | | | |

 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|---|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|---|---|
| Parent Attested that they have no Insurance/Medicaid | This column displays ('Yes' or 'No') if the parent/guardian attested that they have no insurance or Medicaid coverage for the child. |
| Date Declined | This column displays the date the child's family member attested that they do not have insurance/Medicaid. |
| Family Member | This column displays the name of the child's family member who provided the information. |
| Start Date | This column displays the start date or uses the calendar picker (invoked by clicking this field) for the child's insurance declination. |
| End Date | This column displays the end date or uses the calendar picker (invoked by clicking this field) for the child's insurance declination. |

| BUTTON | DESCRIPTION |
|---|---|
| Add  | Click this button to add an 'insurance declination record for the child. When clicked, the "Add Insurance Declination" popup panel appears (shown below). |

8.1.4.3.3.1 Add Insurance Declination Popup Panel

Add Insurance Declination X

*Parent Attested that they have no Insurance/Medicaid

*Date Declined
05/13/2021

*Start Date

End Date

*Family Member
--- Select ---

Submit **Cancel**

(i) An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|--|---|
| <input type="checkbox"/> *Parent Attested that they have no Insurance/Medicaid | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| *Date Declined | Manually enter the date the parent attested that they do not have insurance or use the calendar picker (invoked by clicking this field). (i) The system defaults to your PC's current date. |
| *Start Date | Manually enter the start date or use the calendar picker (invoked by clicking this field) for the child's insurance declination. |
| End Date | If applicable, manually enter the end date or use the calendar picker (invoked by clicking this field) for the child's insurance declination. |

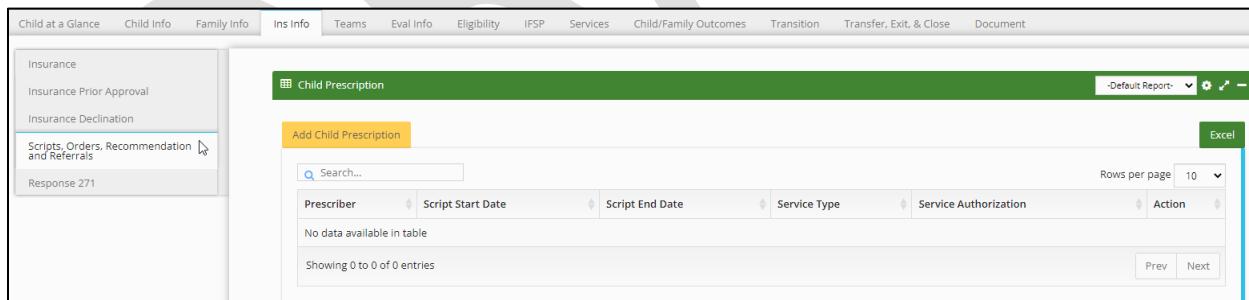
| FIELD | DESCRIPTION |
|----------------|--|
| *Family Member | Use this drop-down and select the name of the child's family member who provided this information from the drop-down list. |

| BUTTON | DESCRIPTION |
|---|---|
| Submit  | To save your entry, click this button. When clicked, the system saves the information in the EI-Hub database, and the record updates the Insurance Declination panel. |
| Cancel  | To cancel your entry, click this button. The system will not save the data in the Add Insurance Declination popup panel, which then closes. |

8.1.4.3.4 Scripts, Orders, Recommendation, and Referrals Grid/Table

 Written prescriptions and orders are still required after the Covered Lives implementation for services indicated in the OPRA matrix issued in 2015 by NYS DOH. Therefore, all prescriptions and orders are captured in this grid/table.

 For more info on Covered Lives, please refer to <https://support.eibilling.com/KB/a459/communication-to-early-intervention-ei-stakeholders.aspx>.



The screenshot shows the 'Child Prescription' grid. The left sidebar has a 'Scripts, Orders, Recommendation and Referrals' link under the 'Insurance' section. The main area has a green header bar with the title 'Child Prescription'. Below it is a search bar labeled 'Add Child Prescription'. The table has columns for 'Prescriber', 'Script Start Date', 'Script End Date', 'Service Type', 'Service Authorization', and 'Action'. A green 'Excel' button is in the top right corner. At the bottom, there are buttons for 'Prev' and 'Next'.

 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|-----------------------|---|
| Prescriber | This column displays the name of the prescriber. |
| Script Start Date | This column displays the script (prescription) start date for the child. |
| Script End Date | This column displays the script (prescription) end date for the child. |
| Service Type | This column displays the service type the prescriber recommends for the child. |
| Service Authorization | <p>This column displays the service authorization for the child's script.</p> <p>(i) The service authorization number entered needs to match (be the service) indicated in the script.</p> |

| BUTTON | DESCRIPTION |
|---|---|
| Add Child Prescription  | To add a child prescription, click this button. When clicked, the Scripts, Orders, Recommendation, and Referrals tab/panel appears (shown below). |

8.1.4.3.4.1 Scripts, Orders, Recommendation, and Referrals Panel

 Use this panel to enter pertinent information regarding the prescription/order(s) obtained to support service provision to the child. Prescriptions can be attached to this panel to assist with billing and claiming. Again, written prescriptions and orders are required after the Covered Lives implementation for services indicated in the OPRA matrix issued in 2015 by NYS DOH.

(i) Prescriptions sometimes are obtained before the service is added to the IFSP. You can also add prescriptions later once they have been received.

Scripts, Orders, Recommendation and Referrals

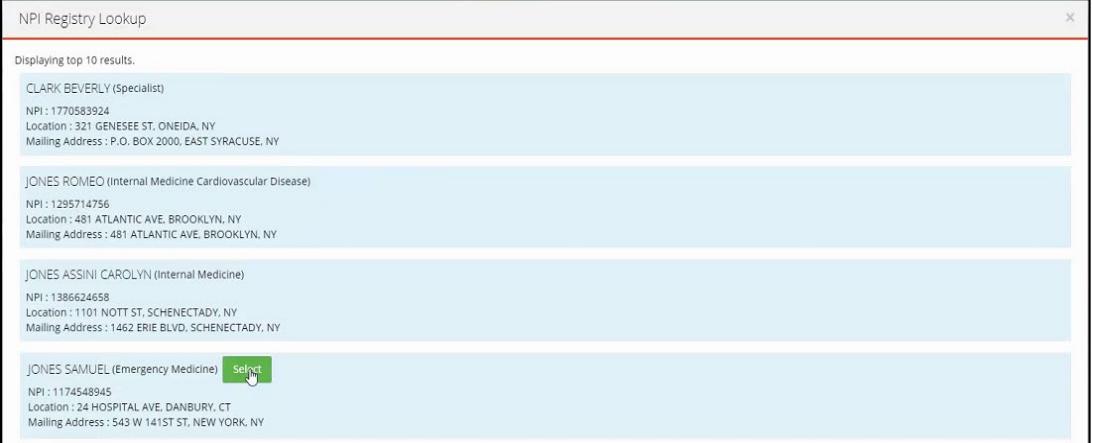
NPI Lookup

| | | | |
|----------------------------|---------------------------|---------------------------|------|
| NPI | Prescriber's First Name | Prescriber's Last Name | City |
| State | ... Select ... | | |
| Search | | | |
| *Prescriber Name | | | |
| *NPI Number | | | |
| *Taxonomy Code | *Prescription Provided By | Service Prescribed | |
| *Script Start Date | | *Script End Date | |
| Prescription Received Date | | Prescriber Signature Date | |
| Active Service Information | | | |
| ... Select ... | | Authorization | |
| Service Type | | Notes | |
| Upload | | | |
| Submit | | | |

i When using the NPI Registry Lookup, you must enter at least two fields into your search. For example, if you only enter "NY" in the search criteria and click search, you'll receive an error popup message (example below). However, if you add additional info in the search criteria (e.g, "Albany" in the 'City' field) and select/click the Search button, you will receive an NPI Registry Lookup popup panel to select an entry from.

i The best practice is to enter as many search criteria as possible; the NPI Registry Lookup result list will be shorter or more targeted. As a result, it would help you save time in many cases.



| SEARCH FIELD | DESCRIPTION |
|--------------------------------|---|
| NPI | To narrow your search, enter the child's prescriber's 10-position all-numeric identification number; this number identifies the Early Intervention Provider Agency doctors, physicians, and medical groups. An example of the NPI Registry Lookup panel is below. |
| |  |
| Prescriber's First Name | To narrow your search, enter the prescriber's first name. |
| Prescriber's Last Name | To narrow your search, enter the prescriber's last name. |
| City | To narrow your search location, enter the city name and the state where the prescriber's office/clinic. |
| State | To narrow your search location, use this drop-down and select the state where the prescriber's office/clinic. |

| FIELD | DESCRIPTION |
|----------------------------------|---|
| * Prescriber Name | ⓘ This field is read-only and prepopulated by the NPI Registry Lookup above. |
| *NPI Number | ⓘ This field is read-only and prepopulated by the NPI Registry Lookup above. |
| *Taxonomy Code | ⓘ This field is read-only and prepopulated by the NPI Registry Lookup above. |
| *Prescription Provided By | Use this drop-down and select the appropriate medical provider (e.g., Physician, etc.) from the list. |
| Service Prescribed | Use this drop-down and select the appropriate service prescribed (e.g., Audiology, etc.) from the list. |

| FIELD | DESCRIPTION |
|----------------------------|--|
| *Script Start Date | When the prescription starts, manually enter the start date or use the calendar picker (invoked by clicking this field). |
| *Script End Date | When the prescription ends, manually enter the end date or use the calendar picker (invoked by clicking this field). |
| Prescription Received Date | Enter the date or use the calendar picker (invoked by clicking this field) when the prescription was received. |
| Prescriber Signature Date | Manually enter the date or use the calendar picker (invoked by clicking this field) when the prescriber has signed the prescription. |
| Active Service Information | Use this drop-down and select the appropriate active service information from the list. (i) Only select one service per script/order and choose the one that aligns with the prescription dates. |
| Service Type | ⓘ This field is read-only and populates once you select the Active Service Information. |
| Authorization | ⓘ This field is read-only and populates once you select the Active Service Information. |
| Notes | Enter any relevant notes about the prescription/order(s) obtained for the child. |

| BUTTON | DESCRIPTION |
|---|--|
| Upload  | To upload the accommodating file, click this button. Then, the "Upload File" panel appears (shown below). (i) The 'Upload' button bar appears in the "Scripts, Orders, Recommendation, and Referrals Panel" when editing an existing record in the "Scripts, Orders, Recommendations and Referrals Grid/Table" (Child Prescription). |

8.1.4.3.4.1.1 Document Upload Popup

Document Area : Prescription
*Document Type

Medical Records

Allowed File Formats: *.pdf, *.jpg, *.jpeg, *.png, *.doc, *.docx,

Document Name

Choose File No file chosen

Notes

Upload Cancel

(i) An asterisk (*) adjacent to a field name/label means it is a required field that you must populate.

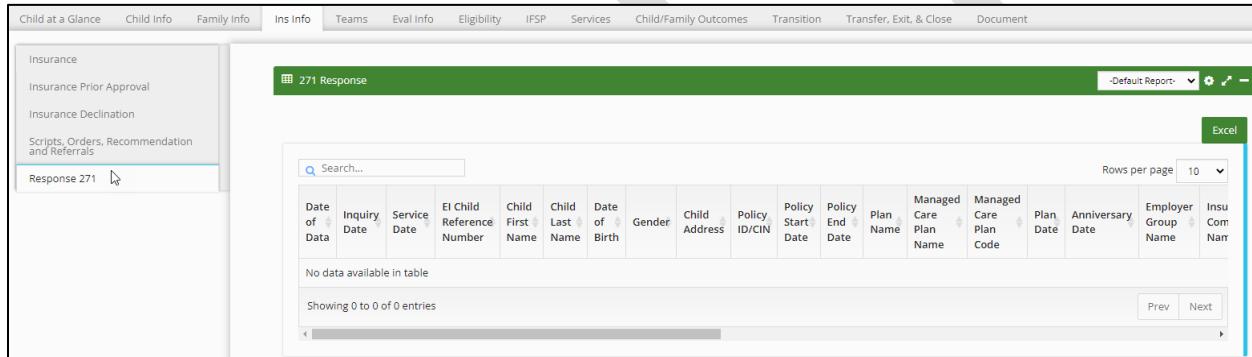
| FIELD | DESCRIPTION |
|--|--|
| Document Area: Prescription | Use this drop-down and select the appropriate document type (e.g., Medical Records, etc.) from the list. |
| *Document Type | |
| Document Name | Enter the name of the uploaded document. |
| Choose File <input type="button" value="Choose File"/> | To upload your file into the EI-Hub database, click this button. When clicked, your PC's web browser (e.g., MS Edge) prompts an "Open" window; navigate to where your document/file resides, click on the file (highlighted), and click the Open button on the window. The name of your file name should read adjacent to the 'Choose File' button. |
| Notes | Use this textbox to enter relevant notes about your uploaded document file into the system. |

| BUTTON | DESCRIPTION |
|--|---|
| Upload <input type="button" value="Upload"/> | Click this button after populating the Upload File panel (mentioned above). When clicked, your file uploads into the EI-Hub database. |

| BUTTON | DESCRIPTION |
|--|--|
| Cancel  | To cancel the action for uploading a file, click this button. When clicked, the Upload File panel closes. |
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Scripts/Orders/Recommendations/Referrals panel. |

8.1.4.3.5 Child 271 Response Grid/Table

 The Eligibility and Benefit 'Response 271' transaction is used to respond to a request inquiry about the health care eligibility and benefits associated with a subscriber or dependent. The grid/table below shows the child's insurance eligibility check results. The service coordinator should review it to determine if corrections to the insurance need to be made.



 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|---|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| BUTTON | DESCRIPTION |
|---|--|
| Excel  | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet.</p> <p>To see your results in excel, click Open.</p> <p>(i) Leaving all the Report Filters fields blank will show "all" results.</p> <p>(i) The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system.</p> |

| COLUMN | DESCRIPTION |
|----------------------------------|---|
| Date of Data | This column displays the date for the 271-response data. |
| Inquiry Date | This column displays the inquiry date. |
| Service Date | This column displays the service date for the child. |
| EI Child Reference Number | This column displays the Early Intervention (EI) child's identification number. |
| Child First Name | This column displays the child's first name. |
| Child Last Name | This column displays the child's last name. |
| Date of Birth | This column displays the child's date of birth. |
| Gender | This column displays the child's gender. |
| Child Address | This column displays the child's home address. |
| Policy ID/CIN | This column displays the child's insurance policy identification number/client identification number. |
| Policy Start Date | This column displays the child's insurance policy start date. |
| Policy End Date | This column displays the child's insurance policy end date. |
| Plan Name | This column displays the child's insurance plan name. |
| Managed Care Plan Name | This column displays the child's managed care plan name. |

| COLUMN | DESCRIPTION |
|--|--|
| Managed Care Plan Code | This column displays the child's managed care plan code. |
| Plan Date | This column displays the child's insurance plan date. |
| Anniversary Date | This column displays the child's insurance plan anniversary date. |
| Employer Group Name | If the child is covered under a parent/legal guardian insurance through an employer, the group name displays here. |
| Insurance Company Name | This column displays the name of the insurance company. |
| Insured/Policy Holder Name | This column displays the name of the insurance policy holder. |
| Insured/Policy Holder Date of Birth | This column displays the Insured/Policy Holder's date of birth. |
| Relationship to Insured/Policy Holder | This column displays the relationship (child, spouse) to the insured/policy holder. |
| Other Insurance Information | This column displays other insurance information if applicable. |
| County/Office Code | This column displays the state's county office code. |
| Recertification Month | This column displays the insurance recertification month. |
| Member's Medicaid Coverage. | This column displays the child's Medicaid coverage. |
| Eligibility Benefit Code | This column displays the child's eligibility benefit code. |
| Provider Network Participation | This column displays the name of the provider's network participation. |
| Insurance Type Code | This column displays the insurance type code. |
| Other Insurance Address | This column displays other insurance addresses if applicable. |
| Other Insurance ID | This column displays other insurance identification numbers if applicable. |
| Medicaid Exception Code | This column displays the Medicaid exception code. |

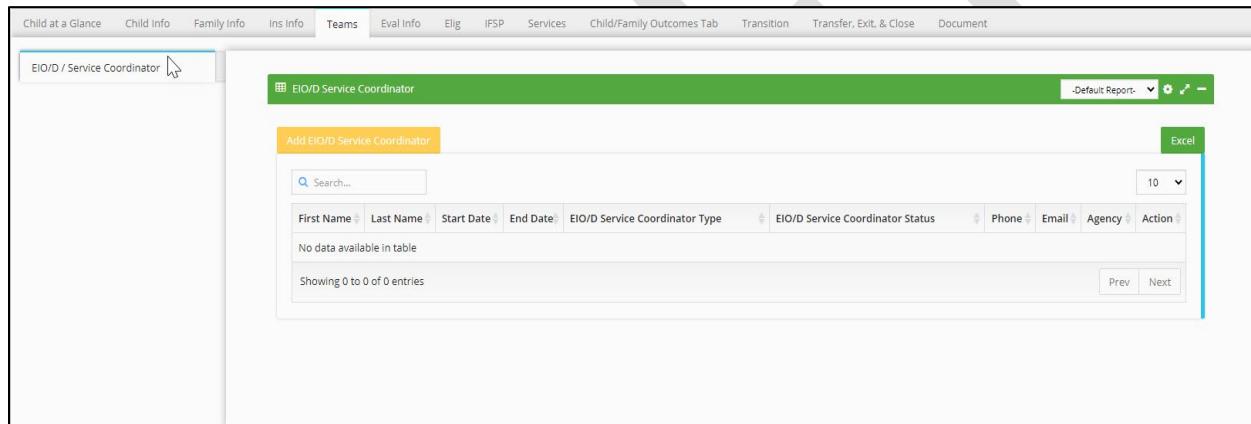
| COLUMN | DESCRIPTION |
|--------|--|
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

8.1.4.4 Teams Tab

 A Service Coordinator, Health Home Case Manager, or EIOD gains access to a child's record by being placed on the TEAMS panel. They retain access to the child through their dashboard, Children Assigned to Caseload until their assignment through TEAMS is end dated.

8.1.4.4.1 EIO/D / Service Coordinator Grid/Table

 This grid/table is an at-a-glance view of the Early Intervention Official/or Designee (EIO/D) and Service Coordinator (SC) assignments that occur when a referral is started.



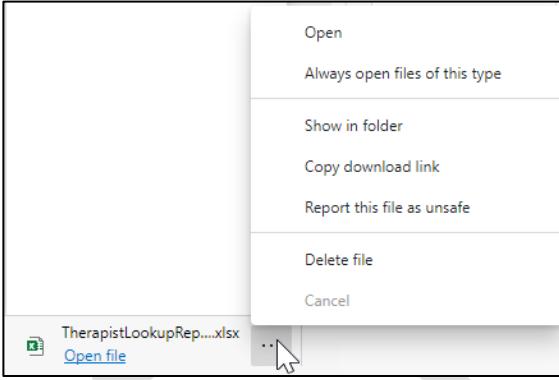
 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|------------|--|
| First Name | This column displays the EIO/D/Service Coordinator's first name. |
| Last Name | This column displays the EIO/D/Service Coordinator's last name. |

| COLUMN | DESCRIPTION |
|-----------------------------------|---|
| Start Date | This column displays the EIO/D/Service Coordinator's start date for providing services for the child. |
| End Date | This column displays the EIO/D/Service Coordinator's end date for providing services for the child. |
| Service Coordinator Type | This column displays the EIO/D/Service Coordinator Type providing services for the child. |
| Service Coordinator Status | This column displays the EIO/D/Service Coordinator Status providing services for the child. |
| Phone | This column displays the EIO/D/Service Coordinator's phone number. |
| Email | This column displays the EIO/D/Service Coordinator's email address. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|---|--|
| Add EIO/D Service Coordinator Add EIO/D Service Coordinator | To add an EIOD/Service Coordinator, click this button. The EIOD / Coordinator Team tab/panel appears when clicked (shown below). |

| BUTTON | DESCRIPTION |
|---|--|
| Excel  | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet. An example of MS Edge browser downloading the excel file and options (shown below):</p>  <p>To see your results in excel, click Open file.</p> <p>i Leaving all the Report Filters fields blank will show "all" results.</p> <p>i The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system.</p> |

8.1.4.4.1.1 EIO/D Coordinator Team Tab

8.1.4.4.1.1.1 EIO/D or Coordinator Entry Panel

Using this panel, the designated county staff adds the EIO/D (Early Intervention Official/or Designee) to which the referral was assigned. The EIO/D now needs to assign the ISC; this acts as a place to document the history of EIO/Ds and service coordinators.

The EIO/D or Initial SC will also need to complete the service authorization and record the Ongoing Service Coordinator in this panel.

EIOD / Coordinator Team

EIO/D or Coordinator Entry

*EIO/D or Coordinator Type
... Select ...

Agency Lookup

*EIO/D or Service Coordinator Lookup

First Name

Last Name

EIO/D or Service Coordinator Status
Active

*Start Date

End Date

Phone Number

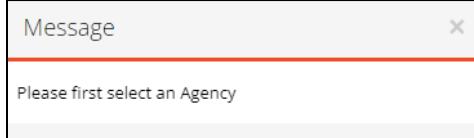
Email

Accept/Reject
... Select ...

Submit

An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|--------------------------------------|---|
| *EIO/D Service Coordinator Type | Use this drop-down and select the appropriate EIOD/Service Coordinator (SC) type (Ongoing, etc.) from the list. |
| Agency Lookup | Begin typing in this field to look up an agency and select from the drop-down list that appears. |
| *EIO/D or Service Coordinator Lookup | To search for an EIOD/SC, begin typing (type-ahead enables if the system finds an existing EIO/D or service coordinator in the EI-Hub database) in this field to activate a drop-down search list and select the appropriate individual. After your selection, the following fields below will populate if the individual was found during the system search. |

| FIELD | DESCRIPTION |
|----------------------------------|---|
| | <p>(i) You must populate the 'Agency Lookup' field before selecting/populating this field. If you attempt to, the system prompts the following message pad below.</p>  |
| First Name | Enter the EIOD/SC first name if this field is not auto-populated. |
| Last Name | Enter the EIOD/SC last name if this field is not auto-populated. |
| EIO/D Service Coordinator Status | This drop-down field is read-only. In addition, the system sets the EIOD/SC status to 'Active' or 'Inactive' as appropriate. |
| *Start Date | Manually enter the start date for the EIOD/SC or use the calendar picker (invoked by clicking this field). |
| End Date | Manually enter the end date for the EIOD/SC or use the calendar picker (invoked by clicking this field). <p>(i) For the Initial Service Coordinator (ISC), the 'End Date' must be no more than 45 days from the date of referral or the date before the Initial IFSP starts. Also, for a child not involved in a transfer, if an ISC changes, e.g., is out on maternity leave, no longer works for the agency, etc., the 45-day end date stays the same.</p> |
| Phone Number | Enter the EIOD/SC phone number if this field is not auto-populated. |
| Email | Enter the EIOD/SC email address if this field is not auto-populated. |
| Accept/Reject | Use this drop-down and select 'Accepted' or 'Rejected.' |

| BUTTON | DESCRIPTION |
|---|---|
| Submit <input type="button" value="Submit"/> | To save your entry, click this button. When clicked, the system saves the information in the EI-Hub database, and the record updates the EIOD/SC panel. |

| BUTTON | DESCRIPTION |
|---|--|
| Excel  | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet. An example is using the MS Edge browser to download the excel file and options. To see your results in excel, click Open file.</p> <p> Leaving all the Report Filters fields blank will show "all" results.</p> <p> The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system.</p> |

8.1.4.5 Eval Info Tab

 The Initial Service Coordinator (ISC) shall review all options for evaluation and screening with the parent from the list of approved evaluators, including location, types of evaluations performed, and settings for evaluations (e.g., home vs. evaluating agency site)

 **The process mentioned above only applies to the eligibility determination process; this would not apply to evaluations authorized after the child has an active IFSP (e.g., supplemental PT eval).**

- Before a Screening, Multidisciplinary Evaluation (MDE), or Multidisciplinary Assessment (MDA), the Initial Service Coordinator is responsible for securing the essential information and consent from parents necessary for participation in Early Intervention services.
- At the initial contact with the parent, the initial service coordinator shall ensure the parent has a copy of the “Early Intervention Steps: A Parent’s Guide to the Early Intervention Program” handbook, reviews the handbook with the parent, provides an overview of the early intervention system and services, discusses the role of the initial service coordinator, and reviews the parent’s rights, responsibilities, and entitlements under the program (69-4.7 (c) (1)). After the MDE has been completed, the MDE team reviews the evaluation results to determine the child’s eligibility status.
- A child will qualify for the Early Intervention Program (EIP) if the MDE or MDA results indicate the child has met the eligibility standards established by the New York State Department of Health (NYS DOH).
- If the child is not eligible for the EIP, referring the child to the At-Risk Developmental Surveillance track may be appropriate. If so, an At-Risk referral is made and entered into the EI-Hub. If it is determined that an At-Risk referral will not be made, the family is given resources and options for re-referral, and the case is closed in the system.
- When a child is determined to be eligible, the system generates Eligibility and Written Notice templates and prepopulates them with the child’s information.

- If the family wishes to accept EI services for their child, the appropriate consent forms are populated, generated, and signed, and an IFSP meeting is scheduled.

8.1.4.5.1 Evaluation Information Grid/Table

 Use this section to evaluate and enter a child's historical information.

After the referral, the next step is assigning the Initial Service Coordinator (ISC) through the 'Teams' tab and issuing the Service Authorization (SA) through the 'Service' tab.

Evaluations authorized post-eligibility determination are authorized through the Individualized Family Service Plan (IFSP) process. No matter the type, all evaluation SAs display in the evaluation authorization grid/table under Evaluation Information. Therefore, this is where users will enter their results.

The evaluation and eligibility determination for EI services must be completed in a timely manner to allow for the convening of the IFSP meeting within 45 days of the date that the EIO/D received the referral. If the child is found eligible, proceed to the IFSP; if not, either exit the child or exit and enter them into the At-Risk Program. This panel captures all efforts made to determine eligibility.

| Evaluation Information | | | | | | | | | | | | |
|---|--------------|----------------------|-----------------|---|--------------|-------------------|------------|----------|-----------------|----------------|---|--------|
| Add Evaluation Information | | | | | | | | | | | | |
| <input type="text" value="Search..."/> Rows per page: 10 | | | | | | | | | | | | |
| Request Received Date | Service Type | Authorization Status | Authorization # | Evaluator | Program Name | EVAL Meeting Date | Start Date | End Date | Assessment Date | Diagnosis Code | Waiver Review Needed | Action |
| Multi-disciplinary Evaluation & Assessment | Inactive | | | Multidisciplinary Evaluation | | 09/08/2022 | 09/15/2022 | | | No | Edit Delete | |
| Non-physician Supplemental Eval - Audiology | Active | A1130 | | Non-physician Supplemental Eval - Audiology | | 01/31/2022 | 07/14/2022 | | | No | Edit | |

 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|-----------------------|---|
| Request Received Date | This column displays the date the IFSP request was entered. |

| COLUMN | DESCRIPTION |
|-----------------------------|---|
| Service Type | This column displays the evaluation service type. |
| Authorization Status | This column displays the service authorization status ('Active' or 'Inactive'). |
| Authorization # | This column displays the service authorization number. The service authorization is generated once the EIOD has approved the service authorization. |
| Evaluator | This column displays the provider who will be evaluating the child. |
| EVAL Meeting Date | This column displays the date that the evaluation is completed. If, in the case of an evaluation that takes multiple days to complete, you may use the 'Child Detail Report' (see section 8.1.10.0) and capture the "Last Activity Log Date" for the child. ☞ The EI-Hub development team will remove this field for go-live reasons, for if the evaluation occurred on a single day, the Dates of Evaluation 'From' and 'To' fields would reflect the same date. |
| Start Date | This column displays the evaluation start date for the child. |
| End Date | This column displays the evaluation end date for the child. |
| Assessment Date | This column displays the child's assessment date. The assessment date automatically reflects in the grid/table based on the date entered in the 'Assessment Date' field when entering information under the 'Development Assessment' tab. |
| Diagnosis Code | This column displays the evaluation diagnosis code. |
| Waiver Review Needed | This column displays 'Yes' or 'No' if a waiver review is needed. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|--|---|
| Excel  | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet. An example is using the MS Edge browser to download the excel file and options.</p> <p>To see your results in excel, click Open file.</p> <p>(i) Leaving all the Report Filters fields blank will show "all" results.</p> <p>(i) The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the El-Hub system.</p> |
| Add Evaluation Information  | <p>To add an Evaluation, click this button. The Add Evaluation tab appears with four (4) multi-tabbed with multiple panels (shown below).</p> |
| Delete  | <p>Click this button adjacent to the appropriate evaluation information row/record to delete an evaluation information record.</p> <p>(i) The delete button will not appear on service authorizations that reflect an active status.</p> |
| Edit  | <p>To view or edit an 'Evaluation Information record for the child, click this button. The Evaluation page appears with four (4) multi-tabbed with multiple panels (shown below).</p> <p>(i) The fields and descriptions for editing the Evaluation Information panel are the same for adding; the Evaluation Information panel appears (ref. below).</p> |

8.1.4.5.1.1.1 Evaluation Tab

8.1.4.5.1.1.1.1 Evaluation Information Panel

☞ The Evaluation tab and the associated panels listed below appear when selecting/clicking the 'Add Evaluation Information' button on the Evaluation Information panel' (Eval Info tab).

ⓘ Once the Add Evaluation Information button is selected, the four (4) tabs shown in the screenshot (below) automatically appear (Evaluation, Screening, Development Assessment, and Supplemental Evaluation). The user has to select the appropriate tab based on the assessment methodology they are utilizing (e,g, supplemental eval, screening, etc.).

☞ Use the panel below to enter evaluation information. Upon EIOD approval, a service authorization for the evaluation is created.

The screenshot shows a software interface for managing evaluations. At the top, there are four tabs: Evaluation, Screening, Development Assessment, and Supplemental Evaluation. The 'Evaluation' tab is currently active. Below the tabs is a sidebar with three items: 'Evaluation Information', 'Evaluator Assignment', and 'Waiver'. The main area contains several input fields and dropdown menus. Required fields are marked with an asterisk (*). The fields include:

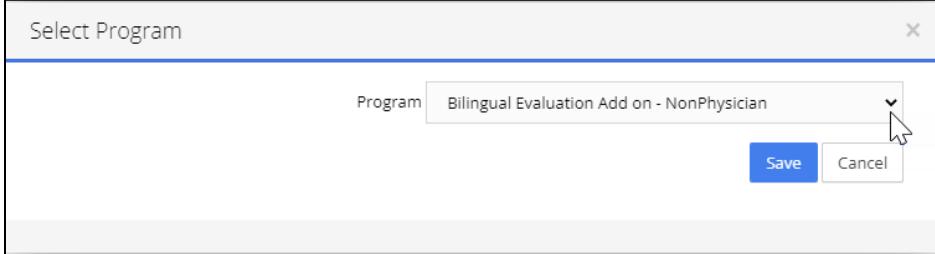
- *Pay Source: Schoharie
- *Program: ProgramName
- *Service Type: ... Select ...
- IFSP Type
- IFSP Status
- IFSP Start Date
- IFSP End Date
- *Dates of Evaluation From
- *Dates of Evaluation To
- Location Type: ... Select ...
- Agency Provider Sites: ... Select ...
- *Authorization Status: Inactive
- Waiver Review Needed
- Waiver Type
- Authorization Number
- EIO/D Section
- EIO/D Approval
- EIO/D Review Date

A blue 'Submit' button is located at the bottom right of the form.

ⓘ An asterisk (*) adjacent to a field name/label means it is a required field you must populate.



The 'IFSP Type,' 'IFSP Status,' and 'IFSP Start' and 'IFSP End Dates' fields below only populate when an Evaluation is authorized through an IFSP. The Service Authorization is created within the IFSP tab.

| FIELD | DESCRIPTION |
|---------------------------|--|
| *Pay Source | This read-only field automatically populates with the pay source. |
| *Program | Step / Action <ol style="list-style-type: none">1. Click the binoculars lookup button to search for a program. The "Select Program" popup dialog appears (example below).2. Next, select an available program and click the Save button to use the Program drop-down. To cancel this action, click the Cancel button.  |
| *Service Type | Use this drop-down and select the appropriate service type from the list. |
| IFSP Type | This field displays the IFSP type. |
| IFSP Status | This field displays the status of the IFSP. |
| IFSP Start Date | Manually enter the start date or use the calendar picker (invoked by clicking this field) for the child IFSP. |
| IFSP End Date | Manually enter the end date or use the calendar picker (invoked by clicking this field) for the child IFSP. |
| *Dates of Evaluation From | Manually enter the start ("From") date of the child's service authorization or use the calendar picker (invoked by clicking this field). |
| *Dates of Evaluation To | Manually enter the end ("To") date of the child's service authorization or use the calendar picker (invoked by clicking this field). |
| Location Type | Use this drop-down and select the appropriate location type from the list. If you select "Caregiver Home" as the 'Location Type,' the 'Agency Provider Sites' field below is disabled. Therefore, you can only populate the 'Agency Provider Sites' field if you select "Agency Provider Site" for the 'Location Type' field. |

| FIELD | DESCRIPTION |
|--|--|
| Agency Provider Sites | Use this drop-down and select the appropriate agency provider site from the list. |
| *Authorization Status | This field is read-only; it cannot be changed and does not change from Inactive to Active until the EIO/D has approved the authorization.  The Evaluation continues to appear on the EIO/D's dashboard, needing approval. |
| <input type="checkbox"/> Waiver Review Needed | A read-only checkbox, if selected, displays if a waiver review for the child is needed. |
| Waiver Type | If applicable, a read-only field displays the waiver type for the child. |
| Authorization Number | This read-only field populates the child's current authorization number. |

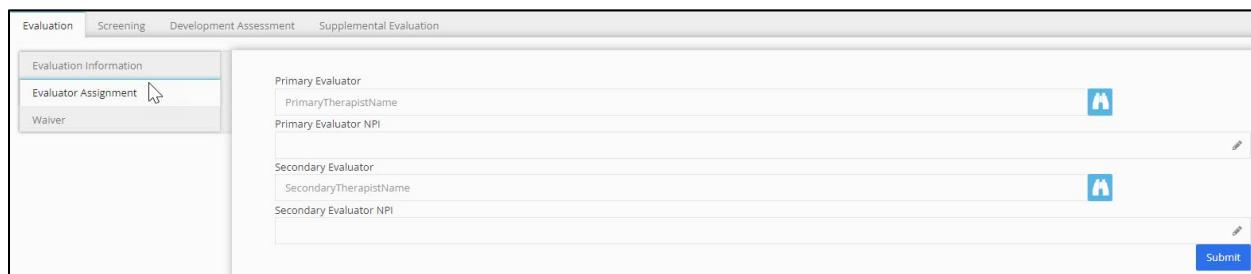
EIO/D Section

| FIELD | DESCRIPTION |
|--------------------------|---|
| EIO/D Approval | The Early Intervention Official Designee uses this drop-down and selects the appropriate response ('Approve' or 'Reject').  (i) Acceptance of the Service Authorization (SA) by the EIOD changes the SA type from Inactive to 'Active' and the Authorization status from Inactive to 'Active.' |
| EIO/D Review Date | A read-only field: when selecting the above (EIO/D Approval), the system populates this field with the current date. |

| BUTTON | DESCRIPTION |
|--|--|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Evaluation Information panel. |

8.1.4.5.1.1.1.2 Evaluator Assignment Panel

 The ISC uses this panel to assign a primary and secondary evaluator to enter a Service Authorization for a screening. A user with multiple roles, such as an EIOD, can enter this information.



The screenshot shows a software interface titled "Evaluation". The "Evaluator Assignment" tab is selected. On the left, there's a sidebar with "Evaluation Information", "Evaluator Assignment" (which is active), and "Waiver". The main area has two sections: "Primary Evaluator" and "Secondary Evaluator". Each section contains a dropdown menu labeled "PrimaryTherapistName" or "SecondaryTherapistName", a text input field for "Primary/Evaluator NPI" or "Secondary/Evaluator NPI", and a binoculars icon for searching. At the bottom right is a blue "Submit" button.

| FIELD | DESCRIPTION |
|--------------------------------|---|
| Primary Evaluator | Click the binoculars lookup button () to search for a program. When clicked, the “Select Primary Evaluator” popup dialog appears. Next, use the Primary Evaluator drop-down to select an available therapist and click the Save button. To cancel this action, click the Cancel button. |
| Primary Evaluator NPI | A read-only field displays the primary evaluator’s 10-position all-numeric identification number (NPI) assigned to uniquely identify Early Intervention Provider Agency doctors, physicians, and medical groups. |
| Secondary Evaluator | Click the binoculars lookup button () to search for a program. When clicked, the “Select Secondary Evaluator” popup dialog appears. Next, use the Secondary Evaluator drop-down to select an available therapist and click the Save button. To cancel this action, click the Cancel button. |
| Secondary Evaluator NPI | A read-only field displays the secondary evaluator’s 10-position all-numeric identification number (NPI) assigned to uniquely identify Early Intervention Provider Agency doctors, physicians, and medical groups. |

| BUTTON | DESCRIPTION |
|---------------|---|
| Submit | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Evaluator Assignment panel.  Currently, the system is allowing for the entry of two evaluators. A future update to the EI-Hub is to modify the system to allow for multiple entries, as we realize that, at times, more than two (2) evaluators may be administering the MDE. |

8.1.4.5.1.1.1.3 Waiver Grid/Table

 A waiver is an exception to a billing rule. For any authorized service, if the service provider (Therapist) requests an exception to the authorized services, they need to request a waiver before the service is provided.

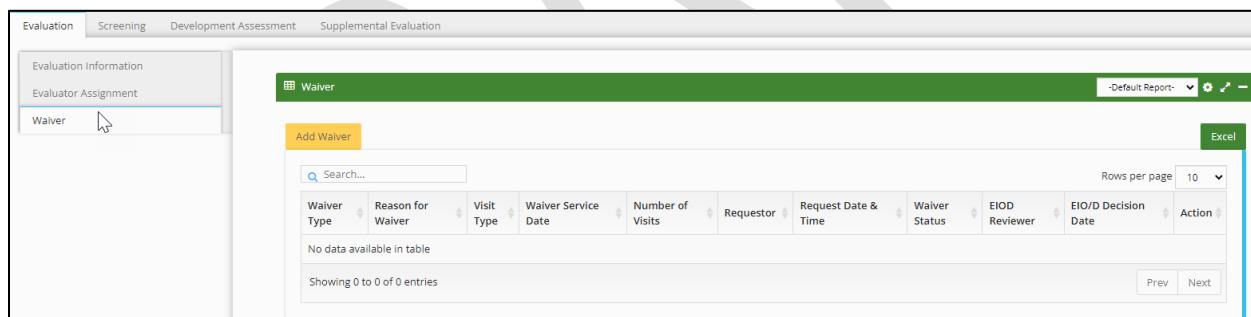
 Please refer to LMS 'Resource Library Index' and search by subject for additional resources.

Early Intervention (EI) regulations at NYCRR §69-4.30 contain billing rules that restrict payment for EI services based on the quantity/type of services delivered to a Child on a given day.

Some eligible EI children with complex needs may require a combination of services that exceed amounts allowed under these EI billing rules. It is the responsibility of the EIO/D to issue a Waiver for such necessary services prior to the delivery of those services when it is known the service will violate any EI billing rule.

 **Waivers first, no back-end waivers. Back-end waivers are services providers request after providing the service.**

In most cases, this grid/table is auto-populated. There is logic in the system that will generate information in the grid/table. The system will let the EIO/D and service coordinator know that a waiver is required. If needed, you can use this grid/table to request an additional waiver.



 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section Home Tab Controllers; selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|---|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|--------------------|---|
| Waiver Type | This column displays the waiver type for the child. |

| COLUMN | DESCRIPTION |
|--------------------------------|--|
| | Within the Evaluation tab, the waiver types are pre-populated with the waiver reason that applies to that specific service authorization. |
| Reason for Waiver | This column displays the reason for the waiver. |
| Visit Type | This column displays the visit type. |
| Waiver Service Date | This column displays the waiver service date. |
| Number of Visits | This column displays the number of service visits for the child. |
| Requestor | This column displays the name of the person requesting the waiver. |
| Request Date & Time | This column displays the date the waiver request was made. |
| Waiver Status | This column displays the waiver status. |
| EIOD Reviewer | This column displays the name of the EIOD reviewer. |
| EO/D Decision Date | This column displays the EIO/D decision date. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|-------------------------------------|---|
| Excel Excel | Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet. An example is using the MS Edge browser to download the excel file and options. To see your results in excel, click Open file . (i) Leaving all the Report Filters fields blank will show "all" results. (i) The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system. |
| Add Waiver Add Waiver | To add a 'Waiver,' click this button. The Waiver tab appears with two (2) panels (shown below). |

8.1.4.5.1.1.1.4 Waiver Tab

8.1.4.5.1.1.1.4.1 Waiver Request Panel

The screenshot shows the 'Waiver Request' panel. At the top left is a navigation bar with 'Waiver' and two tabs: 'Waiver Request' (highlighted with a blue border) and 'Waiver Approval'. Below the tabs are several input fields and dropdown menus. On the left, there's a note: 'If CoVisit or Makeup Visit are selected, these visits must have been included in the authorization under the Service Details panel. The visits requested must be within the Service Authorization total number of visits and not in addition.' At the bottom right is a blue 'Submit' button.

(i) An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|--------------------|--|
| *Waiver Type | Use this drop-down and select the appropriate waiver type request from the list. |
| *Reason for Waiver | Use this drop-down and select the appropriate reason for waiver type (e.g., Child Needed, etc.) from the list. |
| *Visit Type | Use this drop-down and select the appropriate visit type (e.g., Make-up, etc.) from the list. |

(i) If Co-visit or Makeup Visit is selected, these visits must have been included in the authorization under the Service Details panel. In addition, the visits requested must be within the Service Authorization total number of visits and not in addition.

(i) The 'read-only' fields in the table below will not have any information when the service coordinator submits the request. However, the 'read-only' fields will populate after the EIOD decides on the waiver(s).

| FIELD | DESCRIPTION |
|--|---|
| *Waiver Service Date | Enter the waiver service date manually or use the calendar picker (invoked by clicking this field). |
| *Number of visits in addition to limit | Enter the number of visits in addition to the limit in this text field or use the horizontal arrow-bar (See note above). |

| FIELD | DESCRIPTION |
|-------------------------|---|
| Date of request | A read-only field displays the requested date. |
| Time of request | A read-only field displays the requested time. |
| Requestor | A read-only field displays the name of the requestor. |
| EIO/D Decision Date | A read-only field displays the EIO/D decision date. |
| EIO/D Reviewer | A read-only field displays the name of the EIO/D reviewer. |
| Waiver Reasons Comments | Use this text field to enter any relevant comments about the waiver reason. |

| BUTTON | DESCRIPTION |
|--------|---|
| Submit | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Waiver Request panel. <input type="button" value="Submit"/> |

8.1.4.5.1.1.1.4.2 Waiver Approval Panel

(i) An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|---------------------|--|
| *Waiver Status | Use this drop-down and select the waiver status ('Approve' or 'Reject') from the list. |
| EIO/D Reviewer | A read-only field displays the name of the EIO/D reviewer. |
| EIO/D Decision Date | A read-only field displays the EIO/D decision date. |

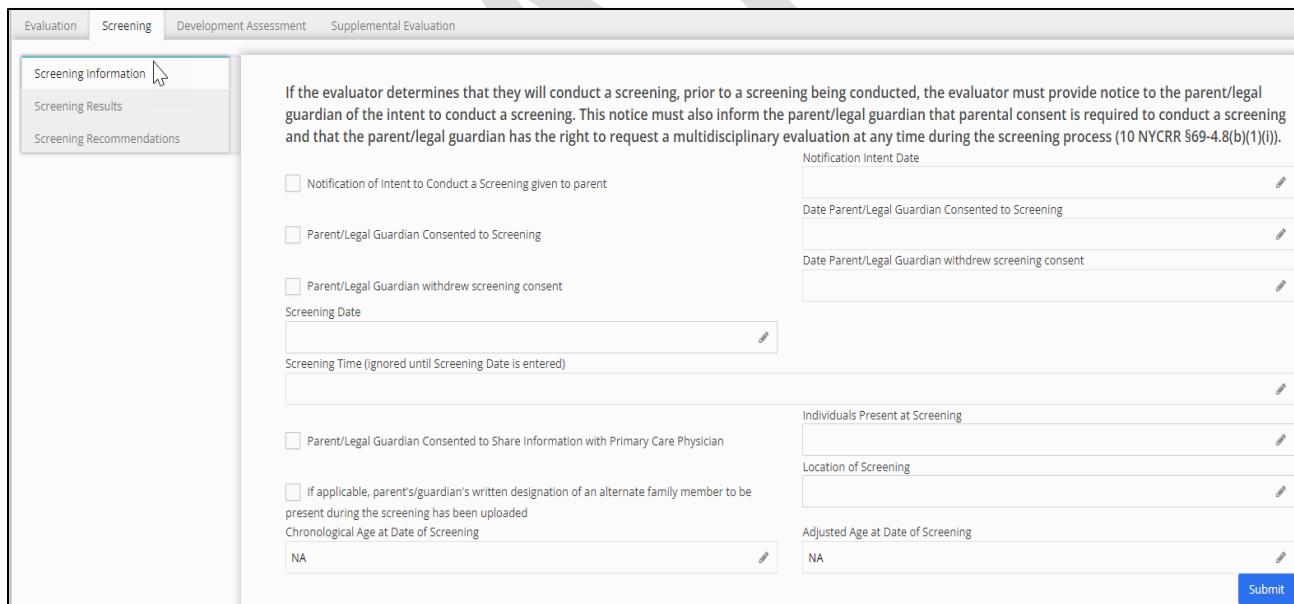
| BUTTON | DESCRIPTION |
|--|---|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Waiver Approval panel. |

8.1.4.5.1.1.2 Screening Tab

8.1.4.5.1.1.2.1 Screening Information Panel

 The screening is optional and is used to determine if a multidisciplinary evaluation is necessary.

[Regulation 69-4.8 (b) "If the child is suspected of having a developmental delay, the evaluator shall, with parental consent, conduct a screening to determine if further evaluation under the Early Intervention Program is appropriate, or conduct a multidisciplinary evaluation to determine the child's eligibility for the Early Intervention Program." Regulation 69-4.8 (b)(1)(ii) "The purpose of a screening, if conducted, is to determine whether the child is suspected of having a disability and requires a multidisciplinary evaluation."]



If the evaluator determines that they will conduct a screening, prior to a screening being conducted, the evaluator must provide notice to the parent/legal guardian of the intent to conduct a screening. This notice must also inform the parent/legal guardian that parental consent is required to conduct a screening and that the parent/legal guardian has the right to request a multidisciplinary evaluation at any time during the screening process (10 NYCRR §69-4.8(b)(1)(i)).

| | |
|--|---|
| <input type="checkbox"/> Notification of Intent to Conduct a Screening given to parent | Notification Intent Date |
| <input type="checkbox"/> Parent/Legal Guardian Consented to Screening | Date Parent/Legal Guardian Consented to Screening |
| <input type="checkbox"/> Parent/Legal Guardian withdrew screening consent | Date Parent/Legal Guardian withdrew screening consent |
| Screening Date | Individuals Present at Screening |
| Screening Time (ignored until Screening Date is entered) | Location of Screening |
| <input type="checkbox"/> Parent/Legal Guardian Consented to Share Information with Primary Care Physician | Adjusted Age at Date of Screening |
| <input type="checkbox"/> If applicable, parent's/guardian's written designation of an alternate family member to be present during the screening has been uploaded | NA |
| Chronological Age at Date of Screening | NA |
| NA | Submit |

 You must enter the dates if the checkboxes are selected/ticked. You will get an error message if you don't.

| FIELD / CHECKBOX | DESCRIPTION |
|--|--|
| <input type="checkbox"/> Notification of Intent to Conduct a Screening given to parent | If 'Yes,' select/tick the checkbox. If 'No,' leave blank.  When selected, the Notification Intent Date field is enabled. |
| Notification Intent Date | Enter the date for the notification intent manually or use the calendar picker (invoked by clicking this field). |
| <input type="checkbox"/> Parent/Legal Guardian Consented to Screening | If 'Yes,' select/tick the checkbox. If 'No,' leave blank.  When selected, the Date Parent/Legal Guardian Consented to Screening is enabled. |
| Date Parent/Legal Guardian Consented to Screening | Manually enter the parent/legal guardian's consent to the screening date or use the calendar picker (invoked by clicking this field). |
| <input type="checkbox"/> Parent/Legal Guardian withdrew screening consent | If 'Yes,' select/tick the checkbox. If 'No,' leave blank.  When selected, the Date, the Parent/Legal Guardian, withdrew screening consent is enabled. |
| Date Parent/Legal Guardian withdrew screening consent | If the parent/legal guardian withdraws from the child's screening, manually enter the date or use the calendar picker (invoked by clicking this field). This field is if the parent withdraws consent. |
| Screening Date | Manually enter the screening date or use the calendar picker (invoked by clicking this field). If the parent/legal guardian withdraws consent for the child's screening: <ul style="list-style-type: none">• The previously entered fields will delete.• If the parent doesn't consent, the fields will not be disabled (greyed out). |
| Screening Time | Manually enter the screening time or use the time picker (invoked by clicking this field).  Clicking this field, the system automatically defaults to your PC's current time. |
| <input type="checkbox"/> Parent/Legal Guardian Consented to Share Information with Primary Care Physician | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |

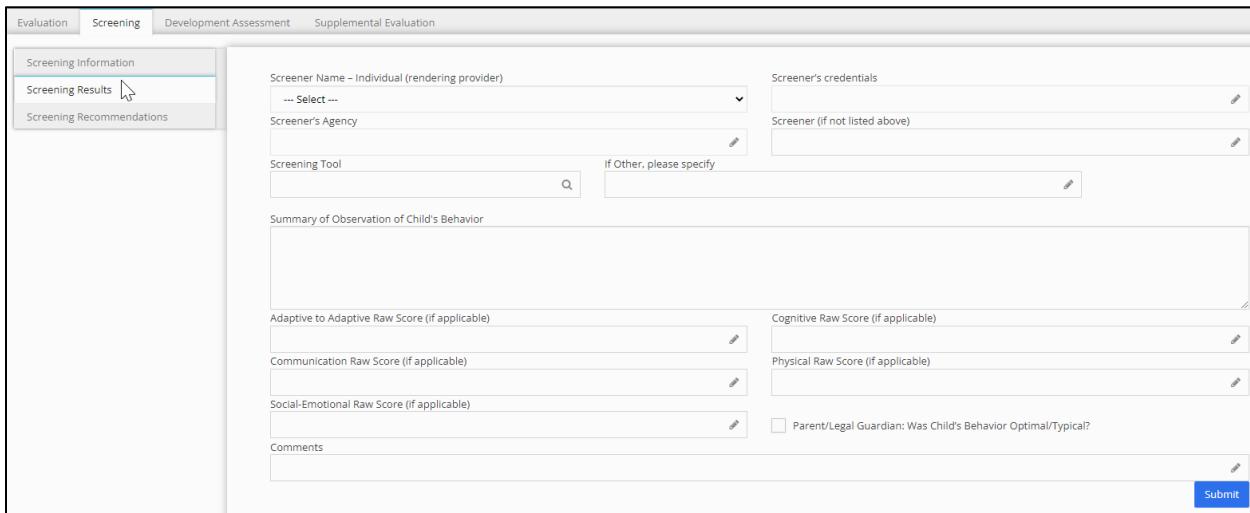
| FIELD / CHECKBOX | DESCRIPTION |
|--|---|
| Individuals Present at Screening | Enter the name of the individuals present at the child's screening session. There can be multiple people, including a list of all people who attended (family, neighbors, caregivers, siblings, etc.), not just service providers.  If you need to enter multiple individuals, separate each entry with a comma. |
| <input type="checkbox"/> If applicable, parent's/guardian's written designation of an alternate family member to be present during the screening has been uploaded | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Location of Screening | Enter the location for the child's screening (e.g., hospital, clinic, home, etc.) in this text field. |
| Chronological Age at Date of Screening |  This field is read-only and prepopulated by the child's screening. |
| Adjusted Age at Date of Screening |  This field is read-only and prepopulated by the date of the child's screening. |

| BUTTON | DESCRIPTION |
|--|---|
| Submit  | After filling out the Screening Information panel, click this button. When clicked, the system runs a validation (e.g., required fields populated) and saves the information in the EI-Hub database.  If the system validation fails, the system prompts with a message. |

8.1.4.5.1.1.2.2 Screening Results Panel

 The evaluator or agency's data entry person uses this panel to enter the Screening results. The process is similar to entering the results of the developmental assessment or supplemental evaluation results. Enter the information under the respective tabs.

 **The Service Coordinator and other user roles (EIO/D and the Muni Date Entry staff) can also enter information into this panel if necessary.**



| FIELD | DESCRIPTION |
|---|--|
| Screener Name – Individual (rendering provider) | Use this drop-down and select the appropriate screener's name performing the child's screening from the list. |
| Screener's Credentials |  This field is read-only and prepopulated by the 'Screener Name.'  This field prepopulates based on the screener's name selected from information already submitted by the agency in the Provider Management module. |
| Screener's Agency |  This field is read-only and prepopulated by the 'Screener Name' performing the child's screening session. |
| Screening Tool | Begin typing (type-ahead drop-down example below) in this field to search for the appropriate screening tool used on the child. |

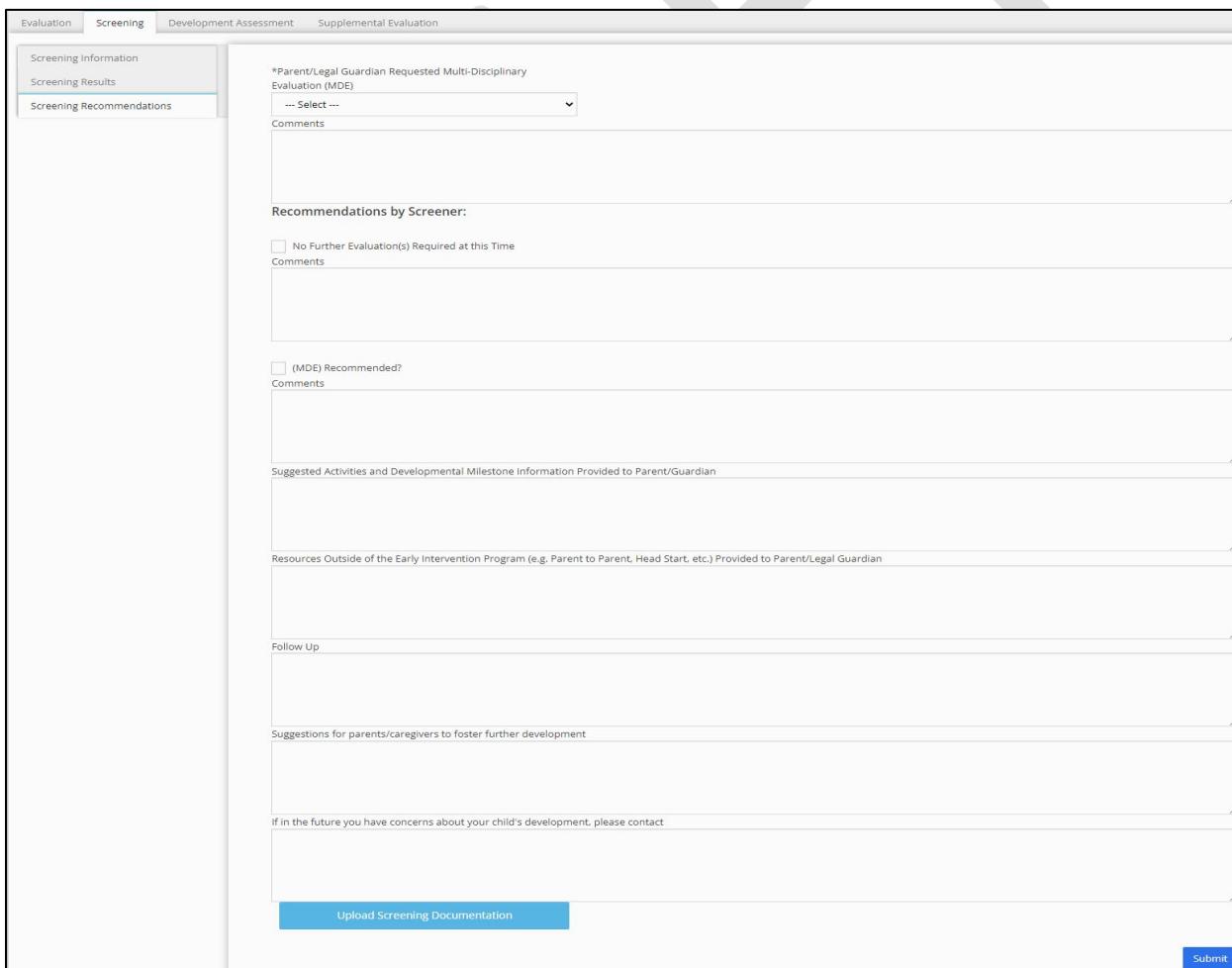
| FIELD | DESCRIPTION |
|---|---|
| | <p>Screening Tool</p> <p>A </p> <p>Screening Tool Name</p> <p>[AEPS] for Birth to Three Years</p> <p>Ages & Stages Questionnaire (ASQ)</p> <p>Assessment of Preterm Infants' Behavior (APIB)</p> |
| If Other, please specify | Enter the screening name in this text field if another screening tool was used and not found in the drop-down search list above. |
| Summary of Observation of Child's Behavior | Enter a brief description of the observation of the child's behavior. |
| Adaptive to Adaptive Raw Score (if applicable) | Enter the Adaptive Raw Score found during the screening in this text field. |
| Cognitive Raw Score (if applicable) | Enter the Cognitive Raw Score found during the screening in this text field. |
| Communication Raw Score (if applicable) | Enter the Communication Raw Score found during the screening in this text field. |
| Physical Raw Score (if applicable) | Enter the Physical Raw Score found during the screening in this text field. |
| Social-Emotional Raw Score (if applicable) | Enter the Social-Emotional Raw Score found during the screening in this text field. |
| <input type="checkbox"/> Parent/Legal Guardian: Was Child's Behavior Optimal/Typical? | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Comments | Enter any additional comments about the screening in this text field. |

| BUTTON | DESCRIPTION |
|--|--|
| Submit  | <p>After filling out the Screening Results panel, click this button. When clicked, the system runs a validation (e.g., required fields populated) and saves the information in the EI-Hub database.</p> <p>(i) If the system validation fails, the system prompts with a message.</p> |

8.1.4.5.1.1.2.3 Screening Recommendations Panel

 The evaluator uses this panel to enter the screening recommendations.

(i) The EI-Hub also allows for other roles, such as the Provider Data Entry role or the Service coordinator, to enter these results.



The screenshot displays the 'Screening Recommendations' panel. At the top, there's a navigation bar with tabs: Evaluation, Screening, Development Assessment, and Supplemental Evaluation. Below the tabs, a sidebar on the left lists 'Screening Information', 'Screening Results' (which is currently selected), and 'Screening Recommendations'. The main content area contains several sections:

- *Parent/Legal Guardian Requested Multi-Disciplinary Evaluation (MDE):** A dropdown menu labeled "... Select ..." and a 'Comments' text area.
- Recommendations by Screener:** A section with a checkbox for 'No Further Evaluation(s) Required at this Time' and a 'Comments' text area.
- (MDE) Recommended?** Another section with a checkbox and a 'Comments' text area.
- Suggested Activities and Developmental Milestone Information Provided to Parent/Guardian:** A large text area.
- Resources Outside of the Early Intervention Program (e.g. Parent to Parent, Head Start, etc.) Provided to Parent/Legal Guardian:** A large text area.
- Follow Up:** A large text area.
- Suggestions for parents/caregivers to foster further development:** A large text area.
- If in the future you have concerns about your child's development, please contact:** A large text area.

At the bottom of the form, there's a blue button labeled 'Upload Screening Documentation' and a blue 'Submit' button.



An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|--|--|
| *Parent/Legal Guardian Requested Multiple Disciplinary Evaluation (MDE) | Use this drop-down and select the appropriate response ('Yes' or 'No') from the list. |
| Comments | Enter any additional comments about the Parent/Legal Guardian Requested Multiple Disciplinary Evaluation (MDE) in this text field. |

Recommendations by Screener

| FIELD | DESCRIPTION |
|--|---|
| <input type="checkbox"/> No Further Evaluation(s) Required at this Time | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Comments | Enter any additional comments about no further evaluation(s) required for the child in this text field. |
| <input type="checkbox"/> (MDE) Recommended? | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Comments | Enter any additional comments about recommending Multiple Disciplinary Evaluation (MDE) for the child in this text field. |
| Suggested Activities and Developmental Milestone Information Provided to Parent/Guardian | Enter any suggested Activities and Developmental Milestone Information Provided to Parent/Guardian in this text field. |
| Resources Outside of the Early Intervention Program (e.g., Parent to Parent, Head Start, etc.) Provided to Parent/Legal Guardian | Enter any resources outside the Early Intervention Program available to the Parent/Legal Guardian in this text field. |
| Follow Up | Enter any comments about a follow-up for the child in this text field. |

| FIELD | DESCRIPTION |
|--|--|
| Suggestions for parents/caregivers to foster further development | Enter any suggestions for the parent/caregivers to encourage further development in this text field. |
| If in the future you have concerns about your child's development, please contact | Enter the contact information on future concerns about the child's development in this text field. |

| BUTTON | DESCRIPTION |
|---|---|
| Upload Screening Documentation Upload Screening Documentation | To upload the accommodating file, click this button. Then, the "Upload Screening Documentation" panel appears (shown below). The Upload button is visible at the bottom of the Screening Recommendations panel. |

8.1.4.5.1.1.2.3.1 Upload Screening Documentation Popup Panel

Upload Screening Documentation

Document Area : Evaluation

*Document Type

--- Select ---

*Document Name

Choose File No file chosen

Notes

Upload Cancel

(i) An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|--|--|
| Document Area: Evaluation *Document Type | Use this drop-down and select the appropriate document type (e.g., Screening Summary, etc.) from the list. |
| *Document Name | Enter the name of the document uploaded. |
| Choose File <input type="button" value="Choose File"/> | To upload your file into the EI-Hub database, click this button. When clicked, your PC's web browser (e.g., MS Edge) prompts an "Open" window; navigate to where your document/file resides, click on the file (highlighted), and click the Open button on the window. The name of your file name should read adjacent to the 'Choose File' button. |
| Notes | Use this textbox to enter relevant notes about your document file uploaded into the system. |

| BUTTON | DESCRIPTION |
|--|--|
| Upload <input type="button" value="Upload"/> | After populating the fields in the Upload File popup panel (mentioned above), click this button, and your file uploads into the EI-Hub database. |
| Cancel <input type="button" value="Cancel"/> | To cancel the action for uploading a file, click this button. When clicked, the Upload File panel closes. |

| BUTTON | DESCRIPTION |
|--|--|
| Submit <input type="button" value="Submit"/> | After filling out the Screening Recommendations panel, click this button. When clicked, the system runs a validation (e.g., required fields populated), and the information saves in the EI-Hub database.  If the system validation fails, the system prompts with a message. |

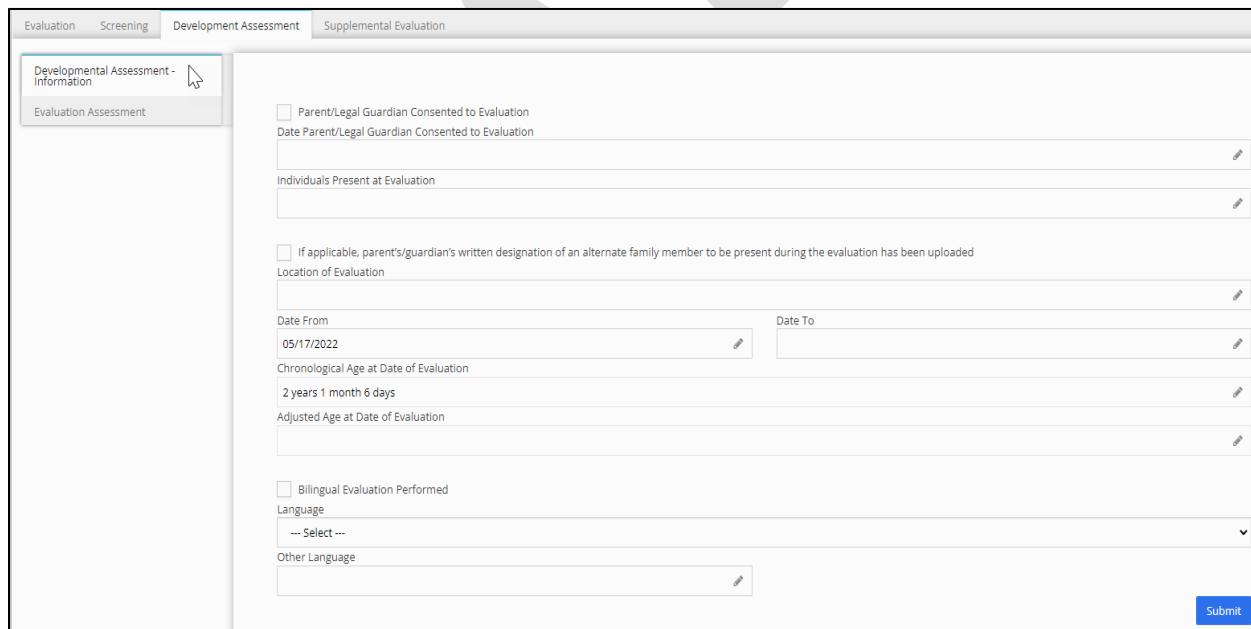
8.1.4.5.1.1.3 Development Assessment Tab

8.1.4.5.1.1.3.1 Developmental Assessment - Information Panel

 The evaluator uses this panel to enter the results of a developmental assessment into the System. A multidisciplinary evaluation is a more detailed look at a child in all developmental areas; done by two or more qualified professionals from different disciplines or professions who evaluate a child's development. This evaluation is a process to determine if a child is eligible for early intervention services and to determine the child's strengths and needs.

 Other user roles, including the Provider Data Entry and service coordinator roles, can also enter the developmental assessment results.

 If the child/family requires a bilingual assessment, you must create a separate authorization for Bilingual add-ons. In other words, you need to enter two (2) authorizations, one for core and the other for Bilingual. The 'Bilingual Evaluation Performed' checkbox within the Developmental Assessment Information panel is for the core evaluation. The bilingual eval does not require the evaluation information.



The screenshot shows a software application window titled 'Developmental Assessment - Information'. The top navigation bar includes tabs for 'Evaluation', 'Screening', 'Development Assessment' (which is selected), and 'Supplemental Evaluation'. On the left, a sidebar lists 'Evaluation Assessment' and 'Development Assessment - Information' (with a cursor pointing to it). The main content area contains several data entry fields:

- A checkbox labeled 'Parent/Legal Guardian Consented to Evaluation' with the sub-instruction 'Date Parent/Legal Guardian Consented to Evaluation' below it.
- A section for 'Individuals Present at Evaluation' with a list of names and edit icons.
- A checkbox for 'If applicable, parent's/guardian's written designation of an alternate family member to be present during the evaluation has been uploaded'.
- A section for 'Location of Evaluation' with fields for 'Date From' (set to '05/17/2022') and 'Date To'.
- Information about the child's age: 'Chronological Age at Date of Evaluation' (2 years 1 month 6 days) and 'Adjusted Age at Date of Evaluation'.
- A checkbox for 'Bilingual Evaluation Performed' with dropdown menus for 'Language' ('... Select ...') and 'Other Language'.

A blue 'Submit' button is located in the bottom right corner of the form area.



After adding the child's Developmental Assessment Information to this panel and selecting/clicking the 'Submit' (save) button, the 'Upload' button appears, as shown below.

The screenshot shows a software interface for managing child evaluations. At the top, there are tabs: Evaluation, Screening, Development Assessment (which is selected), and Supplemental Evaluation. On the left, a sidebar has sections for 'Development Assessment - Information' and 'Evaluation Assessment'. The main area contains several input fields and checkboxes:

- *Parent/Legal Guardian Consented to Evaluation
- Date Parent/Legal Guardian Consented to Evaluation
- Individuals Present at Evaluation
- If applicable, parent's/guardian's written designation of an alternate family member to be present during the evaluation has been uploaded
- Location of Evaluation
- Date From: 11/17/2021
- Date To
- Chronological Age at Date of Evaluation: 1 year 8 months
- Adjusted Age at Date of Evaluation
- Bilingual Evaluation Performed
- Language: French
- Other Language: test

A large blue button at the bottom is labeled "Upload Development Assessment Document". A red box highlights this button, and a cursor arrow is pointing towards it. A "Submit" button is located to the right of the upload button.

| FIELD | DESCRIPTION |
|---|---|
| <input type="checkbox"/> Parent/Legal Guardian Consented to Evaluation | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Date Parent/Legal Guardian Consented to Evaluation | Manually enter the date the parent/legal guardian consented to the child's evaluation or use the calendar picker (invoked by clicking this field). |
| Individuals Present at Evaluation | Enter the name of the individuals present at the child's evaluation. There can be multiple people, including a list of all people who attended (family, neighbors, caregivers, siblings, etc.), not just service providers. (i) Users can enter more than one individual. |
| <input type="checkbox"/> If applicable, parent's/guardian's written designation of an alternate family member to be present during the evaluation has been uploaded | If applicable, select/tick this check box if the child-parent/guardian has provided a written designation of an alternate family member to be present during the evaluation and obtained. |
| Location of Evaluation | Enter the location where the child's evaluation occurred (e.g., daycare, child's home, etc.) in this text field. |

| FIELD | DESCRIPTION |
|---|---|
| Date From | Manually enter the start (from) date of the child's evaluation or use the calendar picker (invoked by clicking this field). |
| Date To | Manually enter the end (to) date of the child's evaluation or use the calendar picker (invoked by clicking this field). |
| Chronological Age at Date of Evaluation | ⓘ This field is read-only and prepopulated based on the child's chronological age at the time of the child's evaluation. |
| Adjusted Age at Date of Evaluation | ⓘ This field is read-only and prepopulated based on the child's adjusted age, if applicable, at the time of the child's evaluation. |
| <input type="checkbox"/> Bilingual Evaluation Performed | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Language | Use this drop-down and select the appropriate language to communicate with the child during the evaluation. |
| Other Language | If a language used to communicate with the child is not available in the drop-down list above, enter the type of language in this text field. |

| BUTTON | DESCRIPTION |
|--|--|
| Upload Development Assessment Document Upload Development Assessment Document | <p>To upload the accommodating file, click this button. Then, the "Upload File" panel appears (shown below in section 8.1.4.5.1.1.3.1.1).</p> <p>The Upload button is visible at the bottom of the Developmental Assessment Information panel, above the 'Submit' button.</p> <p>i Remember, after adding the child's Developmental Assessment Information to this panel and selecting/clicking the 'Submit' (save) button, the 'Upload' button appears, as shown below.</p> |

8.1.4.5.1.1.3.1.1 Upload File Popup Panel

Document Area : Evaluation
***Document Type**
 --- Select ---

***Document Name**

Choose File No file chosen

Notes

Upload Cancel

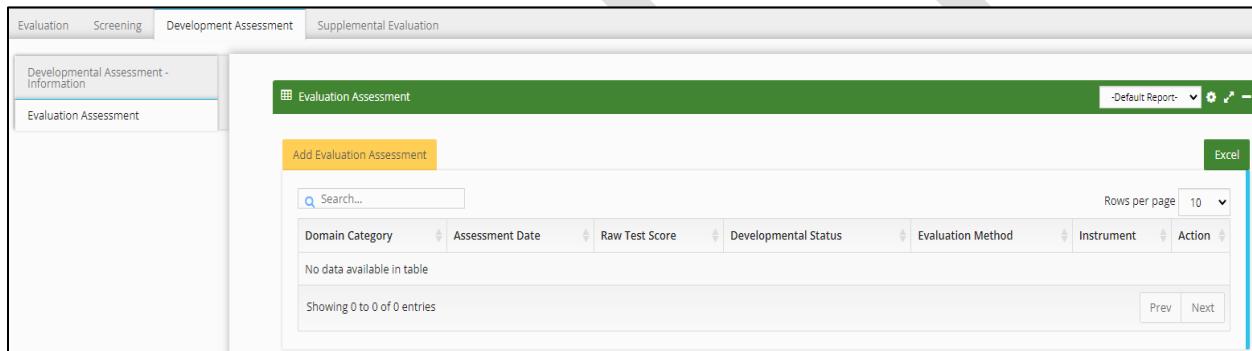
| FIELD | DESCRIPTION |
|--|--|
| Document Area: Evaluation | Use this drop-down and select the appropriate document type (e.g., Screening Summary, etc.) from the list. |
| *Document Type | |
| *Document Name | Enter the name of the document uploaded. |
| Choose File <input type="button" value="Choose File"/> | To upload your file into the EI-Hub database, click this button. When clicked, your PC's web browser (e.g., MS Edge) prompts an "Open" window; navigate to where your document/file resides, click on the file (highlighted), and click the Open button on the window. The name of your file name should read adjacent to the 'Choose File' button. |
| Notes | Use this textbox to enter relevant notes about your document file uploaded into the system. |

| BUTTON | DESCRIPTION |
|--|--|
| Upload <input type="button" value="Upload"/> | After populating the fields in the Upload File popup panel (mentioned above), click this button, and your file uploads into the EI-Hub database. |
| Cancel <input type="button" value="Cancel"/> | To cancel the action for uploading a file, click this button. When clicked, the Upload File panel closes. |

| BUTTON | DESCRIPTION |
|--|--|
| Submit  | After filling out the Screening Recommendations panel, click this button. When clicked, the system runs a validation (e.g., required fields populated), and the information saves in the EI-Hub database.  If the system validation fails, the system prompts with a message. |

8.1.4.5.1.1.3.2 Evaluation Assessment Grid/Table

 This grid/table populates after the service authorization for the evaluation or screening is entered.



 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|---|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|------------------------|---|
| Domain Category | This column displays the child's domain category (e.g., Cognitive, etc.). |
| Assessment Date | This column displays the child's assessment date. |
| Raw Test Score | This column displays the child's evaluation raw test score. |

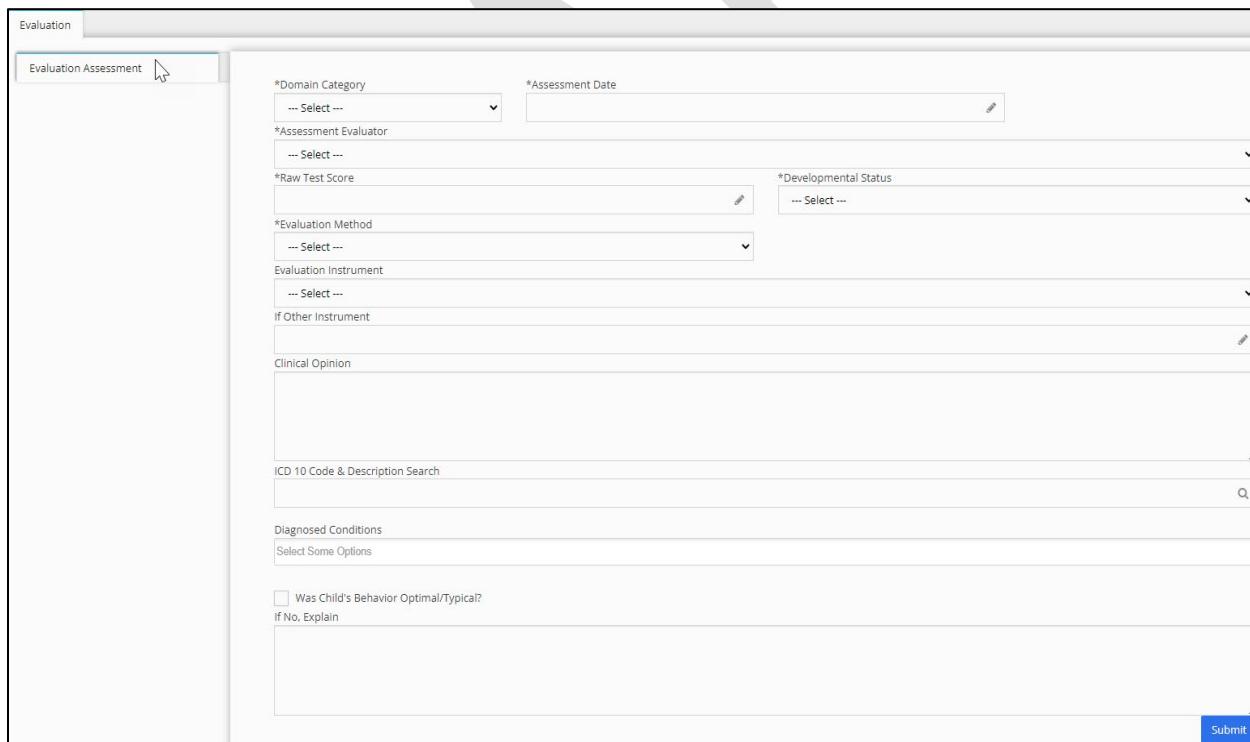
| COLUMN | DESCRIPTION |
|-----------------------------|---|
| | (i) Each test asks the evaluator to assess specific developmental skills of the child and score as per each test's guidelines (e.g., The Rossetti-Toddler Language Scale). |
| Developmental Status | This column displays the child's development status (e.g., No Eligibility Delay, etc.). |
| Evaluation Method | This column displays the date that the evaluation method accessed a particular domain. |
| Instrument | This column displays the instrument used for the child's evaluation. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|--------------------------------------|---|
| Add Evaluation Assessment | To add an evaluation assessment, click this button. The Evaluation Tab/Evaluation Assessment panel appears (shown below). |
| Excel | Click this button to export your results (based on your criteria entered) in an MS Excel spreadsheet. To see your results in excel, click Open . (i) Leaving all the Report Filters fields blank will show "all" results. (i) The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system. |
| Edit | Click this button to view or edit an Evaluation Assessment record for the child. When clicked, the Evaluation Assessment Report panel appears. (i) The fields and descriptions for editing the Evaluation Assessment panel are the same for adding; the Evaluation Assessment panel appears (ref. below). |

| BUTTON | DESCRIPTION |
|--|---|
| Delete  | Click this button adjacent to the appropriate record/row to delete an existing evaluation assessment. When clicked, the system prompts a confirmation message pad popup (shown below); click the Delete button to proceed or click the Cancel button to retract. <div style="border: 1px solid #ccc; padding: 10px; margin-top: 10px;"> <p style="margin: 0;">Confirm Evaluation Assessment Deletion X</p> <p style="margin: 0; padding: 5px;">This action cannot be reversed. Are you sure you want to continue?</p> <div style="text-align: right; margin-top: 5px;"> Delete Cancel </div> </div> |

8.1.4.5.1.1.3.2.1 Evaluation Tab/Evaluation Assessment Panel

 When selecting/clicking the Add Evaluation Assessment button from the 'Evaluation Assessment grid/table,' this panel appears (shown below); this panel is the last one required to be completed/populated for the developmental assessment.

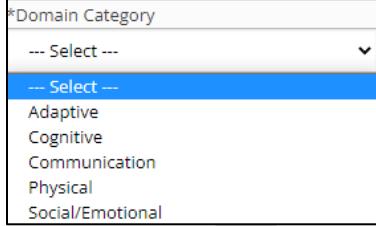
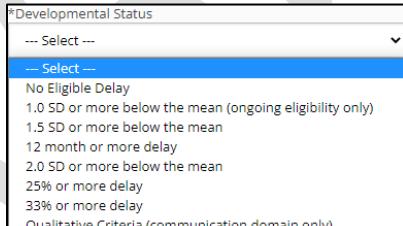
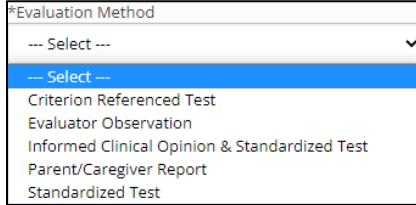


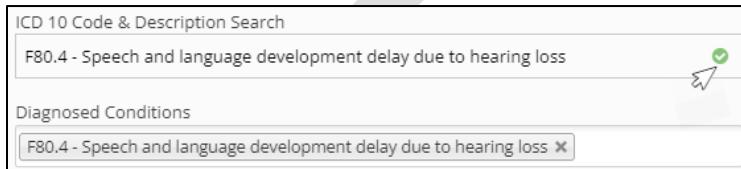
The screenshot shows the 'Evaluation Assessment' panel. At the top left is a navigation bar with tabs: 'Evaluation' (selected), 'Assessments', 'Diagnoses', 'Interventions', and 'Notes'. Below the navigation is a title bar with 'Evaluation Assessment' and a 'New' button. The main area contains several input fields:

- *Domain Category: A dropdown menu with '... Select ...' as the placeholder.
- *Assessment Date: A date input field with a calendar icon.
- *Assessment Evaluator: A dropdown menu with '... Select ...' as the placeholder.
- *Raw Test Score: An input field with a pencil icon.
- *Developmental Status: A dropdown menu with '... Select ...' as the placeholder.
- *Evaluation Method: A dropdown menu with '... Select ...' as the placeholder.
- Evaluation Instrument: A dropdown menu with '... Select ...' as the placeholder.
- If Other Instrument: A text input field.
- Clinical Opinion: A large text area for notes.
- ICD 10 Code & Description Search: A search input field with a magnifying glass icon.
- Diagnosed Conditions: A section with a 'Select Some Options' button and a list of conditions.
- Was Child's Behavior Optimal/Typical?: A checkbox labeled 'If No, Explain'.

A blue 'Submit' button is located at the bottom right of the form.

 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|-----------------------|--|
| *Domain Category | Use this drop-down (shown below) and select the appropriate category from the list.  |
| *Assessment Date | Enter the child's assessment date manually or use the calendar picker (invoked by clicking this field). |
| *Raw Test Score | Enter the child's evaluation raw test score. (i) Each test asks the evaluator to assess specific developmental skills of the child and score as per each test's guidelines (e.g., The Rossetti-Toddler Language Scale). |
| *Developmental Status | Use this drop-down (shown below) and select the appropriate development status for the respective domain from the list.  |
| *Evaluation Method | Use this drop-down (shown below) and select the appropriate evaluation method from the list for the specific domain.  |
| Evaluation Instrument | Use this drop-down and select the appropriate evaluation instrument used from the list. |
| If Other Instrument | If the evaluator used another instrument to assess the child, use this text field and enter the instrument/tool used. |

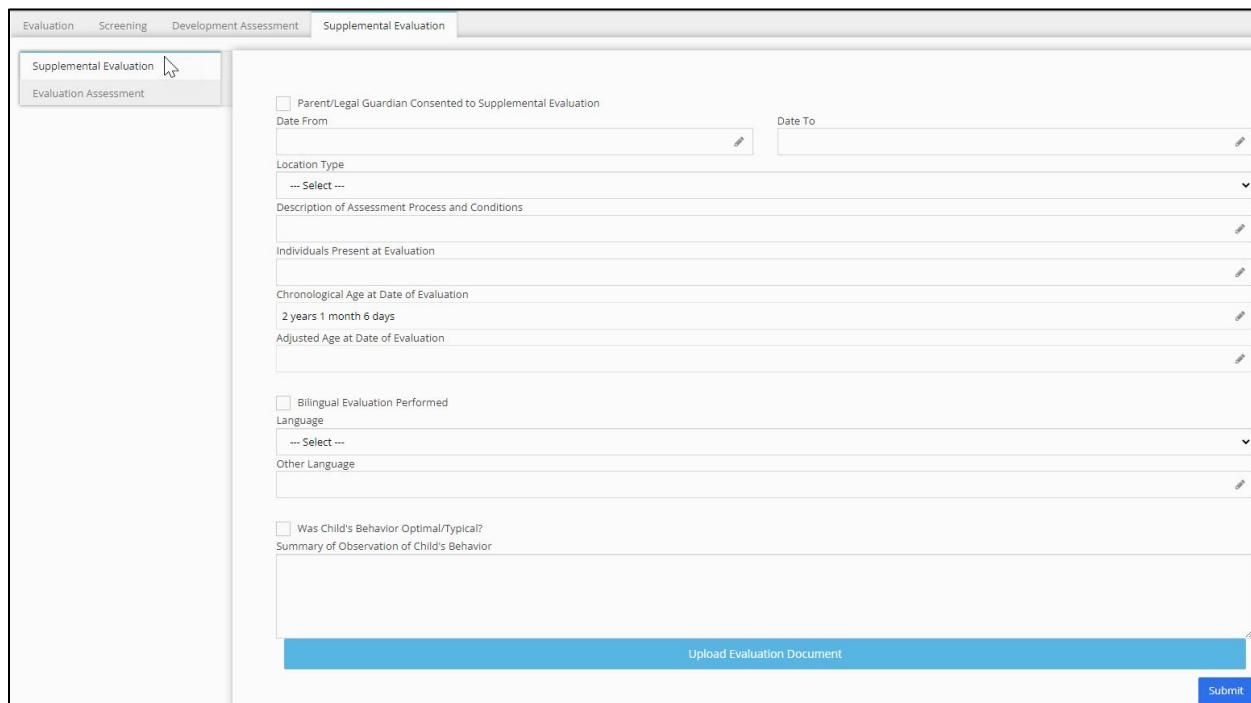
| FIELD | DESCRIPTION |
|--|--|
| Clinical Opinion | Enter a brief description in this text field of the clinical opinion. |
| ICD 10 Code & Description Search | Begin typing an ICD code and description in this field to activate the drop-down and choose the appropriate ICD Codes from the list. |
| Diagnosed Conditions | <p>After selecting an ICD 10 Code above, the diagnosed condition(s) will be available for you to choose from a prepopulated drop-down list. Next, you must select a code from the 'ICD 10 Code & Description Search' field (example shown below).</p>  <p>(i) You must first select a code from the 'ICD 10 Code & Description Search' field.</p> |
| <input type="checkbox"/> Was Child's Behavior Optimal/Typical? | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| If No, Explain | If the Child's Behavior was not Optimal/Typical, use this text field and provide a brief description. |

| BUTTON | DESCRIPTION |
|--|---|
| Submit  | <p>After filling out the Evaluation Assessment panel, click this button. When clicked, the system runs a validation (e.g., required fields populated), and the information saves in the EI-Hub database.</p> <p>(i) If the system validation fails, the system prompts with a message.</p> |

8.1.4.5.1.1.4 Supplemental Evaluation Tab

8.1.4.5.1.1.4.1 Supplemental Evaluation Panel

 Use this panel for Supplemental Evaluation. However, not all children will get a supplemental evaluation.



The screenshot shows a software interface for a 'Supplemental Evaluation' panel. At the top, there are tabs: Evaluation, Screening, Development Assessment, and Supplemental Evaluation, with 'Supplemental Evaluation' being the active tab. On the left, a sidebar has 'Evaluation Assessment' selected. The main area contains several input fields:

- A checkbox labeled 'Parent/Legal Guardian Consented to Supplemental Evaluation' with a note below it: 'Date From' and 'Date To'.
- A dropdown menu for 'Location Type' with options like '... Select ...' and 'Description of Assessment Process and Conditions'.
- A text field for 'Individuals Present at Evaluation'.
- Text fields for 'Chronological Age at Date of Evaluation' (showing '2 years 1 month 6 days') and 'Adjusted Age at Date of Evaluation'.
- A checkbox labeled 'Bilingual Evaluation Performed' with a note below it: 'Language' (dropdown), '... Select ...', and 'Other Language'.
- A checkbox labeled 'Was Child's Behavior Optimal/Typical?' with a note below it: 'Summary of Observation of Child's Behavior'.

At the bottom right of the main area is a blue button labeled 'Upload Evaluation Document'. In the bottom right corner of the entire panel is a small blue 'Submit' button.

| FIELD | DESCRIPTION |
|--|--|
| <input type="checkbox"/> Parent/Legal Guardian Consented to Supplemental Evaluation | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Date From | Manually enter the start ("From") date of the child's supplemental evaluation or use the calendar picker (invoked by clicking this field). |
| Date To | Manually enter the end ("To") date of the child's supplemental evaluation or use the calendar picker (invoked by clicking this field). |
| Location Type | Use this drop-down and select the appropriate location where the child's evaluation occurred (e.g., daycare, child's home, etc.). |
| Description of Assessment Process and Conditions | Enter a brief description of the child's assessment process and conditions in this text field. |

| FIELD | DESCRIPTION |
|---|--|
| Individuals Present at Evaluation | Enter the name of the individuals present at the child's evaluation session. |
| Chronological Age at Date of Evaluation | 🚫 This field is read-only and prepopulated at the child's evaluation. |
| Adjusted Age at Date of Evaluation | 🚫 This field is read-only and prepopulated at the child's evaluation. |
| <input type="checkbox"/> Bilingual Evaluation Performed | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Language | Use this drop-down and select the appropriate second language from the list. |
| Other Language | If an additional or a second language is unavailable in the drop-down list above, enter the language in this text field. |
| <input type="checkbox"/> Was Child's Behavior Optimal/Typical? | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Summary of Observation of Child's Behavior | Enter a summary of observation of the child's behavior in this text field. |

| BUTTON | DESCRIPTION |
|---|--|
| Upload Evaluation Document Upload Evaluation Document | To upload the accommodating file, click this button. Then, the "Upload File" panel appears (shown below). The Upload button is visible at the bottom of the Supplemental Evaluation panel. |

8.1.4.5.1.1.4.1.1 Upload File Popup Panel

Document Area : Evaluation
***Document Type**
 --- Select ---

***Document Name**

Choose File No file chosen

Notes

Upload Cancel

| FIELD | DESCRIPTION |
|--|--|
| Document Area: Evaluation | Use this drop-down and select the appropriate document type (e.g., Screening Summary, etc.) from the list. |
| *Document Type | |
| *Document Name | Enter the name of the document uploaded. |
| Choose File <input type="button" value="Choose File"/> | To upload your file into the EI-Hub database, click this button. When clicked, your PC's web browser (e.g., MS Edge) prompts an "Open" window; navigate to where your document/file resides, click on the file (highlighted), and click the Open button on the window. The name of your file name should read adjacent to the 'Choose File' button. |
| Notes | Use this textbox to enter relevant notes about your document file uploaded into the system. |

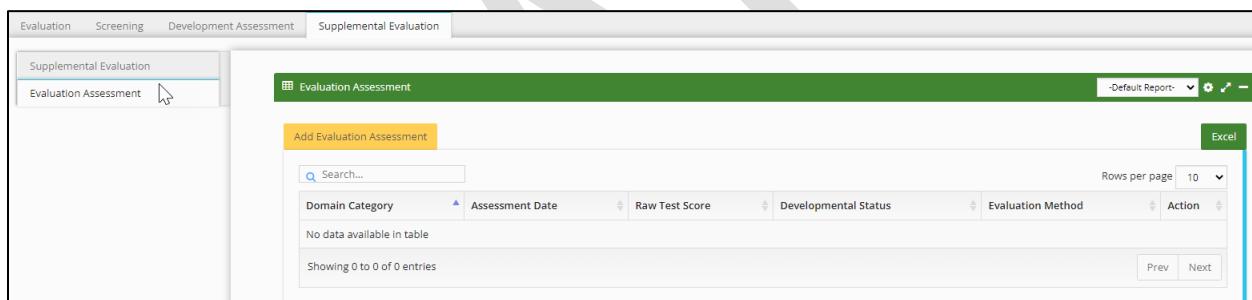
| BUTTON | DESCRIPTION |
|---------------------------------------|---|
| <input type="button" value="Upload"/> | Click this button after populating the Upload File panel (mentioned above). When clicked, your file uploads into the EI-Hub database. |
| <input type="button" value="Cancel"/> | To cancel the action for uploading a file, click this button. When clicked, the Upload File panel closes. |

| BUTTON | DESCRIPTION |
|--|---|
| Submit  | <p>After filling out the Supplemental Evaluation panel, click this button. When clicked, the system runs a validation (e.g., required fields populated), and the information saves in the EI-Hub database.</p> <p>(i) If the system validation fails, the system prompts with a message.</p> |

8.1.4.5.1.1.4.2 Evaluation Assessment Grid/Table

 This grid/table is under the Supplemental Evaluation panel; select/click the **Add Evaluation Assessment** button to open the panel and enter information from the evaluation. A service authorization is required to complete and enter results.

(i) There will be no "Add Evaluation Assessment" button if there is no service authorization.

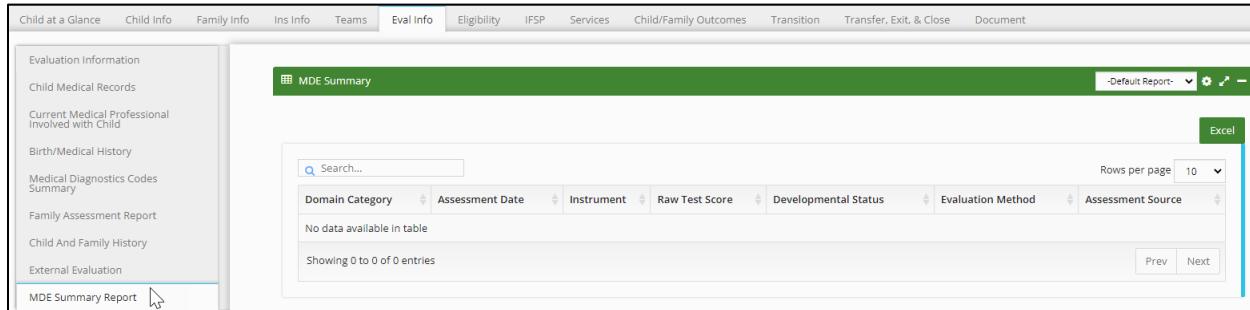


(i) See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

(i) For functionality (fields, descriptions, and buttons), please refer to the section [Evaluation Assessment Panel](#).

8.1.4.5.1.1.4.3 MDE Summary Report Grid/Table

 This grid/table automatically populates from the entries in Screening, Developmental Evaluation, Supplemental Evaluation, and External Evaluations.



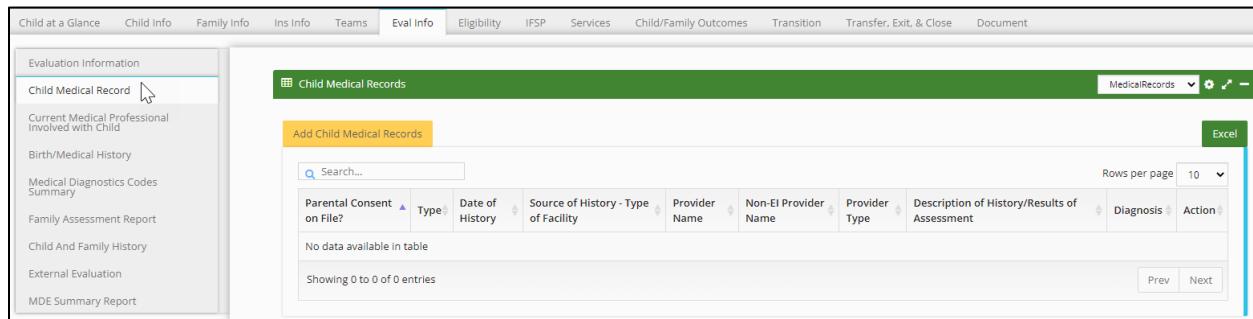
 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|---|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|-----------------------------|---|
| Domain Category | This column displays the child's domain category (e.g., Cognitive, etc.). |
| Assessment Date | This column displays the child's assessment date. |
| Instrument | This column displays the instrument(s) used to evaluate the child. |
| Raw Test Score | <p>This column displays the child's evaluation raw test score.</p> <p> Each test asks the evaluator to assess specific developmental skills of the child and score as per each test's guidelines (e.g., The Rossetti-Toddler Language Scale).</p> |
| Developmental Status | This column displays the child's development status (e.g., No Eligibility Delay, etc.). |
| Evaluation Method | This column displays the evaluation method (e.g., Standardized Test, etc.) used on the child. |
| Assessment Source | This column displays the assessment source used for evaluating the child. |

8.1.4.5.2 Child Medical Records Grid/Table

 The Child Medical Records grid/table can reflect multiple entries. For example, the Service Coordinator (SC) would enter medical records from outside providers using the Add Child Medical Records button. The SC can also add a synopsis (summary) of the record.



 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| COLUMN | DESCRIPTION |
|---|---|
| Parental Consent on File? | This column displays 'True' or 'False' if parental consent is on file. |
| Type | This column displays the type of history (History or Assessment). |
| Date of History | This column displays the date of inputting health history. |
| Source of History – Type of Facility | This column displays the source of history and type of facility (e.g., Specialist, Developmental Pediatrician, etc.). |
| Provider Name | This column displays the provider's name. |
| Non-EI Provider Name | This column displays the name of a non-EI provider. |
| Provider Type | This column displays the type of provider. |
| Description of History/Results of Assessment | This column describes the history/results of the child's assessment. |
| Diagnosis | This column displays the diagnosis of the child. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|---|---|
| Add Child Medical History Add Child Medical Records | To add a child's medical history record for the child, click this button. When clicked, the system opens the 'Child and Family History tab and 'Child Medical Records' panel (shown below). |

8.1.4.5.2.1 Child and Family History Tab/Child Medical Records Panel

The screenshot displays a software application window titled 'Child and Family History'. Within this window, there is a sub-panel titled 'Child Medical Records'. This panel contains several input fields: a checkbox labeled 'Information obtained with parental consent on file', a dropdown menu labeled 'Type' with the placeholder 'Select ...', a date input field showing '06/08/2022', a dropdown menu labeled 'Source of History - Type of Facility' with the placeholder 'Select ...', a text input field for 'Non-EI Provider Name', a dropdown menu for 'Provider Specialty' with the placeholder 'Select ...', and a text input field for 'Description of History/Results of Assessment'. Below these fields are search boxes for 'ICD10 Code Search' and 'Diagnosis (ICD10 Code Search Results)', both with the placeholder 'Select Some Options'. A blue 'Submit' button is located at the bottom right of the panel.

(i) An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|---|--|
| <input type="checkbox"/> Information obtained with parental consent on file | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| *Type | Use this drop-down and select the appropriate item from the list (e.g., History, Assessment). |
| *Date | Enter the child's health history date manually or use the calendar picker (invoked by clicking this field). (i) The system defaults to the current date listed on your PC. |
| *Source of History – Type of Facility | Use this drop-down and select the appropriate facility from the list (e.g., Clinic, Hospital, etc.). |
| *Non-EI Provider Name | Enter the name of the no-EI provider name. |
| Provider Type | Use this drop-down and select the appropriate provider type from the list. |

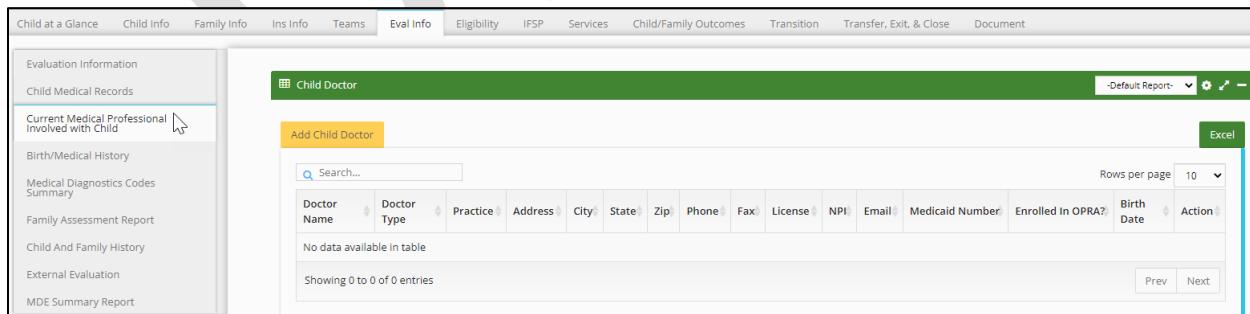
| FIELD | DESCRIPTION |
|--|--|
| Provider Specialty | Use this drop-down and select the appropriate provider specialty from the list. |
| *Description of History/Results of Assessment | Enter the description of the history/results of the child's assessment in this text field. |
| ICD10 Code Search | Begin typing (type-ahead) an ICD10 code in this field to activate the drop-down and choose the appropriate ICD Codes from the list. |
| Diagnosis (ICD10 Code Search Results) | Begin typing a diagnosis in this field to activate the drop-down and choose (Select Some Options) the appropriate diagnosis description from the list. |

| BUTTON | DESCRIPTION |
|--|---|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Child Medical Records grid/table). |

8.1.4.5.3 Current Medical Professionals Involved Grid/Table

 Use this grid/table for information taken during intake, which medical providers have the child seen during the consent process. Also, there is an NPI lookup. Then, based on your targeted results, lists the various providers using the Add Child Doctor button.

 You can edit very little information in the panel since it is populated from the NPI lookup process. The only elements that can be edited or entered are the phone number, fax number, email address, and enrollment in the OPRA checkbox. If you selected an incorrect medical professional, you could delete the entry.



 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

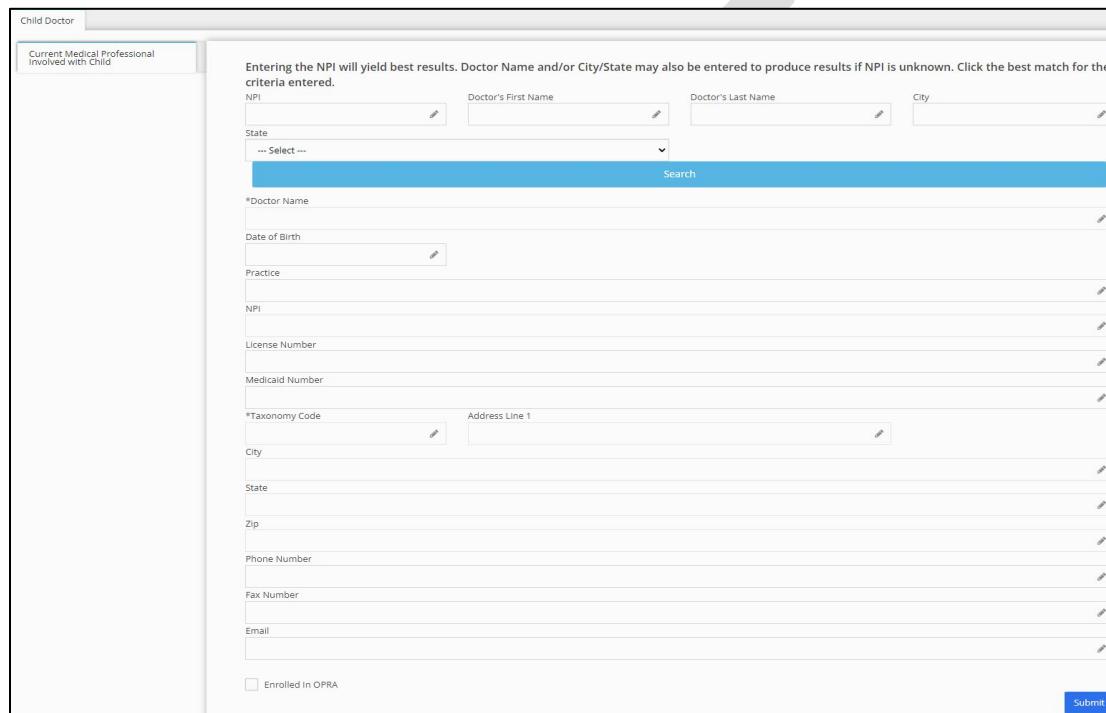
| COLUMN | DESCRIPTION |
|--------------------------|--|
| Doctor Name | This column displays the name of the child's doctor. |
| Doctor Type | This column displays the child's doctor's profession/type (e.g., Audiologist). |
| Practice | This column displays the type of medical practice. |
| Address | This column displays the address where the child's doctor's practice resides. |
| City | This column displays the city where the child's doctor's practice resides. |
| State | This column displays the state where the child's doctor's practice resides. |
| Zip | This column displays the zip code where the child's doctor's practice resides. |
| Phone | This column displays the phone number where the child's doctor's practice resides. |
| Fax | This column displays the fax number where the child's doctor's practice resides. |
| License | This column displays the license number of the child's doctor. |
| NPI | This column displays the 10-position all-numeric identification number assigned to uniquely identify Early Intervention Provider Agency doctors, physicians, and medical groups. |
| Email | This column displays the email address for the child's doctor's practice. |
| Medicaid Number | This column displays the Medicaid number for the child. |
| Enrolled in OPRA? | This column displays the child enrolled in OPRA (order/prescribe/refer/attend services). |
| Birth Date | This column displays the child's birth date. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|---|--|
| Add Child Doctor Add Child Doctor | Click this button to add a 'doctor' record for the child. When clicked, the system prompts a Child Doctor tab > Add Current Medical Professional Involved with Child" panel (shown below). |

8.1.4.5.3.1 Current Medical Professional Involved with Child Panel

 You use this panel to maintain up-to-date medical information, including current medical professionals, which is important to reflect in the child's record. This table captures information about the child's current medical professionals. Having the information available in this manner provides essential information in a convenient format.

Entering the National Provider Identifier (NPI) targets the best results. Entering the Doctor's Name, City, and State may also produce results if the NPI is unknown. Next, click the Search button for the best match for the criteria entered.

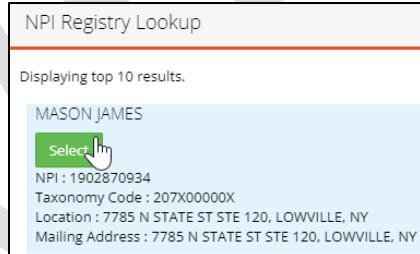
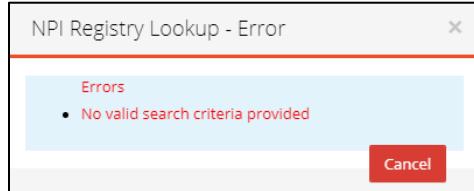


The screenshot shows a web-based form titled "Child Doctor" under the sub-section "Current Medical Professional Involved with Child". At the top, a note reads: "Entering the NPI will yield best results. Doctor Name and/or City/State may also be entered to produce results if NPI is unknown. Click the best match for the criteria entered." Below this are several input fields: "NPI", "Doctor's First Name", "Doctor's Last Name", "City", "State" (with a dropdown menu showing "... Select ..."), and a "Search" button. Further down are fields for "Doctor Name", "Date of Birth", "Practice", "NPI", "License Number", "Medicaid Number", "Taxonomy Code", "Address Line 1", "City", "State", "Zip", "Phone Number", "Fax Number", and "Email". At the bottom left is a checkbox for "Enrolled In OPRA", and at the bottom right is a blue "Submit" button.

 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|---|---|
| NPI Exactly 10 digits | A National Provider Identifier (NPI) is a number that identifies health care providers, whether or not they work for the Early Intervention Program (EIP). Enter the 10-positional numeric associated with the medical professional. If you do not know the NPI, it can be obtained by accessing the NPPES NPI Registry and searching for the provider. https://npiregistry.cms.hhs.gov/search |
| Doctor's First Name Exact name, or wildcard * after 2 characters | Enter the child's doctor's first name. |

| FIELD | DESCRIPTION |
|---|--|
| Doctor's Last Name Exact name, or wildcard * after 2 characters | Enter the child's doctor's last name. |
| City Exact name, or wildcard * after 2 characters | Enter the name of the city where the child's doctor resides. |
| State | Use this drop-down and select the appropriate state (abbreviation) where the child's doctor resides from the list. |

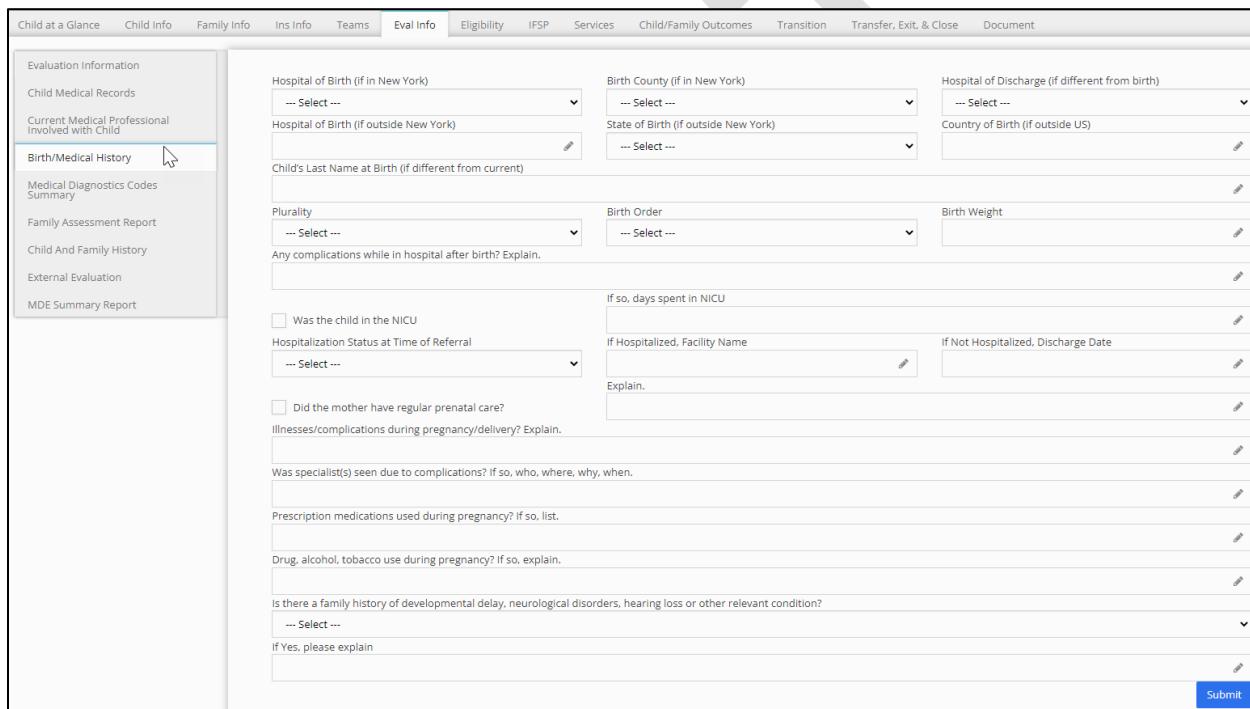
| BUTTON | DESCRIPTION |
|--|--|
| Search  | <p>After populating the above fields, or leaving blank to show all, click this button. The data results appear in the grid/table below. When clicked, the "NPI Registry Lookup" pop-up panel appears. Next, use your selection device (e.g., mouse), hover your pointer over the appropriate name of the Child's doctor, and select/click the Select button (example shown below).</p>  <p>i If you do not provide any data (e.g., leave all search fields blank) in the NPI search criteria section above, an error message pad prompts the user (example below).</p>  <p>i Fields reflecting the circle/slash symbol (⌚) indicate read-only. Information will populate with the search results.</p> |

| FIELD | DESCRIPTION |
|--|--|
| *Doctor Name | ⓘ This field is read-only and prepopulated based on your selection for the doctor's name lookup. |
| Date of Birth | Manually enter the doctor's date of birth or use the calendar picker (clicking this field); this field is optional. |
| Practice | Enter the name of the child's doctor's practice. |
| NPI | ⓘ This field is read-only and prepopulated based on your selection for the doctor's name lookup. |
| License Number | Enter the doctor's license number. |
| Medicaid Number | Enter the doctor's Medicaid number. |
| *Taxonomy Code | ⓘ This field is read-only and prepopulated based on your selection for the doctor's name lookup. |
| Address Line 1 | ⓘ This field is read-only and prepopulated based on your selection for the doctor's name lookup. |
| City | ⓘ This field is read-only and prepopulated based on your selection for the doctor's name lookup. |
| State | ⓘ This field is read-only and prepopulated based on your selection for the doctor's name lookup. |
| Zip | ⓘ This field is read-only and prepopulated based on your selection for the doctor's name lookup. |
| Phone Number | Enter the doctor's phone number. |
| Fax Number | Enter the doctor's fax number. |
| Email | Enter the doctor's email address. |
| <input type="checkbox"/> *Enrolled In OPRA | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. (i) OPRA stands for Ordering/Prescribing/Referring/Attending. These terms are relevant for all providers submitting Fee for Service (FFS) Medicaid claims and Practitioners who prescribe for Medicaid recipients. |

| BUTTON | DESCRIPTION |
|--|--|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-HUB database, and the record updates the Current Medical Professional Involved with Child panel. |

8.1.4.5.4 Birth/Medical History Panel

 Use this panel to capture the child's birth history and any prenatal care the mother received. It also captures premature birth complications, etc.



The screenshot shows the 'Birth/Medical History' panel selected in the left sidebar. The main area contains fields for birth information, including dropdowns for Hospital of Birth (if in New York), Birth County (if in New York), and Hospital of Discharge (if different from birth). There are also fields for Hospital of Birth (if outside New York), State of Birth (if outside New York), and Country of Birth (if outside US). Other fields include Plurality, Birth Order, Birth Weight, and a text area for Any complications while in hospital after birth? Explain. Below these are sections for NICU status, hospitalization status at referral, prenatal care, specialist visits, prescription medications, and family history. A 'Submit' button is located at the bottom right.

| FIELD | DESCRIPTION |
|--|---|
| Hospital of Birth (if in New York) | Use this drop-down and select the child's place of birth in New York (if applicable). |
| Birth County (if in New York) | Use this drop-down and select the child's birth county (if applicable). |
| Hospital of Discharge (if different from birth) | Use this drop-down and select the child's hospital discharge (if applicable). |
| Hospital of Birth (if outside New York) | Use this text field to enter the child's birthplace outside New York (if applicable). |

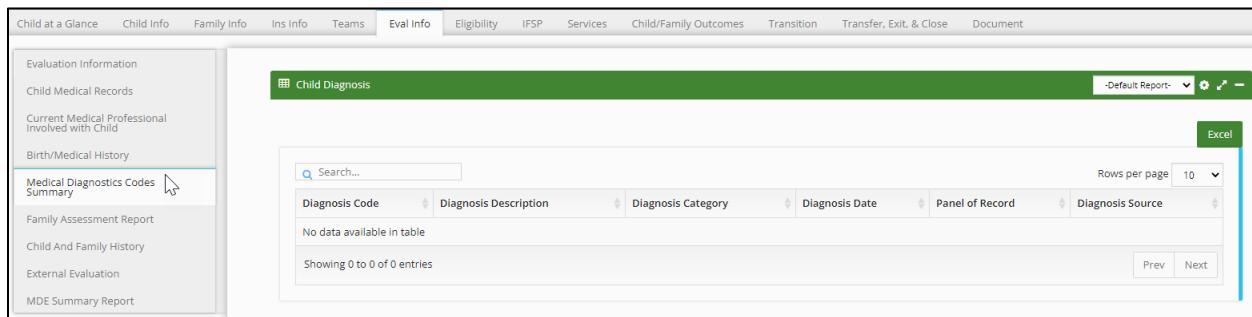
| FIELD | DESCRIPTION |
|--|--|
| State of Birth (if outside New York) | Use this text field to enter the child's birth state outside New York (if applicable). |
| Country of Birth (if outside US) | Use this text field to enter the child's place of birth country (if applicable). |
| Child's Last Name at Birth (if different from current) | Use this text field to enter the child's last name at birth (if applicable). |
| Plurality | Use this drop-down and select the appropriate multiple births, showing the total number of births resulting from a single pregnancy. |
| Birth Order | Use this drop-down and select the appropriate multiple births order, showing the total number of births resulting from a single pregnancy. |
| Birth Weight | Use this field to enter the child's birth weight. |
| Any complications while in hospital after birth? Explain. | Use this field to enter if any complications occurred during the child's birth. |
| <input type="checkbox"/> Was the child in the NICU? | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| If so, days spent in NICU | Use this text field to enter how many days the child spent in NICU (if applicable). |
| Hospitalization Status at Time of Referral | Use this drop-down and select the appropriate hospitalization status (e.g., Hospitalized or Discharged) at the time of the child's referral. |
| If Hospitalized, Facility Name | Use this text field to enter the facility's name if the child was hospitalized. |
| If Not Hospitalized, Discharge Date | Manually enter the date or use the calendar picker (invoked by clicking this field) for the child's hospital discharge date. |
| <input type="checkbox"/> Did the mother have regular prenatal care? | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Explain | If the child's mother received regular prenatal care, please explain. |
| QUESTIONS | USE THE ADJACENT FIELDS FOR EACH QUESTION AND ENTER A RESPONSE |
| Illnesses/complications during pregnancy/delivery? Explain. | Use the text field provided for entering your response. |

| FIELD | DESCRIPTION |
|--|---|
| Was specialist(s) seen due to complications? If so, who, where, why, when. | Use the text field provided for entering your response. |
| Prescription medications used during pregnancy? If so, list. | Use the text field provided for entering your response. |
| Drug, alcohol, tobacco use during pregnancy? If so, explain. | Use the text field provided for entering your response. |
| Is there a family history of developmental delay, neurological disorders, hearing loss, or other relevant conditions? | Use this drop-down and select the appropriate response ('Yes' or 'No') from the list. |
| If Yes, please explain | Enter a brief explanation of any developmental delays for the child's family (parent, siblings, etc.) in this text field. |

| BUTTON | DESCRIPTION |
|--|---|
| Submit <input type="button" value="Submit"/> | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Birth/Medical History panel. |

8.1.4.5.5 Medical Diagnostics Codes Summary Grid/Table

 This grid/table is not for inputting data; display only. Throughout the EI-Hub case management, as diagnoses are recorded (e.g., after an evaluation has occurred), it will reflect here. It will show which panel the information came from as well. The data is for billing and claims.



 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

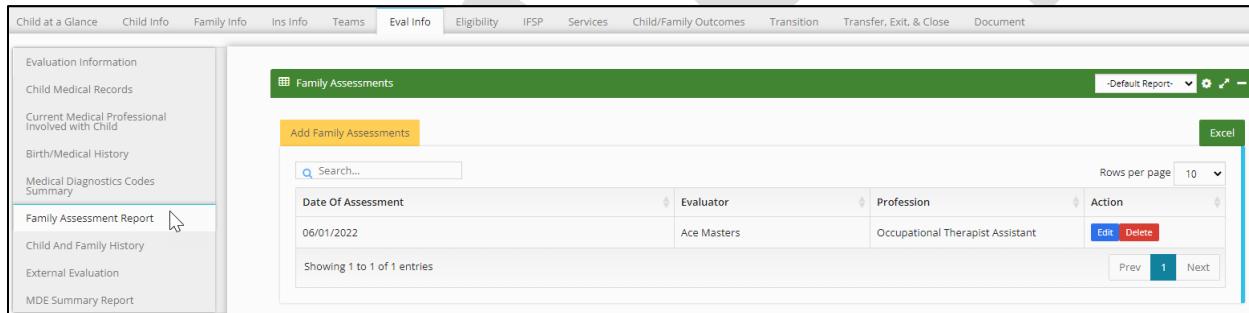
| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|------------------------------|---|
| Diagnosis Code | This column displays the child's diagnosis code. |
| Diagnosis Description | This column displays the diagnosis code description. |
| Diagnosis Category | This column displays the diagnosis category (e.g., Fracture, etc.). |
| Diagnosis Date | This column displays the diagnosis date. |
| Panel of Record | This column displays the panel of record (e.g., Evaluation Assessment, etc.). |
| Diagnosis Source | This column displays the diagnosis source (e.g., Referral, etc.). |

| BUTTON | DESCRIPTION |
|---|--|
| Excel  | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet.</p> <p>To see your results in excel, click Open.</p> <p>(i) Leaving all the Report Filters fields blank will show "all" results.</p> <p>(i) The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system.</p> |

8.1.4.5.6 Family Assessment Report Grid/Table

 This grid/table is not mandatory; this is where you enter the family assessment.



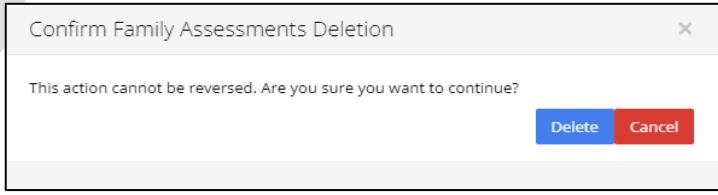
| Date Of Assessment | Evaluator | Profession | Action |
|--------------------|-------------|----------------------------------|---|
| 06/01/2022 | Ace Masters | Occupational Therapist Assistant | Edit Delete |

(i) See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|---|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|---------------------------|--|
| Date Of Assessment | This column displays the family assessment date. |
| Evaluator | This column displays the evaluator's name who assessed the child's family. |

| COLUMN | DESCRIPTION |
|------------|--|
| Profession | This column displays the evaluator's profession. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|--|---|
| Add Family Assessment  | Click this button to add a 'Family Assessment' record for the child. When clicked, the Family Assessment tab > Family Assessment panel appears (shown below). |
| Excel  | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet. To see your results in excel, click Open.</p> <p>i Leaving all the Report Filters fields blank will show "all" results.</p> <p>i The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system.</p> |
| Edit  | <p>Click this button to view or edit a 'Family Assessment' record for the child. When clicked, the Evaluation Assessment Report panel appears.</p> <p>i The fields and descriptions for editing the Family Assessment panel are the same for adding; the Evaluation Assessment panel appears (ref. below).</p> |
| Delete  | <p>Click this button adjacent to the appropriate record/row to delete an existing family assessment. When clicked, the system prompts a confirmation message pad popup (shown below); click the Delete button to proceed or click the Cancel button to retract.</p>  |

8.1.4.5.6.1 Family Assessment Panel

 This panel is not mandatory; this is where you enter the family assessment. It is not the same as the family needs assessment; this helps determine EIP eligibility.

 Due to the length of this panel, the screenshots are in sections.



The screenshot shows a software interface titled 'Family Assessment'. On the left is a sidebar with a tree view containing 'Family Assessment' and other collapsed categories. The main area contains several dropdown menus and input fields:

- *Voluntary Family Assessment Offered and Refused: A dropdown menu with options like 'Select ...' and 'Yes'.
- *Date of Assessment: A date picker field.
- Family Assessment Instrument Used: A dropdown menu with options like 'Select ...' and 'Adaptive Behavioral Assessment'.
- Family Member(s) Participating in Assessment: A dropdown menu with options like 'Select Some Options' and a list of names.
- *Evaluator Completing Assessment: A dropdown menu with options like 'Select ...' and 'LCSW'.
- Discipline: A read-only field showing 'LCSW'.

 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD / CHECKBOX | DESCRIPTION |
|--|--|
| *Voluntary Family Assessment Offered and Refused | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |
| *Date of Assessment | Enter the family assessment date manually or use the calendar picker (invoked by clicking this field). |
| Family Assessment Instrument Use | Use this drop-down and select the appropriate assessment instrument (e.g., Adaptive Behavioral Assessment, etc.) from the list. |
| Family Member(s) Participating in Assessment | Click in this field and use this drop-down or type ahead to search and select the appropriate family member to participate from the list. |
| *Evaluator Completing Assessment | Use this drop-down and select the appropriate evaluator from the list. |
| Discipline | After selecting the evaluator's name and completing the child's assessment above, this read-only field populates the evaluator's discipline (e.g., Licensed Clinical Social Worker, etc.). |

Do you need help with or need information about any of the following? (Check all that apply)



If you select Yes' to answer a question(s) below, a "Describe" textbox appears beneath the question answered 'Yes' (example below).

| |
|----------------------------------|
| Your child's developmental needs |
| Yes |
| Describe |

Do you need help with or need information about any of the following? (Check all that apply)

Your child's developmental needs

... Select ...

Information related to your child's developmental disability/disability

... Select ...

Housing, food, clothing

... Select ...

Finding employment

... Select ...

Telephone, Technology (i.e., internet connectivity)

... Select ...

Transportation (i.e., to/from medical appointments, car seat)

... Select ...

Finding a physician or other specialists

... Select ...

Finding childcare

... Select ...

Help for caregivers so you can have a break (i.e. respite)

... Select ...

Mental health resources

... Select ...

Coping with your child's developmental delay/disability

... Select ...

Helping your child's siblings adjust to having a sibling with a developmental delay/disability

... Select ...

Equipment, supplies, assistive technology devices (ATDs) and/or services

... Select ...

Ideas for family/play activities at home or in the community

... Select ...

Integrating your child into the community and activities

... Select ...

Meeting with other families in your community

... Select ...

Modifying your home to assist with activities of daily living for your child

... Select ...

Family training/education

... Select ...

Planning for the future; what to expect

... Select ...

| FIELD / CHECKBOX | DESCRIPTION |
|----------------------------------|---|
| Your child's developmental needs | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |

| FIELD / CHECKBOX | DESCRIPTION |
|---|---|
| Information related to your child's developmental disability/disability | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |
| Housing, food, clothing | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |
| Finding employment | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |
| Telephone, Technology (i.e., internet connectivity) | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |
| Transportation (i.e., to/from medical appointments, car seat) | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |
| Finding a physician or other specialists | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |
| Finding childcare | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |
| Help for caregivers so you can have a break (i.e., respite) | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |
| Mental health resources | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |
| Coping with your child's developmental delay/disability | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |
| Helping your child's siblings adjust to having a sibling with a developmental delay/disability | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |
| Equipment, supplies, assistive technology devices (ATDs), and/or services | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |

| FIELD / CHECKBOX | DESCRIPTION |
|---|---|
| Ideas for family/play activities at home or in the community | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |
| Integrating your child into the community and activities | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |
| Meeting with other families in your community | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |
| Modifying your home to assist with activities of daily living for your child | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |
| Family training/education | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |
| Planning for the future; what to expect | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |

8.1.4.5.6.1.1 Family-Directed Assessment (priorities, resources, and concerns) Family Routines

| |
|---|
| Family-Directed Assessment (priorities, resources, and concerns) |
| Family Routines |
| Waking / Sleep Routines (i.e., Describe how your child lets you know he/she is awake. Describe nap/bedtime routines with your child, can they go to sleep independently?) |
| What are your priorities, resources, and concerns? |
| Feeding / Mealtime Routines (i.e., Describe how your child eats, drinks, lets you know they are hungry, favorite foods, foods that are difficult.) |
| What are your priorities, resources, and concerns? |
| Diapering / Dressing Routines (i.e., Describe how your child does with diapering? Putting on clothes?) |
| What are your priorities, resources, and concerns? |
| Playtime Routines Indoor / Outdoor (i.e., Favorite toys? Enjoys outdoors? Usual play routines, who do they play with?) |
| What are your priorities, resources, and concerns? |
| Bath time Routines (i.e., Describe bath time with your child.) |
| What are your priorities, resources, and concerns? |
| Errands / Getting ready to go out Routines (i.e., Describe how your child does on outings or during transitions from one activity to another.) |
| What are your priorities, resources, and concerns? |
| Family time Routines (i.e., How does your family spend time together? What does your family do for fun?) |
| What are your priorities, resources, and concerns? |
| Parent / Child Relationships and Interactions (i.e., Describe how you interact / engage or play with your child.) |
| What are your priorities, resources, and concerns? |
| Parent and Child's Social & Emotional Health (i.e., Describe how your family/child copes with stress) |
| What are your priorities, resources, and concerns? |
| Resources (i.e., family, extended family, church, WIC, Medicaid, Doctors, SSI, etc.) |
| Who are your supports? What programs outside of the Program are your family involved with? What resources would you like help contacting? |
| Is there anything else that would be helpful for your family? |
| Are there any other priorities, resources, or concerns in relation to your child and family that we have not discussed? ... Select ... |
| Additional Information |
| Evaluator(s) Comments |
| <input type="button" value="Submit"/> |

| FIELD / CHECKBOX | DESCRIPTION |
|---|---|
| Waking / Sleep Routines(i.e., Describe how your child lets you know he/she is awake. Describe nap/bedtime routines with your child, can they go to sleep independently?) | Use the text box to enter the findings that the family assessing their child's priorities, resources, and concerns. |
| What are your priorities, resources, and concerns? | Use the text box to enter the findings that the family assessing their child's priorities, resources, and concerns. |
| Feeding / Mealtime Routines (i.e., Describe how your child eats, drinks, lets you know they are hungry, favorite foods, and foods that are difficult.) | Use the text box to enter the findings that the family assessing their child's priorities, resources, and concerns. |
| What are your priorities, resources, and concerns? | Use the text box to enter the findings that the family assessing their child's priorities, resources, and concerns. |
| Diapering / Dressing Routines (i.e., Describe how your child does with diapering? Putting on clothes?) | Use the text box to enter the findings that the family assessing their child's priorities, resources, and concerns. |
| What are your priorities, resources, and concerns? | Use the text box to enter the findings that the family assessing their child's priorities, resources, and concerns. |
| Playtime Routines Indoor / Outdoor (i.e., Favorite toys? Enjoys outdoors? Usual play routines, who do they play with?) | Use the text box to enter the findings that the family assessing their child's priorities, resources, and concerns. |
| What are your priorities, resources, and concerns? | Use the text box to enter the findings that the family assessing their child's priorities, resources, and concerns. |

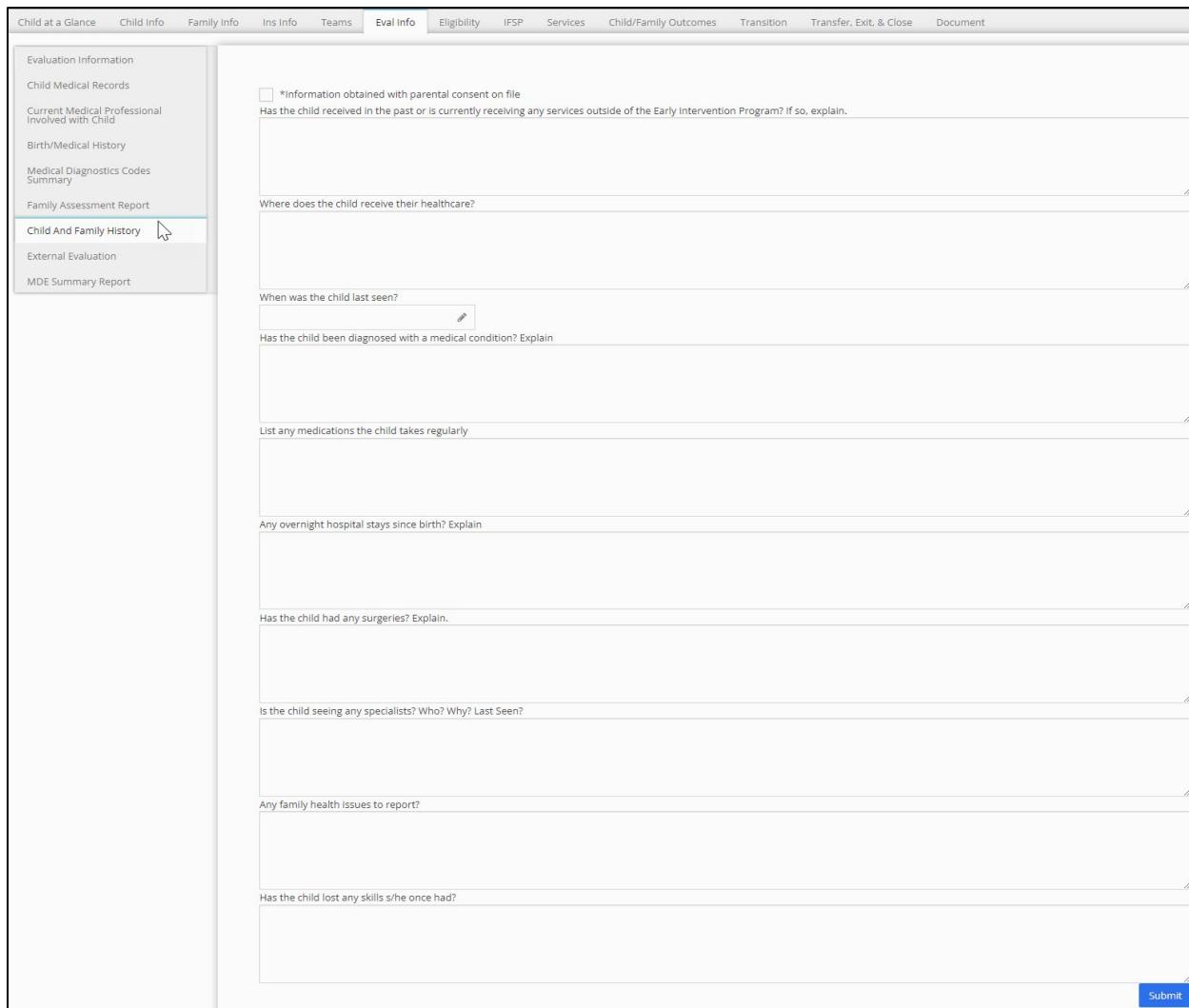
| FIELD / CHECKBOX | DESCRIPTION |
|---|---|
| Bath time Routines (i.e., Describe bath time with your child.) | Use the text box to enter the findings that the family assessing their child's priorities, resources, and concerns. |
| What are your priorities, resources, and concerns? | Use the text box to enter the findings that the family assessing their child's priorities, resources, and concerns. |
| Errands / Getting ready to go out Routines (i.e., Describe how your child does on outings or during transitions from one activity to another.) | Use the text box to enter the findings that the family assessing their child's priorities, resources, and concerns. |
| What are your priorities, resources, and concerns? | Use the text box to enter the findings that the family assessing their child's priorities, resources, and concerns. |
| Family time Routines (i.e., How does your family spend time together? What does your family do for fun?) | Use the text box to enter the findings that the family assessing their child's priorities, resources, and concerns. |
| What are your priorities, resources, and concerns? | Use the text box to enter the findings that the family assessing their child's priorities, resources, and concerns. |
| Parent / Child Relationships and Interactions (i.e., Describe how you interact/engage or play with your child.) | Use the text box to enter the findings that the family assessing their child's priorities, resources, and concerns. |
| What are your priorities, resources, and concerns? | Use the text box to enter the findings that the family assessing their child's priorities, resources, and concerns. |
| Parent and Child's Social & Emotional Health (i.e., Describe how your family/child copes with stress) | Use the text box to enter the findings that the family assessing their child's priorities, resources, and concerns. |

| FIELD / CHECKBOX | DESCRIPTION |
|--|---|
| What are your priorities, resources, and concerns? | Use the text box to enter the findings that the family assessing their child's priorities, resources, and concerns. |
| Resources (i.e., family, extended family, church, WIC, Medicaid, Doctors, SSI, etc.) | Use the text box to enter the findings that the family assessing their child's priorities, resources, and concerns. |
| Who are your supporters? What programs outside of the Program are your family involved with? What resources would you like help contacting? | Use the text box to enter the findings that the family assessing their child's priorities, resources, and concerns. |
| Is there anything else that would be helpful for your family? | Use the text box to enter the findings that the family assessing their child's priorities, resources, and concerns. |
| Are there any other priorities, resources, or concerns in relation to your child and family that we have not discussed? | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |
| Additional Information | Use the text box and provide any additional information on the child. |
| Evaluator(s) Comments | Use the text box and add any comments made by the evaluator(s). |

| BUTTON | DESCRIPTION |
|--|---|
| Submit <input type="button" value="Submit"/> | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Family Assessment panel. |

8.1.4.5.7 Child and Family History Panel

 The Child and Family History grid/table can be multiple entries. For example, the Service Coordinator (SC) would enter medical records from outside providers using this panel.



Evaluation Information
Child Medical Records
Current Medical Professional Involved with Child
Birth/Medical History
Medical Diagnostics Codes Summary
Family Assessment Report
Child And Family History 
External Evaluation
MDE Summary Report

*Information obtained with parental consent on file
Has the child received in the past or is currently receiving any services outside of the Early Intervention Program? if so, explain.

Where does the child receive their healthcare?

When was the child last seen?

Has the child been diagnosed with a medical condition? Explain

List any medications the child takes regularly

Any overnight hospital stays since birth? Explain

Has the child had any surgeries? Explain.

Is the child seeing any specialists? Who? Why? Last Seen?

Any family health issues to report?

Has the child lost any skills s/he once had?

Submit

 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD / CHECKBOX | DESCRIPTION |
|---|---|
| <input type="checkbox"/> Information obtained with parental consent on file | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| QUESTIONS | USE THE ADJACENT FIELDS FOR EACH QUESTION AND ENTER A RESPONSE |

| FIELD / CHECKBOX | DESCRIPTION |
|---|-------------|
| Has the child received in the past or is currently receiving any services outside of the Early Intervention Program? If so, explain. | |
| Where does the child receive their healthcare? | |
| When was the child last seen? | |
| Has the child been diagnosed with a medical condition? Explain | |
| List any medications the child takes regularly | |
| Any overnight hospital stays since birth? Explain | |
| Has the child had any surgeries? Explain. | |
| Is the child seeing any specialists? Who? Why? Last Seen? | |
| Any family health issues to report? | |
| Has the child lost any skills s/he once had? | |

| BUTTON | DESCRIPTION |
|--|--|
| Submit <input type="button" value="Submit"/> | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Child and Family History panel. |

8.1.4.5.8 External Evaluation Grid/Table

 Some children will come to EIP after receiving external evaluation (e.g., from another state or a private therapist). This grid/table captures the results from the external assessment/evaluation.

 For external evaluations, you do not need a service authorization because services were provided outside the EIP.

 Please refer to the NYS Department of Health's "[Appropriate Use of External Evaluations](#)" guidelines.



 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|---------------------------------|--|
| External Evaluation Type | This column displays the external evaluation type. |
| Affiliation Name | This column displays the affiliation name of the person who assessed the child. |
| Clinician Name | This column displays the name of the clinician. |
| QP Code | This column displays the qualified personnel (QP) code.  Additional reference – see ‘Schedule 5 – Personnel’ section . |

| COLUMN | DESCRIPTION |
|-----------------------|--|
| Phone Number | This column displays the phone number of the affiliation. |
| Diagnosis Date | This column displays the diagnosis date performed on the child. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|--|--|
| Add External Evaluation Assessment  | Click this button to add an 'External Evaluation Assessment' record for the child. The External Evaluation Assessments tab – External Evaluation and External Evaluation Assessment panels appears (shown below). |
| Excel  | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet.</p> <p>To see your results in excel, click Open.</p> <p>(i) Leaving all the Report Filters fields blank will show "all" results.</p> <p>(i) The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system.</p> |

8.1.4.5.8.1 External Evaluation Assessments Tab/External Evaluation Panel

The screenshot shows the 'External Evaluation Assessments' panel. At the top left, there's a navigation bar with tabs: 'External Evaluation' (which is active, indicated by a blue border) and 'External Evaluation Assessment'. The main area contains several input fields:

- *External Evaluation Type:** A dropdown menu with the placeholder "... Select ...".
- Please address all that apply:**
 - *Obtained external evaluation record with parental consent:** A dropdown menu with the placeholder "... Select ...".
 - *Reviewed external evaluation record:** A dropdown menu with the placeholder "... Select ...".
 - *Consulted with external evaluator by phone or through correspondence:** A dropdown menu with the placeholder "... Select ...".
- The Evaluation team must certify the following:**
 - Development Assessment Performed?**: A dropdown menu with the placeholder "... Select ...".
 - If a developmental assessment was performed, comments are required.
- Health Assessment Performed?**: A dropdown menu with the placeholder "... Select ...".
- General Comments**: A large text area for general notes.
- Diagnosis Made By**: A text input field.
- Date of Diagnosis**: A text input field.
- ICD 10 Code & Description Search**: A search bar with a magnifying glass icon.
- Diagnosed Conditions**: A section with the placeholder "Select Some Options".
- *Affiliation Name**: A text input field.
- *Clinician Name**: A text input field.
- QP Code (Profession Code)**: A dropdown menu with the placeholder "... Select ...".
- If Not, Other Profession**: A text input field.
- Address (for the Clinician/Affiliation)**: A section with the placeholder "Address Line 1" and "Address Line 2".
- City**: A text input field.
- State**: A dropdown menu with the placeholder "... Select ...".
- Zip**: A text input field.
- Phone Number**: A text input field.
- Submit**: A blue button at the bottom right.

(i) An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|----------------------------------|---|
| *External Evaluation Type | Use this drop-down and select the appropriate external evaluation type from the list. |

Please address all that apply:

| FIELD | DESCRIPTION |
|--|---|
| *Obtained external evaluation record with parental consent | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |
| *Reviewed external evaluation record | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |
| *Consulted with external evaluator by phone or through correspondence | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |

The Evaluation team must certify the following:

| FIELD | DESCRIPTION |
|---|--|
| Development Assessment Performed? | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |
| If a developmental assessment was performed, comments are required | Use this textbox for your corresponding comments. |
| Health Assessment Performed? | Use this drop-down field and select the appropriate answer ('Yes' or 'No'). |
| If a health assessment was performed, comments are required | Use this textbox for your corresponding comments. |
| General Comments | Use this textbox for your general comments. |
| Diagnosis Made By | Enter the evaluator's name for decisions made. |
| Date of Diagnosis | Manually enter the diagnosis date or use the calendar picker (invoked by clicking this field). |
| ICD 10 Code & Description Search | Begin typing an ICD code and description in this field to activate the drop-down and choose the appropriate ICD Codes from the list. |
| Diagnosed Conditions | Begin typing a diagnosed condition in this field to activate the drop-down and choose (Select Some Options) the appropriate diagnosed condition from the list. |

| FIELD | DESCRIPTION |
|-----------------------------|---|
| *Affiliation Name | Enter the affiliation name of the person who assessed the child. |
| *Clinician Name | Enter the name of the clinician who assessed the child. |
| QP Code (Professional Code) | Use this drop-down and select the appropriate QP code from the list. |
| If Not, Other Profession | If the affiliation has a different profession, enter this text field. |

Address (for the Clinician/Affiliation)

| FIELD | DESCRIPTION |
|----------------|--|
| Address Line 1 | Enter the clinician/affiliation address line 1. |
| Address Line 2 | Enter the clinician/affiliation address line 2. |
| City | Enter the clinician/affiliation city. |
| State | Use this drop-down and select the clinician/affiliation state. |
| Zip | Enter the clinician/affiliation zip code. |
| Phone Number | Enter the clinician/affiliation phone number. |

| BUTTON | DESCRIPTION |
|---|---|
| Submit <input type="button" value="Submit"/> | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the External Evaluation panel. |

8.1.4.5.8.2 External Evaluation Assessment Grid/Table

 To view or add an External Evaluation Assessment, use this grid/table.



 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

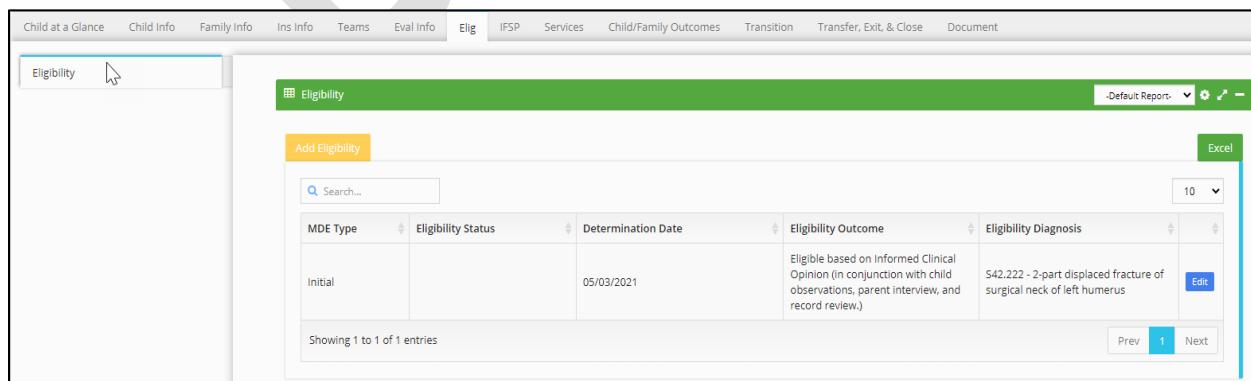
 For functionality (fields, descriptions, and buttons), please refer to the section [Evaluation Assessment Panel](#); this includes adding an 'External Evaluation Assessment.'

8.1.4.6 Eligibility (Elig) Tab

 Once the child's assessment is complete, medical records reviewed, etc., the evaluation team scores the child and reports their findings to the EIO/D. The EIOD reviews the evaluation to ensure that the required components of the evaluation reflect within the evaluation document and that the eligibility determination made by the evaluator is in line with the program regulations and guidance.

The grid allows multiple entries because a child can enroll and re-enroll. However, if the child is out of the program for six (6) months, the child needs to restart the process. Using this grid/table, the SC can reassess for continued eligibility.

8.1.4.6.1 Eligibility Grid/Table





See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|---------------|--|
| Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|------------------------------|--|
| MDE Type | This column displays the status of the Multi-Disciplinary Evaluation (MDE) type. |
| Eligibility Status | This column displays the status of the eligibility. |
| Determination Date | This column displays the date of the determination of eligibility. |
| Eligibility Outcome | This column displays the outcome of the eligibility. |
| Eligibility Diagnosis | This column displays the description of the eligibility diagnosis. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

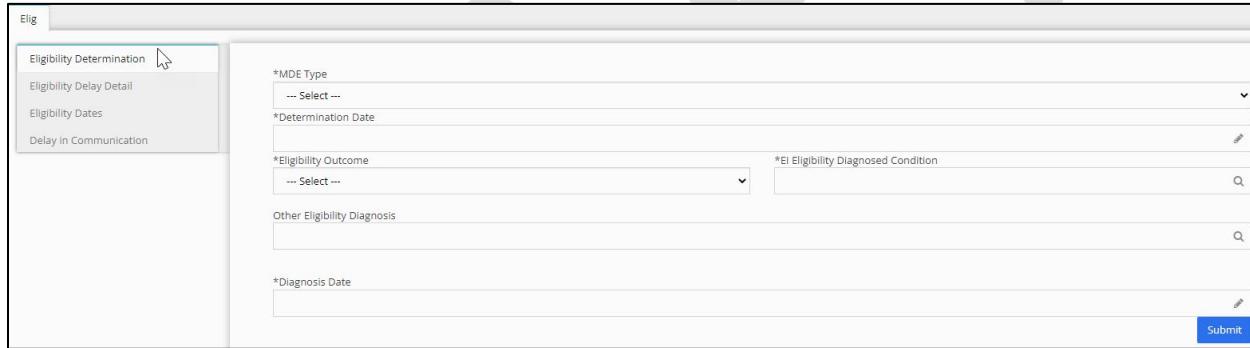
| BUTTON | DESCRIPTION |
|----------------------------|--|
| Add Eligibility | To add an 'eligibility' record for the child, click this button. When clicked, the Elig tab and the following panels (Eligibility Determination, Eligibility Delay Detail, Eligibility Dates, and Delay in Communication) appear (shown below). |
| Excel | Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet. To see your results in excel, click Open . Leaving all the Report Filters fields blank will show "all" results. The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the El-Hub system. |

| BUTTON | DESCRIPTION |
|--|---|
| Edit  | <p>Click this button to view or edit the child's Eligibility record. When clicked, the Elig tab and the following panels (Eligibility Determination, Eligibility Delay Detail, Eligibility Dates, and Delay in Communication) appear.</p> <p> The fields and descriptions for editing within the Elig tab multiple panels are the same for adding multiple panels within the 'Elig' tab (ref. below).</p> |

8.1.4.6.1.1 Eligibility Determination Panel

 This panel begins the creation of the eligibility record. Once completed, you can then move on to the other panels.

A child can be eligible by an informed clinical opinion, a medical diagnosis, or a measurement of developmental delay. What you select for 'Eligibility Outcome' will determine additional fields to be completed.



 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

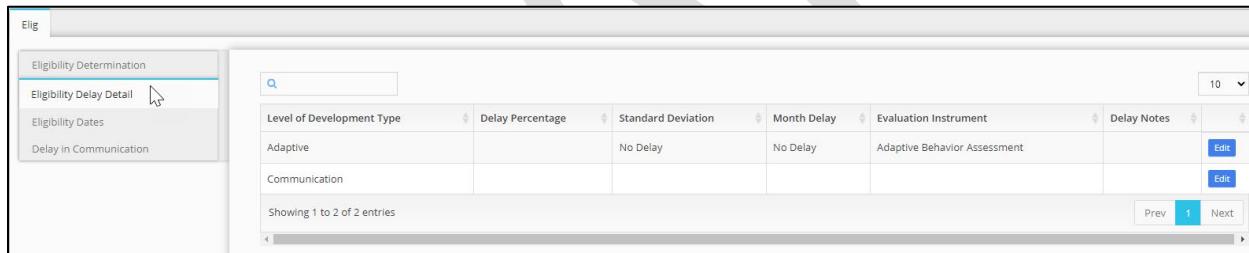
| FIELD | DESCRIPTION |
|-------------------------------------|---|
| *MDE Type | Use this drop-down and select the appropriate Multidisciplinary Evaluation (MDE) from the list. |
| *Determination Date | Manually enter the determination date or use the calendar picker (invoked by clicking this field). |
| *Eligibility Outcome | Use this drop-down and select the appropriate eligibility outcome (e.g., Eligible-Diagnosed Condition, etc.) from the list for the child. |
| *EI Eligibility Diagnosed Condition | To add an early intervention eligibility diagnosis condition, begin typing (type ahead) in this field to activate a drop-down search list and select the appropriate diagnosis. |

| FIELD | DESCRIPTION |
|------------------------------------|---|
| Other Eligibility Diagnosis | To add another eligibility diagnosed condition, begin typing (type ahead) in this field to activate a drop-down search list and select the appropriate diagnosis. |
| *Diagnosis Date | Manually enter the diagnosis date or use the calendar picker (invoked by clicking this field). |

| BUTTON | DESCRIPTION |
|--|---|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Eligibility panel. |

8.1.4.6.1.2 Eligibility Delay Detail Grid/Table

 Transcribe information to support the selection on the previous panel. For example, if there is a 33% delay in one domain, you can enter the domains and the delay percentage in This grid/table. This data supports information in the other panels.



| Level of Development Type | Delay Percentage | Standard Deviation | Month Delay | Evaluation Instrument | Delay Notes |
|---------------------------|------------------|--------------------|-------------|------------------------------|--|
| Adaptive | No Delay | No Delay | No Delay | Adaptive Behavior Assessment |   |
| Communication | | | | |   |

Showing 1 to 2 of 2 entries
Prev **1** Next

 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| COLUMN | DESCRIPTION |
|------------------------------------|---|
| Level of Developmental Type | This column displays the child's level of development type. |
| Delay Percentage | This column displays the child's delay percentage. |
| Standard Deviation | This column displays the child's standard deviation. |
| Monthly Delay | This column displays the child's monthly delay. |

| COLUMN | DESCRIPTION |
|-----------------------|---|
| Evaluation Instrument | This column displays the evaluation instrument used on the child. |
| Delay Notes | This column displays any relevant delay notes on the child. |

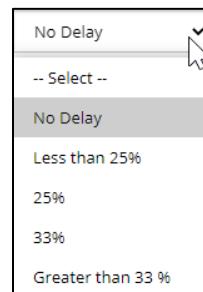
| BUTTON | DESCRIPTION |
|--------|--|
| Edit | To view or edit a level of developmental delay for the child, click this button adjacent to the appropriate development type record/row. When clicked, the Edit Eligibility Delay Detail popup panel appears (see the example below for selecting “Adaptive”). |

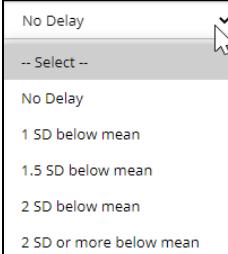
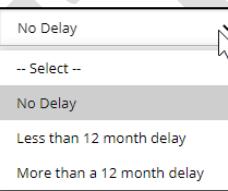
8.1.4.6.1.2.1 Edit Eligibility Delay Detail Popup Panel

The screenshot shows the 'Edit Eligibility Delay Detail' dialog box. It contains fields for Delay Percentage, Standard Deviation, Month Delay, Evaluation Instrument, and a Delay Notes text area. The Evaluation Instrument field is currently set to 'Adaptive Behavior Assessment'. The dialog has 'Submit' and 'Cancel' buttons at the bottom.

An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|------------------|--|
| Delay Percentage | Use this drop-down and select the appropriate value from the list (shown below). |



| FIELD | DESCRIPTION |
|-------------------------------|---|
| Standard Deviation | Use this drop-down and select the appropriate value from the list (shown below).  |
| Month Delay | Use this drop-down and select the appropriate value from the list (shown below).  |
| *Evaluation Instrument | Use this drop-down and select the appropriate evaluation instrument used from the list. |
| Delay Notes | Enter any additional delay notes in this text box. |

| BUTTON | DESCRIPTION |
|--|--|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Eligibility Delay Detail panel. |
| Cancel  | To cancel your entry, click this button. Nothing saves, and the Edit Eligibility Delay Detail popup panel closes. |

8.1.4.6.1.3 Eligibility Dates Panel

 Use this panel to alert the EIO/D to review the eligibility determination date by selecting the 'Sent To EIO/D For Review' checkbox. The system sends a notification to the EIO/D dashboard. The EIO/D can then review (here) the eligibility and confirm or send it back for more documentation.



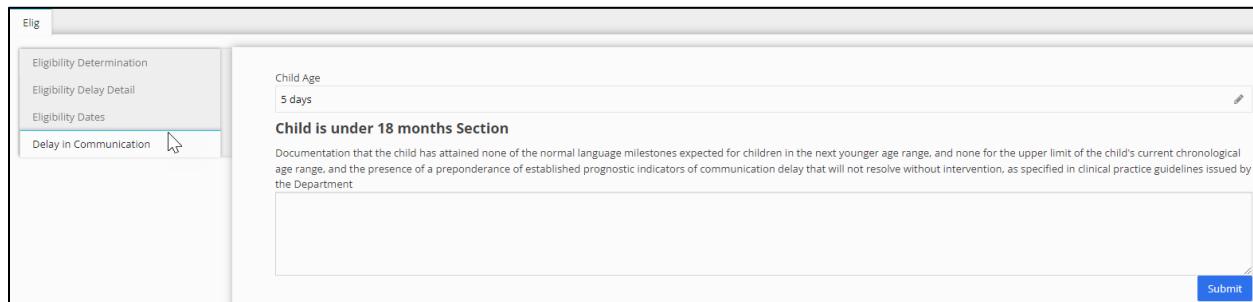
| FIELD | DESCRIPTION |
|---|--|
| *Determination Date | Enter the child's determination date manually or use the calendar picker (invoked by clicking this field). |
| <input type="checkbox"/> Sent To EIO/D For Review | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| EIO/D Review Date | Enter the EIO/D review date manually or use the calendar picker (invoked by clicking this field). |
| EIO/D reviews & confirms eligibility criteria have been met | Use this drop-down and select the appropriate eligibility criteria from the list.  If the EIO/D rejects the eligibility determination, the child's record is returned to the service coordinator's dashboard. |
| Comment | Enter any additional comments about the child's eligibility determination. |

| BUTTON | DESCRIPTION |
|--------|---|
| Submit | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Eligibility Dates panel. |

8.1.4.6.1.4 Delay in Communication Panel

 This panel is for a child with specific delays in communication. Therefore, you may not need to complete it for each child. However, if the outcome from the first panel is eligible due to a communication delay, this panel must be complete with supporting that determination.

- Depending on the age of the child, two fields will appear:
 - A child is under 18 months, and a child is 18 months and over.
 - When they are <18 months, there are fewer fields to complete.



| FIELD | DESCRIPTION |
|--|---|
| Child Age | A read-only field displays the child's age. |
| Documentation that the child has attained none of the normal language milestones expected for children in the next younger age range, and none for the upper limit of the child's current chronological age range, and the presence of a preponderance of established prognostic indicators of communication delay that will not resolve without intervention, as specified in clinical practice guidelines issued by the Department | Use this textbox to document any findings/observations with the child for the delay in communication. |

Elig

| | |
|-------------------------------|---|
| Eligibility Determination | Child Age 2 years 4 months 9 days |
| Eligibility Delay Detail | Child is 18 months of age and over Section |
| Eligibility Dates | Language Production |
| Delay in Communication | Language Comprehension |
| | Phonology |
| | Imitation |
| | Play |
| | Gestures |
| | Social Skills |
| | Health and Family History of Language Problems |
| | Submit |

| FIELD | DESCRIPTION |
|------------------|---|
| Child Age | A read-only field displays the child's age. |

Child is 18 months of age and over Section

| FIELD | DESCRIPTION |
|--------------------------------------|---|
| Language Production (Development) | If appropriate, enter information regarding the child's language production. (i) For more information, please refer to the <u>Clinical Practice Guidelines for Communication</u> . |
| Language Comprehension | If appropriate, enter information regarding the child's language comprehension. (i) For more information, please refer to the <u>Clinical Practice Guidelines for Communication</u> . |

| FIELD | DESCRIPTION |
|--|--|
| Phonology | If appropriate, enter information regarding the child's phonology. ⓘ For more information, please refer to the <u>Clinical Practice Guidelines for Communication</u> . |
| Imitation | If appropriate, enter information regarding the child's imitation. ⓘ For more information, please refer to the <u>Clinical Practice Guidelines for Communication</u> . |
| Play | If appropriate, enter information regarding the child's play. ⓘ For more information, please refer to the <u>Clinical Practice Guidelines for Communication</u> . |
| Gestures | If appropriate, enter information regarding the child's gestures. ⓘ For more information, please refer to the <u>Clinical Practice Guidelines for Communication</u> . |
| Social Skills | If appropriate, enter information regarding the child's social skills. ⓘ For more information, please refer to the <u>Clinical Practice Guidelines for Communication</u> . |
| Health and Family History of Language Problems | If appropriate, enter information regarding the child's family health and history of language problems. ⓘ For more information, please refer to the <u>Clinical Practice Guidelines for Communication</u> . |

| BUTTON | DESCRIPTION |
|---|--|
| Submit <input type="button" value="Submit"/> | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Delay in Communication panel. |

8.1.4.7 IFSP Tab

 **IFSP, Services, and Review:** The EI-Hub will allow users (dependent on their role) to enter, search for, access, and manipulate data required for creating and modifying IFSPs, along with IFSP goals description and status. Users will also be able to upload IFSP-related documents as needed.

- The IFSP process moves the IFSP through various status options within the EI-Hub.
- When a new IFSP is created, it will appear in Draft status, move into a Submitted status, and be assigned EIOD for approval.
- After approval, the status changes to Approved; however, the IFSP is not ‘Active’ until **the start date of the IFSP is reached.**
- An exception to this would be for Amendments. An Amended IFSP becomes Active when approved. The current IFSP closes when a new IFSP becomes active.

| IFSP STATUSES | DESCRIPTION |
|---------------|--|
| Draft Status | <p>The IFSP is in this status as the service coordinator works on developing the IFSP before submission to the EIOD. The user can delete IFSPs in this status without impacting any other information in the child's record. Also, IFSPs rejected by the EIOD revert to draft status.</p> <p> In a rejected IFSP, the EI-Hub does not differentiate IFSPs in the initial draft status vs. IFSPs in a draft status due to an EIOD Rejection. If a user selects/clicks 'Delete,' any IFSP in draft status is permanently deleted</p> |
| Submitted | The status of the IFSP enters once the service coordinator has completed drafting the IFSP and sent it to the EIOD for review. |
| Approved | The EIO/D has approved the IFSP; however, the start date of the IFSP has not been reached. |
| Cancel | Changing the status from Draft to Cancel is a “soft delete” of the IFSP. The user can see the status of cancel assigned to an IFSP. |
| Active | An Active IFSP is the current IFSP in effect for the child. |
| Closed | The end date of the IFSP has been reached, and the IFSP is no longer Active. |



In preparation for the upcoming IFSP meeting, the service coordinator may enter the information or update the needed information to create the IFSP. You can carry the information to the new IFSP being created either by copying the previous IFSP or creating a new IFSP. The IFSP may include the Health History, Present Levels of Development (PLOD) Information, and Outcomes Information. Not all information will be entered or updated for all IFSP types.



Child Outcomes Summary (COSF) entry form would be ONLY used at the Initial IFSP meeting.

Based on the goals and objectives developed by the IFSP team, the IFSP meeting identifies the types and frequencies of services needed to assist the child in achieving the identified outcomes. The family either agrees or disagrees with the services and frequencies presented. The document is printed for (and signed by) the family and all IFSP Team members in attendance, and copies are distributed to all IFSP Team Members.

8.1.4.7.1 IFSP Grid/Table



Once the child is determined to be eligible, the next step is the IFSP. This grid/table helps the user see a child with multiple IFSPs throughout their EIP. Therefore, the data presented is in reverse chronological order. To enter, select the "edit" button for an existing IFSP. To create a new IFSP, you select/click the **Add** button.

| IFSP Type | IFSP Status | IFSP Reason for Delay | IFSP Method | IFSP Extension Reason | IFSP Start Date | IFSP End Date | Signed Date | Linked IFSP | Action |
|------------|-------------|-----------------------|--|-----------------------|-----------------|---------------|-------------|-------------|--|
| 2nd Review | Draft | | In person meeting | | 05/27/2022 | 09/24/2022 | 05/24/2021 | True | View Edit |
| 2nd Review | Submitted | Covid-19 | In person meeting | | 05/27/2021 | 09/24/2021 | | True | Copy View Edit |
| 3rd Annual | Draft | | In person meeting | Child Illness | 05/27/2021 | 01/21/2022 | 05/24/2021 | False | View Edit |
| 3rd Annual | Submitted | | In person meeting | Child Illness | 05/27/2021 | 01/21/2022 | 05/24/2021 | True | Copy View Edit |
| 3rd Annual | Submitted | | In person meeting | Child Illness | 05/27/2021 | 01/21/2022 | 05/24/2021 | True | Copy View Edit |
| 4th Review | Closed | | In person meeting | | 05/26/2021 | 08/27/2021 | 05/24/2021 | False | Copy View Edit |
| Amendment | Submitted | | In person meeting | Child Illness | 12/05/2021 | 03/11/2022 | | True | Copy View Edit |
| Amendment | Submitted | | In person meeting | Child Illness | 05/27/2021 | 01/21/2022 | 05/24/2021 | True | Copy View Edit |
| Initial | Active | | Recorded review and written correspondence | | 03/02/2022 | 06/09/2022 | 03/25/2022 | True | Copy View Edit |
| Initial | Draft | Covid-19 | In person meeting | | 02/11/2022 | 02/26/2022 | | False | View Edit |



See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| COLUMN | DESCRIPTION |
|------------------------------|---|
| IFSP Type | This column displays the types of IFSP (ex., Initial, 6-month review, annual) |
| IFSP Status | This column displays the status of the IFSP. |
| IFSP Reason for Delay | <p>This column displays the child's IFSP reason for delay.</p> <p>FAQ: How can I know which IFSP is associated with the specific amendment? Amendments to an IFSP are in chronological order, with the last amendment as "Active." Looking at the IFSP 'Start Date' and 'End Date' will assist in determining which IFSP the amendment is associated with.</p> |
| IFSP Method | This column displays the IFSP meeting method (e.g., in-person, phone, etc.). |
| IFSP Extension Reason | This column displays the extension reason for the IFSP. |
| IFSP Start Date | This column displays the start date of the IFSP. |
| IFSP End Date | This column displays the end date of the IFSP. |
| Signed Date | This column displays when the IFSP is signed. |
| Linked IFSP | All services are linked to an IFSP , so the column is N/A for the user. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Copy, Delete, etc.). |

| BUTTON | DESCRIPTION |
|--|--|
| Add IFSP  | Click this button to add an IFSP record for the child. When clicked, the "IFSP tab" with multiple panels appears. For example, see 'IFSP Tab (Adding an IFSP)' section below. |
| Edit  | <p>Click this button to view or edit an IFSP record for the child. When clicked, the "IFSP tab" with multiple panels appears.</p> <p>INFO: The fields and descriptions for editing an IFSP Tab multiple panels are the same as for adding an IFSP multiple panels (ref. below).</p> |
| Copy  | To copy an existing IFSP record for the child, click this button adjacent to the appropriate row/record. The 'IFSP Duplicate' IFSP Tab and panels and grids appear when clicked. Please reference the IFSP Tab in the next section below. The information on panels and grids is the same for an IFSP that has been copied. |

| BUTTON | DESCRIPTION |
|--|--|
| View  | To view an existing document for a child, click this button adjacent to the appropriate record/row. When clicked, the system takes you to the IFSP Information Panel. For IFSP sub-panels fields and descriptions, <u>see IFSP Information Panel</u> . |

8.1.4.7.2 IFSP Tab (Adding an IFSP)

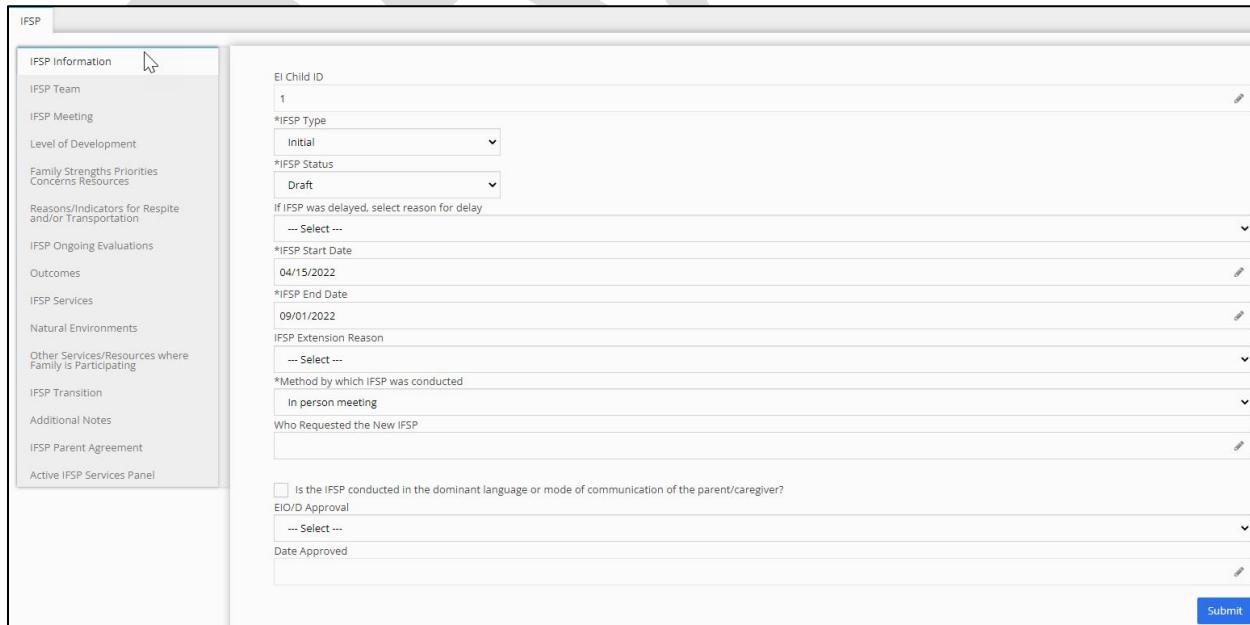
 The IFSP (Individualized Family Service Plan) is a written plan specific to each family and child that outlines and explains the early intervention services the child and family will receive. The IFSP is developed based on identified outcomes related to the child's development and family needs that the IFPS team has established.

Once the child is determined to be eligible, the next step is the IFSP. The IFSP grid/table (shown above) shows the multiple IFSPs the child may have throughout their time in the Early Intervention program. IFSP Types display in reverse chronological order. Select/click the **Edit** button to access an existing IFSP.

To create a new IFSP, you select/click the **Add** button.

8.1.4.7.2.1 IFSP Information Panel

 After establishing an IFSP, the user can complete the remaining information in any order. If the service coordinator wants to do pre-work, they must create the IFSP information panel first. Then the service coordinator can go back/forth to complete additional fields when more information is available.





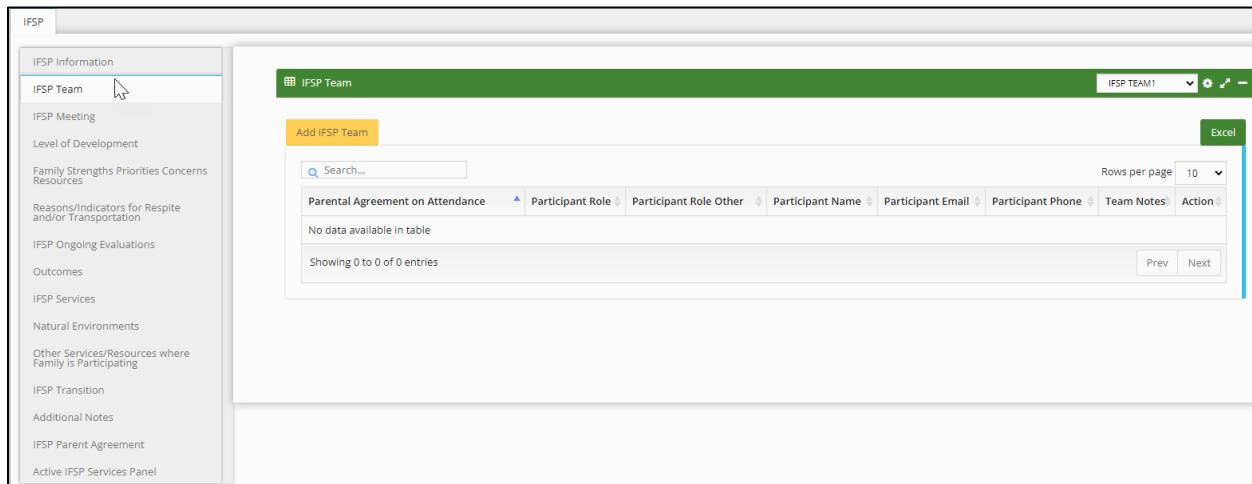
An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|---|--|
| EI Child ID | A read-only field displays the child's early intervention identification number as assigned by the EI-Hub upon referral. |
| *IFSP Type | Use this drop-down and select the appropriate IFSP Type (e.g., Initial) from the list. |
| *IFSP Status | Use this drop-down and select the appropriate IFSP Status (Draft, Submitted, Cancel) from the list. |
| If IFSP was delayed, select the reason for the delay | Use this drop-down and select the appropriate IFSP Delay (e.g., Hospitalization, etc.) from the list. |
| *IFSP Start Date | Manually enter the start date or use the calendar picker (invoked by clicking this field) for the child IFSP. |
| *IFSP End Date | Manually enter the end date or use the calendar picker (invoked by clicking this field) for the child IFSP. |
| IFSP Extension Reason | Use this drop-down and select the appropriate IFSP Extension Reason (e.g., Child Illness, etc.) from the list. |
| *Method by which IFSP was conducted | Use this drop-down and select the appropriate method the IFSP conducted (e.g., In-person meeting, etc.) from the list. |
| <input type="checkbox"/> Is the IFSP conducted in the dominant language or mode of communication of the parent/caretaker? | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| EIO/D Approval | Use this drop-down and select the appropriate status ('Approve' or 'Reject') from the list. |
| Date Signed | Manually enter the date signed or use the calendar picker (invoked by clicking this field) for the child IFSP. The system defaults to the current date listed on your PC. |

| BUTTON | DESCRIPTION |
|--|--|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the IFSP panel. |
| Unlock IFSP | <p>The button bar appears under the 'Date Approved' field after the IFSP record is approved and locks the record from changes. Only a Superuser role can view this button and unlock an IFSP. You'll see this button when editing an existing IFSP record.</p> <p>To unlock an IFSP record for editing, select/click the Unlock IFSP button bar. When clicked, a message pad (shown below) prompts the user to confirm their action (Unlock IFSP); select/click 'Yes' or 'No.'</p> <p>Scenario: The EIO/D unlocks an IFSP for data correction purposes only. The IFSP is a handwritten document. The Service Coordinator (SC) will transcribe the contents into the EI-Hub IFSP sections. If the SC leaves out something or enters a typo, the IFSP will need to be unlocked and corrected. When unlocked, fields appear to document why the IFSP was unlocked.</p> <p>If the SC failed to add a service to the written IFSP, the SC would need to Amend the IFSP, not simply unlock and correct. The version of the IFSP in the EI-Hub must agree with the paper copy the parent signed.</p> |

8.1.4.7.2.2 IFSP Team Grid/Table

 This grid/table summarizes current and past members of the child's IFSP team. The information collected here facilitates various aspects of users' jobs, such as sending out IFSP meeting notices or tracking provider changes.



 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| COLUMN | DESCRIPTION |
|---|--|
| Parental Agreement on Attendance | This column displays ('No' or 'Yes') if the parental agreement was on attendance. |
| Participant Role | This column displays the participant's role within the IFSP Team. |
| Participant Role Other | This column displays the team member's other roles within the IFSP Team.  "Other Role" would be any role a participant may fill which is not included in the drop-down. An example might be a friend or advocate. |
| Participant Name | This column displays the name (first, last) of the participant. |
| Participant Email | This column displays the participant's email address. |
| Participant Phone | This column displays the team member's phone number. |
| Team Notes | This column displays any relevant notes from the IFSP team. |

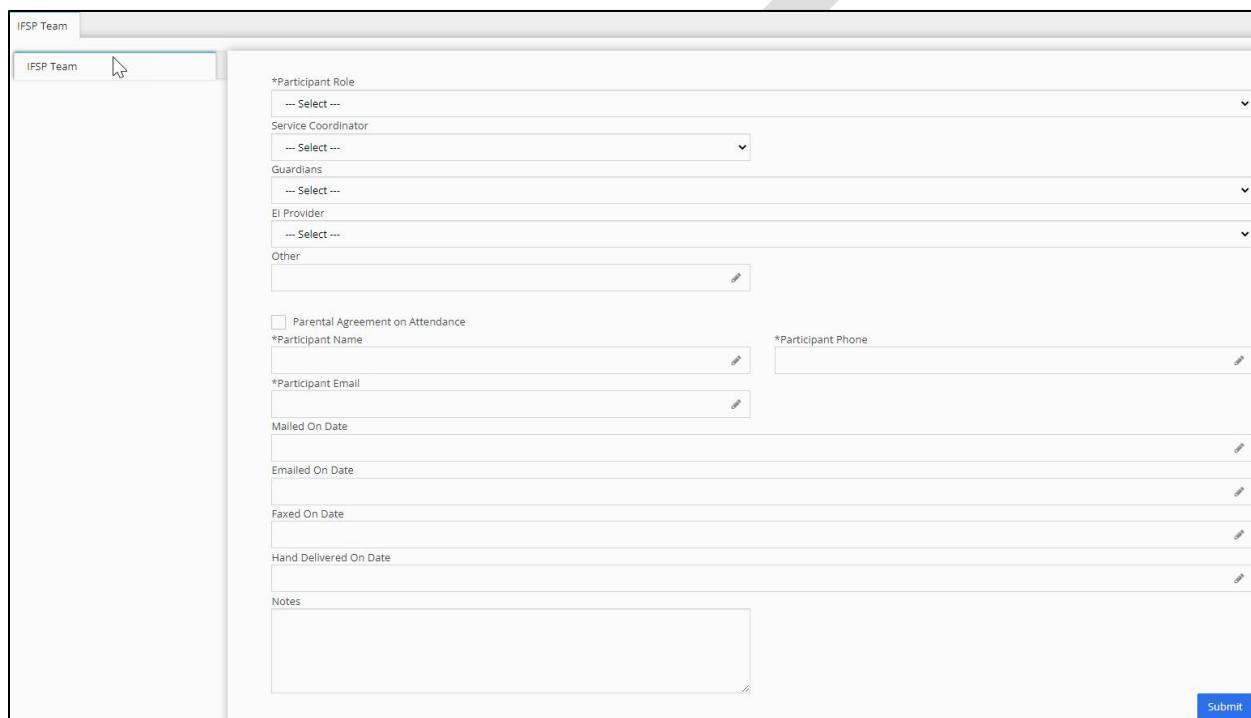
| COLUMN | DESCRIPTION |
|--------|--|
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|--|--|
| Add IFSP Team  | Click this button to add an IFSP Team record for the child. When clicked, the IFSP Team panel appears (shown below). |
| Edit  | Click this button to view or edit the child's IFSP Team record. When clicked, the IFSP Team panel appears.  The fields and descriptions for editing an IFSP Team panel are the same as for adding an IFSP Team panel (ref. below). |
| Excel  | Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet. To see your results in excel, click Open .  Leaving all the Report Filters fields blank will show "all" results.  The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the El-Hub system. |

8.1.4.7.2.2.1 IFSP Team Tab/Panel

 The IFSP Team members use this panel. It can be updated (usually by the SC) as the composition of the IFSP team changes. Next, this information is used when the IFSP meeting invitations are sent (provided the parent has given permission). It should be the responsibility of the EIOD to convene and send out the IFSP meeting invitations.

 If there is a current IFSP and you are working on a future IFSP, the child's current EI providers will be available in drop-downs. The system allows you only to select one participant at a time.



The screenshot shows a software application window titled "IFSP Team". On the left, there is a sidebar with a tree view showing "IFSP Team" expanded. The main area contains several input fields:

- *Participant Role: A dropdown menu with options "... Select ...", "Service Coordinator", "Guardians", "EI Provider", and "Other".
- *Parental Agreement on Attendance: A checkbox.
- *Participant Name: An input field with a pencil icon.
- *Participant Phone: An input field with a pencil icon.
- *Participant Email: An input field with a pencil icon.
- Mailed On Date: An input field with a pencil icon.
- Emailed On Date: An input field with a pencil icon.
- Faxed On Date: An input field with a pencil icon.
- Hand Delivered On Date: An input field with a pencil icon.
- Notes: A large text area with a pencil icon.

A blue "Submit" button is located at the bottom right of the form area.

 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

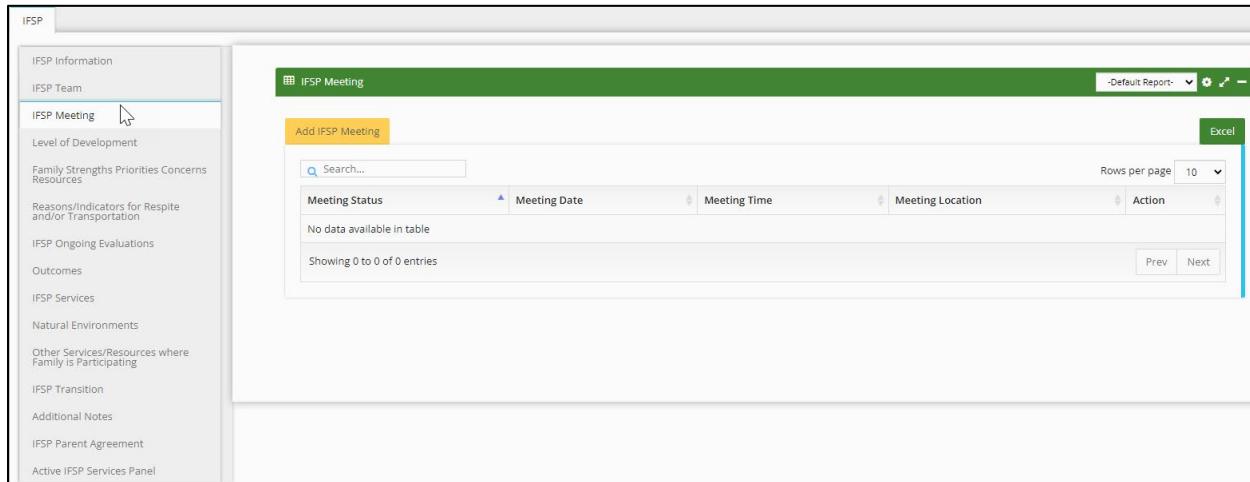
| FIELD | DESCRIPTION |
|---------------------|---|
| *Participant Role | Use this drop-down and select the participant's appropriate role (e.g., EIO/D, etc.) from the list.  Although you may be able to select the role from the drop-down list, the names do not automatically populate except for the service coordinator. Therefore, you must complete the individual's information in the required fields. |
| Service Coordinator | Select the child's appropriate service coordinator's name from the list by this drop-down. |

| FIELD | DESCRIPTION |
|--|--|
| Guardians | Select the child's appropriate guardian name from the list by this drop-down. |
| EI Provider | Use this drop-down and select the appropriate EI Provider name from the list. |
| Other | If other (not available from the Participant Role drop-down list), enter the participant's role |
| <input type="checkbox"/> Parental Agreement on Attendance | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| *Participant Name | Enter the participant's full name (first, last). |
| *Participant Phone | Enter the participant's phone number. |
| *Participant Email | Enter the participant's email address.  This field automatically populates for some participants (e.g., parents/caregivers and service coordinator). |
| Mailed On Date | Manually enter the primary date or use the calendar picker (invoked by clicking this field). |
| Emailed On Date | Manually enter the emailed-on date or use the calendar picker (invoked by clicking this field). |
| Faxed On Date | Manually enter the faxed-on date or use the calendar picker (invoked by clicking this field). |
| Hand Delivered On Date | Manually enter the hand-delivered date or use the calendar picker (invoked by clicking this field). |
| Notes | If applicable, use the textbox to enter any relevant IFSP Team notes. |

| BUTTON | DESCRIPTION |
|--|---|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the IFSP Team panel. |

8.1.4.7.3 IFSP Meeting Grid/Table

 This grid/table shows the IFSP date and allows you to track meetings scheduled. If an appointment needs rescheduling, keep the old information/meeting as historical data.



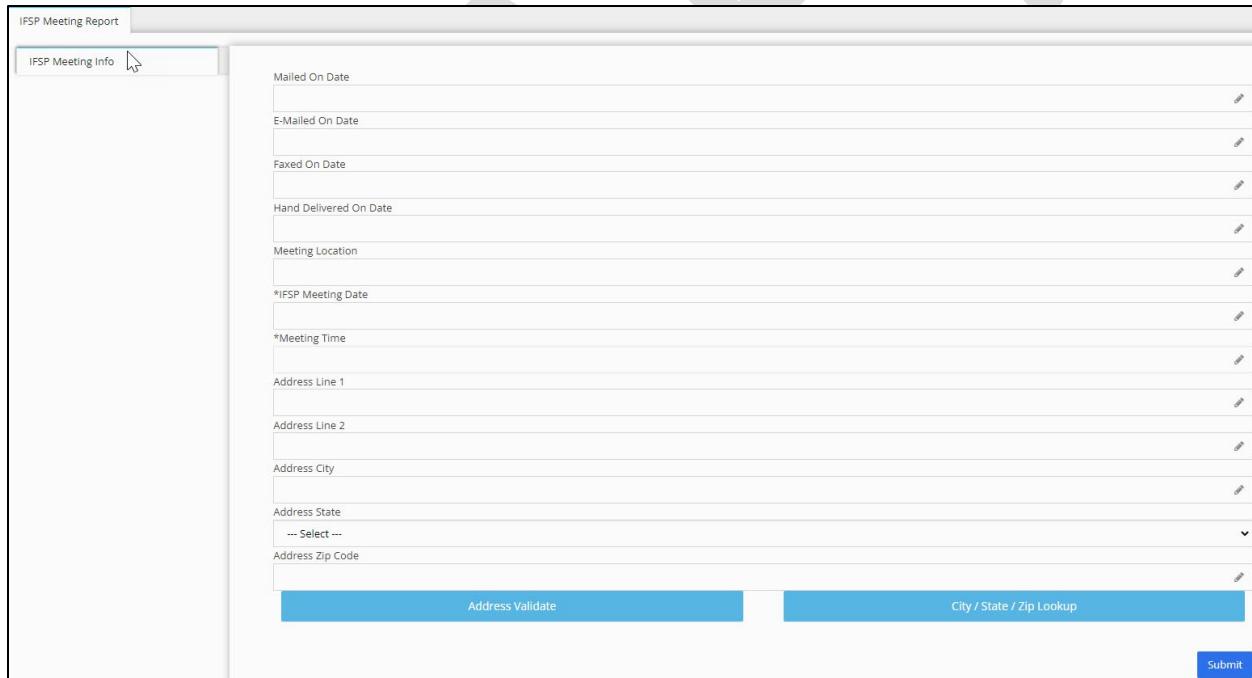
 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|-------------------------|---|
| Meeting Status | This column displays the IFSP meeting status. |
| Meeting Date | This column displays the IFSP meeting date. |
| Meeting Time | This column displays the IFSP meeting time. |
| Meeting Location | This column displays the IFSP meeting Location. |

| BUTTON | DESCRIPTION |
|--|--|
| Excel  | Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet. To see your results in excel, click Open . (i) Leaving all the Report Filters fields blank will show "all" results. (i) The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system. |
| Add IFSP Meeting  | Click this button to add the child's IFSP Meeting record. When clicked, the IFSP Meeting panel appears (shown below). |

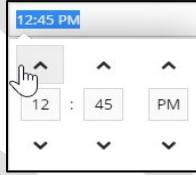
8.1.4.7.3.1 IFSP Meeting Info Tab/Panel



The screenshot shows the 'IFSP Meeting Info' tab open within a larger 'IFSP Meeting Report' window. The tab contains several input fields for meeting details. At the bottom of the tab, there are two buttons: 'Address Validate' and 'City / State / Zip Lookup'. A blue 'Submit' button is located at the very bottom right of the entire panel.

(i) An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|-----------------------|---|
| Mailed On Date | Manually enter the mail date or use the calendar picker (invoked by clicking this field). |

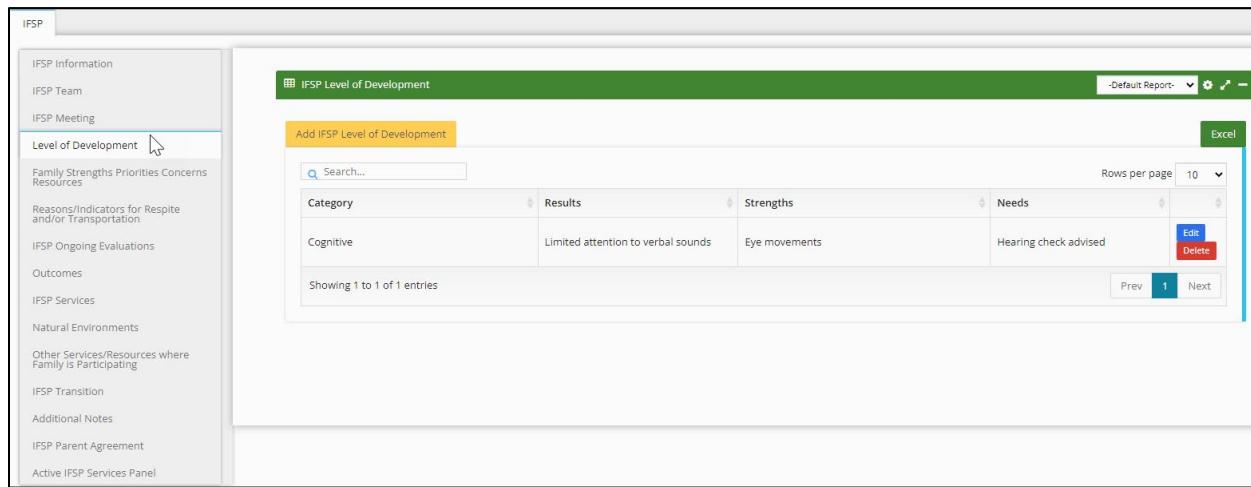
| FIELD | DESCRIPTION |
|-------------------------------|--|
| E-Mailed On Date | Manually enter the emailed date or use the calendar picker (invoked by clicking this field). |
| Faxed on Date | Manually enter the faxed date or use the calendar picker (invoked by clicking this field). |
| Hand Delivered On Date | Manually enter the hand-delivered date or use the calendar picker (invoked by clicking this field). |
| Meeting Location | Enter a brief description of the meeting location (e.g., Child's home, Clinic, etc.). |
| *IFSP Meeting Date | Enter the IFSP meeting date manually or use the calendar picker (invoked by clicking this field). |
| *Meeting Time | Manually enter the meeting time or use the time picker (invoked by clicking this field, shown below).  (i) Clicking this field, the system automatically defaults to your PC's current time. |
| Address Line 1 | Enter the address (line 1) for the meeting location (e.g., Child's home, Clinic, etc.). |
| Address Line 2 | If applicable, enter the address (line 2) for the meeting location (e.g., Child's home, Clinic, etc.). |
| Address City | Enter the city's name where the meeting location resides (e.g., Child's home, Clinic, etc.). |
| Address State | Use the drop-down and select the appropriate state abbreviation where the meeting location resides (e.g., Child's home, Clinic, etc.). |
| Address Zip Code | Enter the zip code for the meeting location (e.g., Child's home, Clinic, etc.). |

| BUTTON | DESCRIPTION |
|---|---|
| City/State/Zip Lookup  | If you do not know the zip code for the location of the IFSP meeting entered, leave the "Zip Code" field blank and click this button. The system then populates the Zip Code field with the correct zip code.  If you enter the address, city, and state and leave the zip code blank, click the Zip Code Lookup button; the process will look up the zip code. |
| Address Validate  | Address Validate: To validate the address entered, click this button. When clicked, the system prompts an "Address Validation" message pad (example below).  <ul style="list-style-type: none"> •  - Change: To accept/change the USPS address validation suggestion, click this button. •  - Cancel: To cancel the USPS address validation suggestion, click this button.  The address validation function automatically replaces the previously entered Employer Address if the 'Change' button is selected/clicked. |
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the IFSP Meeting panel. |

8.1.4.7.4 Level of Development Grid/Table

 This panel captures the child's level of development in each developmental domain at the time of the IFSP. This information is obtained from evaluations, completed formal assessments, or input from the providers working with the child.

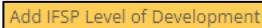
 This panel needs updating on a minimum of an annual basis.



 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|------------------|---|
| Category | This column provides the dropdown values of the five (5) developmental domains. |
| Results | This column displays information on the child's strengths in the particular developmental domain being reflected. |
| Strengths | This column displays information on the child's strengths in the particular developmental domain being reflected. |
| Needs | This column displays the child's needs within the specific developmental domain. |

| BUTTON | DESCRIPTION |
|---|--|
| Add IFSP Level of Development  | Click this button to add the child's IFSP Level of Development record. The Level of Development tab/panel appears (shown below). |
| Excel  | Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet. To see your results in excel, click Open . (i) Leaving all the Report Filters fields blank will show "all" results. (i) The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system. |
| Edit  | Click this button to view or edit the child's IFSP Level of Development record. The Assistive Technology Device Tab and Assistive Technology Device Detail panel appear when clicked. (i) The fields and descriptions for editing a Level of Development are the same as for adding a Level of Development (ref. The Level of Development tab/panel appears below). |
| Delete  | To delete a child's existing Level of Development record, click this button adjacent to the appropriate record/row. When clicked, the system prompts a confirmation message pad popup (shown below); click the Delete button to proceed or click the Cancel button to retract.  <p>The message pad displays the title "Confirm IFSP Level of Development Deletion" and a message "This action cannot be reversed. Are you sure you want to continue?". It features two buttons at the bottom: a blue "Delete" button and a red "Cancel" button.</p> |

8.1.4.7.4.1 Level Of Development Tab/Panel

 Use this panel for the child's developmental status (e.g., strengths and needs) within the specific domain.

 This panel needs updating on a minimum of an annual basis.



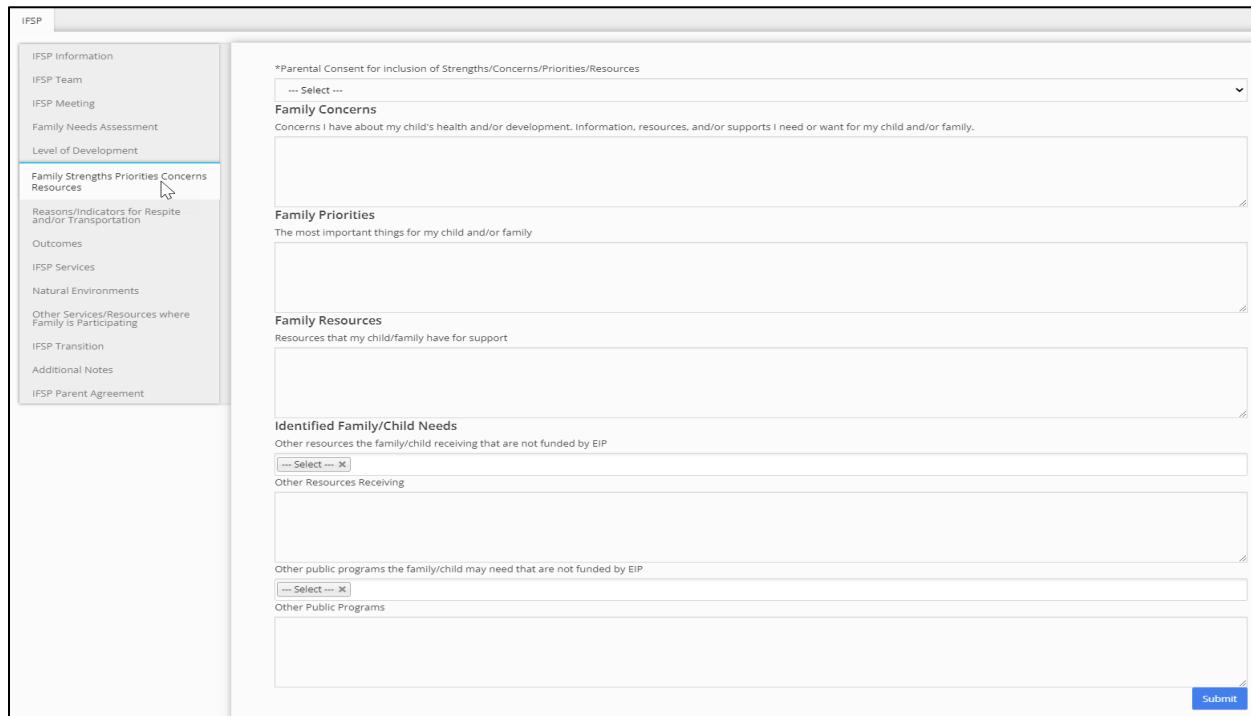
 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|------------|--|
| *Category | Use this drop-down and select the appropriate category (e.g., Adaptive, etc.) for the child from the list. |
| *Results | Enter the results based on the selected category for the child above using the textbox. |
| *Strengths | Enter the strengths based on the selected category for the child above using the textbox. |
| *Needs | Using the textbox, enter the needs based on the selected category for the child above. |

| BUTTON | DESCRIPTION |
|--------|---|
| Submit | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the IFSP Level of Development panel. |

8.1.4.7.5 Family Strengths Priorities Concerns Resources Panel

 For this panel, you will need parental consent to include this information in the IFSP. If the family does not consent, the service coordinator selects 'No.' If there is parental consent, the SC can use this panel to enter the family's responses to the categories reflected on the form. Again, the purpose is to help develop goals/outcomes for the family.



 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

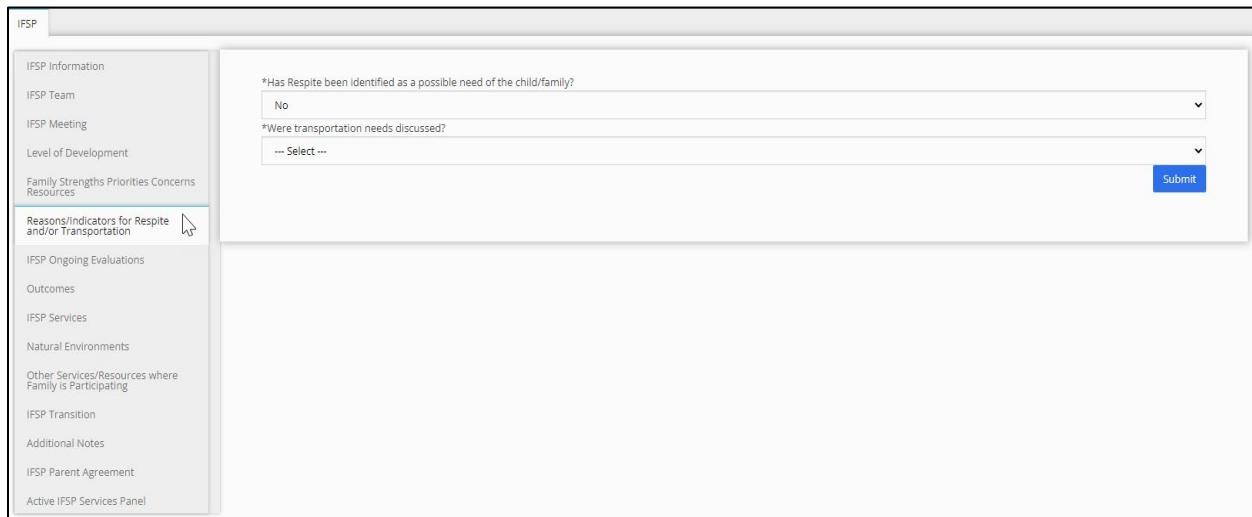
| FIELD | DESCRIPTION |
|---|---|
| *Parental Consent for inclusion of Strengths/Concerns/Priorities/Resources | <p>Use this drop-down and select the appropriate answer ('Yes' or 'No').</p> <p> Parental Consent for the inclusion of 'Strengths/Concerns/Priorities/Resources' is not a mandatory field. Therefore, the Service Coordinator (SC) can skip this panel entirely. However, if the SC wants to enter a value, then "Yes" must be selected.</p> <ul style="list-style-type: none">When "No" is selected, users are still able to enter data (post-go-live development will prevent this), so during the interim, enter "N/A."If 'Yes,' you must complete the two drop-downs from my previous note. |

| FIELD | DESCRIPTION |
|--|---|
| Family Concerns Concerns I have about my child's health and/or development. Information, resources, and/or supports I need or want for my child and/or family | Use this textbox to enter any family concerns about the child. |
| Family Priorities The most important things for my child and/or family | Use this textbox to enter any family priorities for the child. |
| Family Resources Resources that my child/family have for support | Use this textbox to enter any family resources for the child. |
| Identified Family/Child Needs Other resources the family/child receiving that are not funded by EIP | Click in this field and select the appropriate family/child needs from the list from the drop-down. |
| Other Resources Receiving | If appropriate, enter any additional resources the child is receiving. |
| Other public programs the family/child may need that are not funded by EIP | Click in this field and select the appropriate family/child needs from the list from the drop-down. |
| Other Public Programs | If applicable, enter any other programs the family/child may need from the list. |

| BUTTON | DESCRIPTION |
|--|---|
| Submit <input type="button" value="Submit"/> | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates. |

8.1.4.7.6 Reasons/Indicators for Respite and/or Transportation Panel

 This panel looks like two minor questions, yes/no but expands if a question is answered 'Yes.' Additional questions you will need to complete. For example, justify a need for transport or respite before it is provided.



 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|---|---|
| *Has Respite been identified as a possible need of the child/family? | Use this drop-down and select the appropriate answer ('Yes' or 'No').  Selecting "Yes," the panel expands with questions/fields 1-7 (see Exhibit A. below). |
| *Were transportation needs discussed? | Use this drop-down and select the appropriate answer ('Yes' or 'No').  Selecting "Yes," the panel expands with additional questions and comments fields for you to answer (see Exhibit B. below). |

Exhibit A.

| |
|---|
| *Has Respite been identified as a possible need of the child/family? |
| Yes |
| Has the following Respite Criteria been considered? |
| 1. Severity of the child's disability and needs |
| Yes |
| Comments |
| 2. Potential risk of out-of-home placement for the child if respite services are not provided |
| Yes |
| Comments |
| 3. Lack of access to informal support systems (e.g., extended family, supportive friends, community supports, etc.) |
| Yes |
| Comments |
| 4. Lack of access to other sources of respite (e.g., Family Support Services under the auspices of the Office for People with Developmental Disabilities and respite provided through other State early intervention service agencies), due to barriers such as waiting lists, remote/inaccessible location of services, etc. |
| Yes |
| Comments |
| 5. Has the family applied for other sources of respite? |
| Yes |
| Agency/Program applied through |
| Date applied |
| Response from agency |
| 6. The presence of factors known to increase family stress (e.g., family size, presence of another child or family member with a disability, etc.). |
| Yes |
| Comments |
| 7. The perceived and expressed level of need for respite services by parent |
| Yes |
| Comments |
| *Were transportation needs discussed? |
| Yes |
| Is caregiver able to provide transportation? |
| Yes |
| If Yes, is transportation reimbursement being requested? |
| Yes |
| Comments |
| <input type="button" value="Submit"/> |

Exhibit B

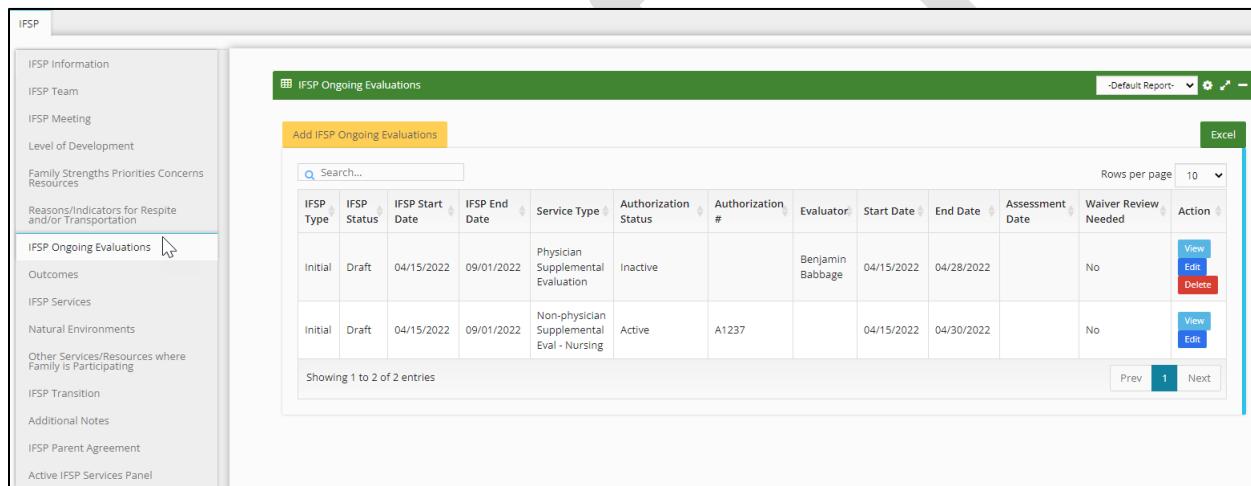
| |
|---|
| *Were transportation needs discussed? |
| Yes |
| Is caregiver able to provide transportation? |
| Yes |
| *If Yes, is transportation reimbursement being requested? |
| Yes |
| Comments |
| <input type="button" value="Submit"/> |

| BUTTON | DESCRIPTION |
|---|---|
| Submit  Submit | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database. |

8.1.4.7.7 IFSP Ongoing Evaluations Grid/Table

 This grid/table is where the service authorization for an MDE to determine ongoing eligibility or a supplemental is entered. Note that the user will return to the Evaluation tab to find this service authorization to enter the results.

 You will not be able to enter the results here as it is associated with an IFSP, and the IFSP will be locked and not accessible.



| IFSP Type | IFSP Status | IFSP Start Date | IFSP End Date | Service Type | Authorization Status | Evaluator | Start Date | End Date | Assessment Date | Waiver Review Needed | Action |
|-----------|-------------|-----------------|---------------|---|----------------------|------------------|------------|------------|-----------------|----------------------|--|
| Initial | Draft | 04/15/2022 | 09/01/2022 | Physician Supplemental Evaluation | Inactive | Benjamin Babbage | 04/15/2022 | 04/28/2022 | | No | View Edit Delete |
| Initial | Draft | 04/15/2022 | 09/01/2022 | Non-physician Supplemental Eval - Nursing | Active | A1237 | | 04/15/2022 | 04/30/2022 | No | View Edit |

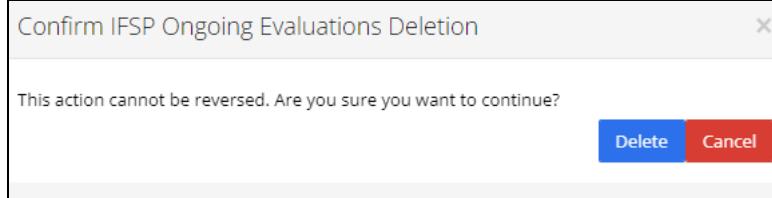
 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|-------------|--|
| IFSP Type | This column displays the type of IFSP (e.g., Initial, 6-month review, annual). |
| IFSP Status | This column displays the status of the IFSP. |

| COLUMN | DESCRIPTION |
|-----------------------------|--|
| IFSP Start Date | This column displays the start date of the IFSP. |
| IFSP End Date | This column displays the end date of the IFSP. |
| Service Type | This column displays the evaluation service type. |
| Authorization Status | This column displays the service authorization status (' Active ' or ' Inactive '). |
| Authorization # | This column displays the service authorization number. |
| Evaluator | This column displays the person who will be evaluating the child. |
| Start Date | This column displays the evaluation start date for coordinating services for the child. |
| End Date | This column displays the evaluation end date for coordinating services for the child. |
| Assessment Date | This column displays the child's assessment date. |
| Waiver Review Needed | This column displays ' Yes ' or ' No ' if a waiver review is needed. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|---|---|
| Excel  | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet. An example is using the MS Edge browser to download the excel file and options.</p> <p>To see your results in excel, click Open file.</p> <p>i Leaving all the Report Filters fields blank will show "all" results.</p> <p>i The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system.</p> |
| Add IFSP Ongoing Evaluation  | <p>To add an IFSP Ongoing Evaluation, click this button. The Add Evaluation tab appears with four (4) multi-tabbed with multiple panels (Refer to section 8.1.4.5.1.1.1).</p> |

| BUTTON | DESCRIPTION |
|---|---|
| Delete  | <p>Click this button adjacent to the appropriate evaluation information row/record to delete an evaluation information record.</p> <ul style="list-style-type: none"> When clicked, a message prompt appears (shown below). To accept deletion, click the Delete button. To retract this action, click the Cancel button.  |
| View  | <p>To view an 'Evaluation Information record for the child, click this button. The Evaluation page appears with five (5) multi-tabbed with multiple panels (shown below).</p> <p> The fields and descriptions for editing the Evaluation Information panel are the same for adding; the Evaluation Information panel appears (Refer to section 8.1.4.5.1.1.1).</p> |
| Edit  | <p>To edit an 'Evaluation Information record for the child, click this button. The Evaluation page appears with five (5) multi-tabbed with multiple panels (shown below).</p> <p> The fields and descriptions for editing the Evaluation Information panel are the same for adding; the Evaluation Information panel appears (Refer to section 8.1.4.5.1.1.1).</p> |

8.1.4.7.8 Outcomes Grid/Table

At this point, all the IFSP panels are leading up to this grid/panel. Whenever adding a service(s) to an IFSP, there must be a goal/outcome that the service is addressing. For example, suppose the family is concerned about the child not walking satisfactorily. In that case, you use this grid/table to input goals for the child determined at the IFSP process. Next, select/click the **Add IFSP Outcome** button to open the panel to add a child's outcome. You can add multiple outcomes to this grid.

i A therapist/provider will provide progress updates on the child's outcomes during an IFSP meeting.

The screenshot shows the 'IFSP Outcome Detail' screen. On the left, a sidebar lists various IFSP sections: IFSP Information, IFSP Team, IFSP Meeting, Level of Development, Family Strengths Priorities Concerns Resources, Reasons/Indicators for Respite and/or Transportation, IFSP Ongoing Evaluations, Outcomes (which is selected and highlighted in blue), IFSP Services, Natural Environments, Other Services/Resources where Family Is Participating, IFSP Transition, Additional Notes, IFSP Parent Agreement, and Active IFSP Services Panel. The main area is titled 'IFSP Outcome Detail' and contains a table with one row of data. The table columns are: Outcome Name, Outcome Type, Progress Rating, Outcome Start Date, Outcome Completed Date, Reviewed Date, Outcome Desired, Procedure: How will we assess progress?, and Action. The data row is: 1.B - 06/01/2022, Child, Outcome Achieved, 05/30/2022, 06/01/2022, 06/03/2022, 06/01/2022, and a link labeled 'Edit'. At the bottom of the table, it says 'Showing 1 to 1 of 1 entries'. There are 'Prev' and 'Next' buttons. On the right side of the main area, there are buttons for 'Default Report', 'Print', 'Excel', and 'Rows per page' set to 10. An 'Excel' button is also located in the top right corner of the main table area.

i See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|-----------------|--|
| Q Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| BUTTON | DESCRIPTION |
|--------------|--|
| Excel | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet.</p> <p>To see your results in excel, click Open.</p> <p>i Leaving all the Report Filters fields blank will show "all" results.</p> <p>i The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system.</p> |

| COLUMN | DESCRIPTION |
|--|--|
| Outcome Name (Number) | This column displays the outcome number. |
| Outcome Type | This column displays the child's outcome type. |
| Progress Rating | This column displays the outcome's progress rating. |
| Outcome Start Date | This column displays the outcome start date. |
| Outcome Completed Date | This column displays the outcome completed date. |
| Reviewed Date | This column displays the outcome reviewed to date. |
| Outcome Desired | This column displays the desired outcome. |
| Procedure: How will we assess progress? | This column displays a brief description of assessing the progress toward outcome attainment. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|--------------------------------|---|
| Add IFSP Outcome Detail | Click this button to add an IFSP Outcomes record for the child. When clicked, the 'IFSP Outcome Report tab/IFSP Outcome' panel appears (shown below). |

8.1.4.7.8.1 IFSP Outcome Report Tab/IFSP Outcome Panel

The screenshot shows a software application window titled "IFSP Outcome Report". On the left, a vertical sidebar has a tab labeled "IFSP Outcome". The main area contains several input fields:

- "Outcome Number": A read-only field showing "0".
- "Outcome Start Date": Set to "06/10/2022".
- "Outcome Desired": A text input field.
- "Outcome Type": A dropdown menu with "Select" option.
- "What are developmental steps needed to obtain this outcome?": A large text area.
- "Strategies and Activities to support this outcome (include activity settings and everyday routines of the child and family)": A text area.
- "Progress Rating": A dropdown menu with "Select" option.
- "Modification to Outcome?": A dropdown menu with "No" selected.
- "Outcome Version": A dropdown menu with "Select Some Options" and "Criteria: How will we know when this outcome is achieved?" below it.
- "Who will assist the child/family with this outcome?": A dropdown menu with "Select Some Options" and "If Other" field.
- "When does the team plan on measuring progress for this outcome?": A dropdown menu with "Select" option.
- "Last Reviewed Date": A date input field.
- A "Submit" button at the bottom right.

(i) An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

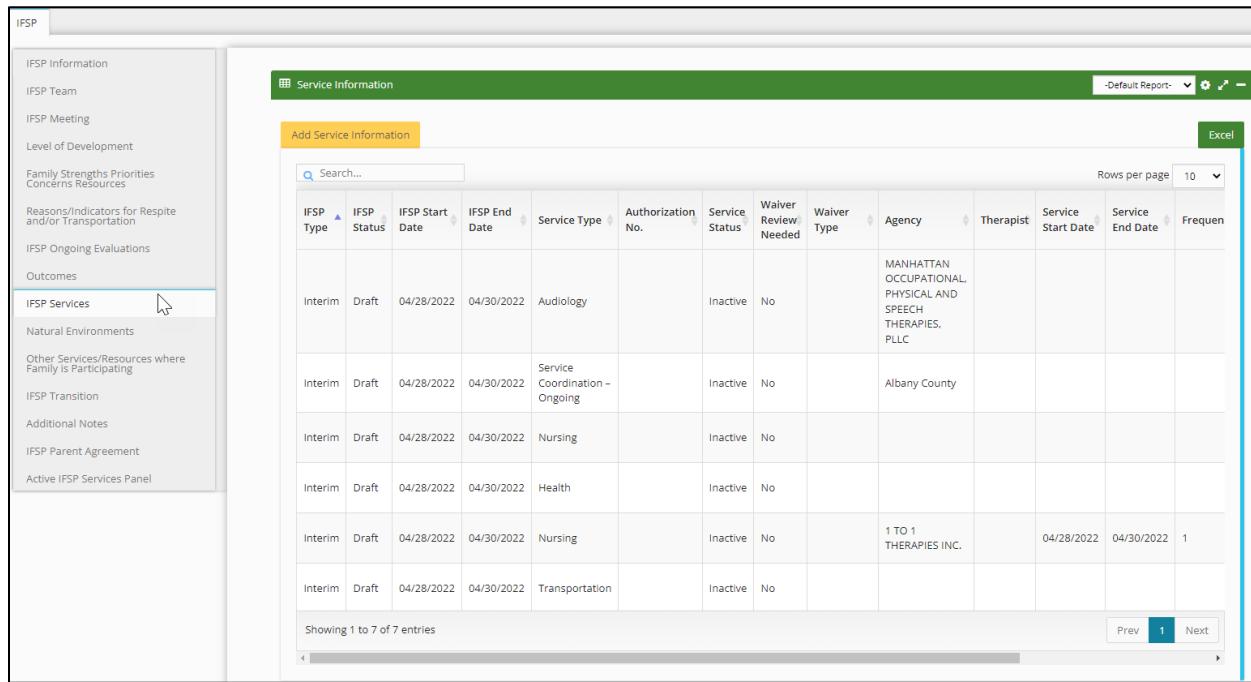
| FIELD | DESCRIPTION |
|---|---|
| Outcome Number | A read-only field. After submitting (Save) data in this panel, the system creates the IFSP Outcome Number. |
| *Outcome Start Date | Enter the outcome start date manually or use the calendar picker (invoked by clicking this field). |
| Outcome Completed Date | Enter the outcome completed date manually or use the calendar picker (invoked by clicking this field). |
| *Outcome Desired | Enter a brief description of the outcome desired. |
| *Outcome Type | Use this drop-down and select the appropriate outcome type from the list. |
| What are the developmental steps needed to obtain this outcome? | Answer this question by listing the developmental steps for the child to meet the outcome. (i) The completion of this field may not be applicable if the outcome is for the family. |
| *Strategies and Activities to support this outcome (include activity settings and everyday routines of the child and family) | List strategies, activities, and steps in this textbox needed to support the obtainment of this outcome. |

| FIELD | DESCRIPTION |
|--|---|
| *Progress Rating | Use this drop-down and select the appropriate progress rating (e.g., New Outcome, etc.) from the list to reflect the current status of the outcome. |
| *Modification to Outcome? | Answer this question using this drop-down and select the appropriate answer ('Yes' or 'No'). |
| Outcome Version | A read-only field displays the IFSP outcome versions. |
| Who will assist the child/family in working towards this outcome? | Click in this field and select the appropriate person/resource (e.g., Siblings, Service Coordinator, etc.) to assist the child/family in working toward an outcome from the list. |
| If Other | If applicable, enter any other resource in this textbox. |
| When does the team plan on measuring progress for this outcome? | Use this drop-down and select the appropriate frequency measuring progress (e.g., Weekly, etc.) for the child from the list. |
| Criteria: How will we know when this outcome is achieved? | Answer this question by entering this textbox by providing the child's outcome criteria. |
| Last Reviewed Date | Enter the last review date manually or use the calendar picker (invoked by clicking this field). |

| BUTTON | DESCRIPTION |
|--|---|
| Submit <input type="button" value="Submit"/> | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the IFSP Outcomes panel. |

8.1.4.7.9 IFSP Services Grid/Table

 This grid/table will show only services authorized on a child's IFSP. Enter an IFSP service by selecting/clicking the **Add Service Information** button. If you enter a service authorization but do not complete it, you can go back to it by clicking the **Edit** button, allowing you to continue creating.



| IFSP Type | IFSP Status | IFSP Start Date | IFSP End Date | Service Type | Authorization No. | Service Status | Waiver Review Needed | Waiver Type | Agency | Therapist | Service Start Date | Service End Date | Frequency |
|-----------------------------|-------------|-----------------|---------------|--------------------------------|-------------------|----------------|----------------------|-------------|--|------------|--------------------|------------------|-----------|
| Interim | Draft | 04/28/2022 | 04/30/2022 | Audiology | | Inactive | No | | MANHATTAN OCCUPATIONAL PHYSICAL AND SPEECH THERAPIES, PLLC | | | | |
| Interim | Draft | 04/28/2022 | 04/30/2022 | Service Coordination - Ongoing | | Inactive | No | | Albany County | | | | |
| Interim | Draft | 04/28/2022 | 04/30/2022 | Nursing | | Inactive | No | | | | | | |
| Interim | Draft | 04/28/2022 | 04/30/2022 | Health | | Inactive | No | | 1 TO 1 THERAPIES INC. | 04/28/2022 | 04/30/2022 | 1 | |
| Interim | Draft | 04/28/2022 | 04/30/2022 | Transportation | | Inactive | No | | | | | | |
| Showing 1 to 7 of 7 entries | | | | | | | | | | | | | |

 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| COLUMN | DESCRIPTION |
|--------------------------|--|
| IFSP Type | This column displays the IFSP type for the child. |
| IFSP Status | This column displays the IFSP status of the child. |
| IFSP Start Date | This column displays the IFSP service start date for the child. |
| Service Type | This column displays the service type for the child. |
| Authorization No. | This column displays the service authorization number for the child. |
| Service Status | This column displays the service status of the child. |
| Waiver Type | This column displays the waiver type for the child. |

| COLUMN | DESCRIPTION |
|---------------------------|--|
| Therapist | This column displays the therapist's name. |
| Agency | This column displays the agency providing the service(s) for the child. |
| Service Start Date | This column displays the service start date for the child. |
| Service End Date | This column displays the service end date for the child. |
| Frequency | This column displays the duration (hours/ minutes) of the child's attended sessions. |
| Frequency Unit | This column displays how often (e.g., Weekly, Monthly, etc.) the sessions occurred for the child. |
| Length | This column displays how long (length of time) the sessions occurred for the child. |
| Intensity | This column displays the intensity (e.g., visits per day) of sessions/services provided for the child. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|---|--|
| Add Service Information  | Click this button to add a 'Service Information' record for the child. When clicked, the Service Info & IFSP Service Link tabs and accompanying sub-panels appear (shown below). |

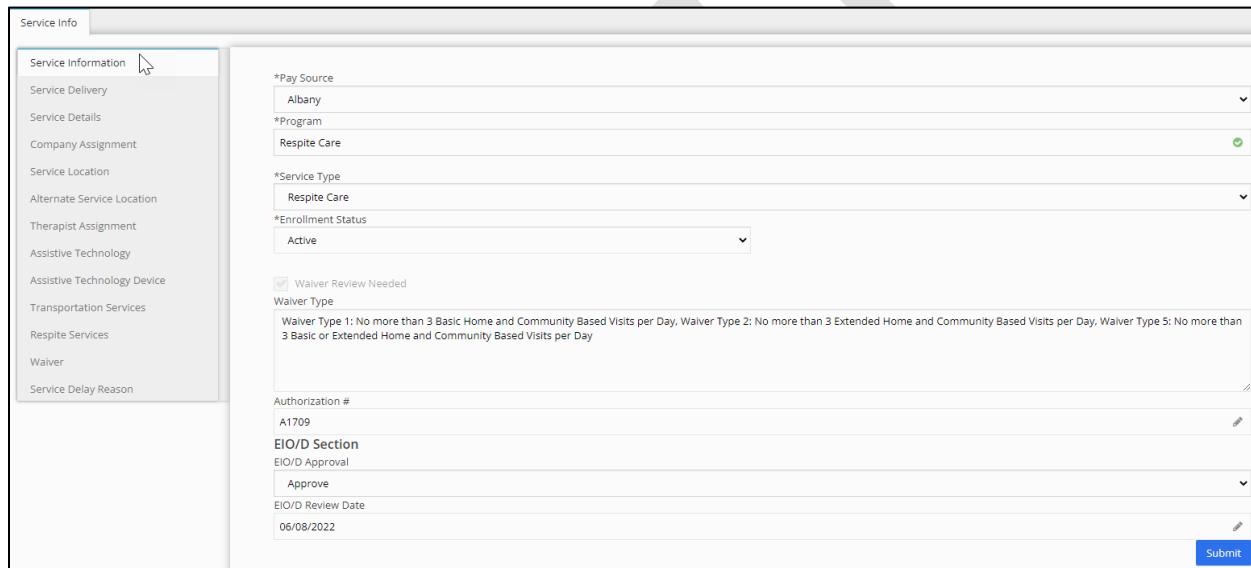
8.1.4.7.9.1.1 Service Info Tab

8.1.4.7.9.1.1.1 Service Information Panel

 This panel includes all services ever authorized for this child. You must complete this panel and save it before entering the other panels (note required fields). Then, select the child's service under the program field. The service will remain inactive until the Early Intervention Official Designee (EIO/D) is approved.

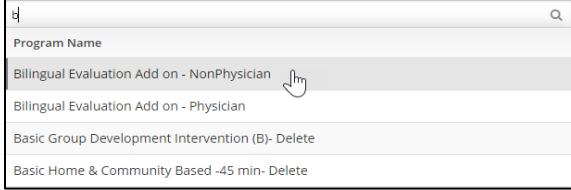
 **Each service must be reviewed and approved before the IFSP is approved.**

 **The 'Pay Source' auto-populates with the child's county of residence.**



The screenshot shows the 'Service Info' tab of an IFSP application. The 'Service Information' dropdown is open, showing a list of service types. Other fields include Pay Source (Albany), Program (Respite Care), Service Type (Respite Care), Enrollment Status (Active), Waiver Review Needed (checkbox), Waiver Type (description of types 1-3), Authorization # (A1709), EIO/D Section (Approve), and EIO/D Review Date (06/08/2022). A blue 'Submit' button is at the bottom right.

 **An asterisk (*) adjacent to a field name/label means it is a required field you must populate.**

| FIELD | DESCRIPTION |
|-------------|--|
| *Pay Source | Use this drop-down and select the appropriate pay source location from the list. |
| *Program | To add a program, begin typing (type ahead) in this field to activate a drop-down search list (example below) and select the appropriate program name.  |

| FIELD | DESCRIPTION |
|---|--|
| *Service Type | Use this drop-down and select the appropriate service type (e.g., Audiology, etc.) from the list. |
| *Enrollment Status | Use this drop-down and select the appropriate status ('Active' or 'Inactive') from the list. (i) This field is role-related, in that, as a service coordinator, your option is "inactive" until it is submitted to the EIOD. |
| <input type="checkbox"/> Wavier Review Needed | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. (i) If editing a record on the 'Service Information' panel, this checkbox is disabled/grayed out. |
| Waiver Type | Enter the waiver type in the textbox provided. |
| Authorization # | A read-only field. This field displays if an authorization number is assigned (EIO/D approved). |

EIO/D Section

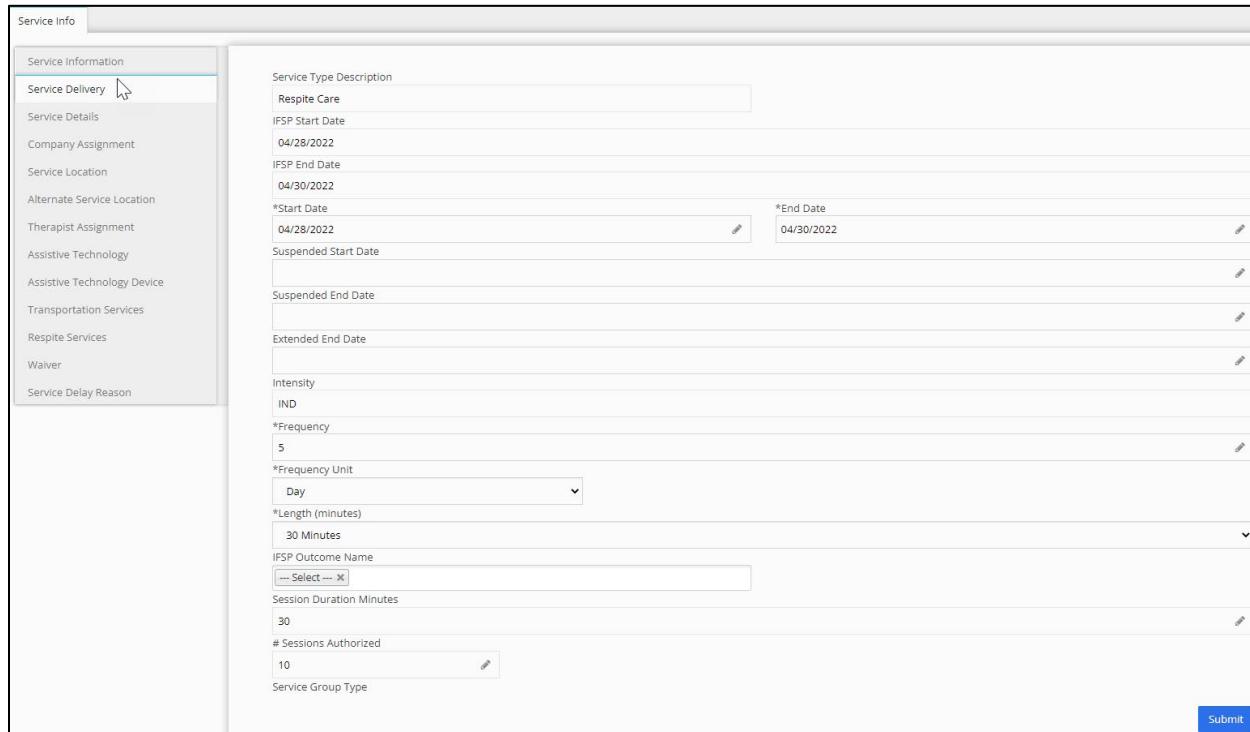
| FIELD | DESCRIPTION |
|-------------------|--|
| EIO/D Approval | The Early Intervention Official Designee uses this drop-down and selects the appropriate response ('Approve' or 'Reject'). |
| EIO/D Review Date | A read-only field: when selecting the above (EIO/D Approval), the system populates this field with the current date. |

| BUTTON | DESCRIPTION |
|---|---|
| Submit <input type="button" value="Submit"/> | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Service Information panel. |

8.1.4.7.9.1.1.2 Service Delivery Panel

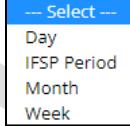
 Use this panel to add the start and end date of service, frequency, and length of visit. You need to attach an outcome in the drop-down. Also, use this panel to indicate if the service is not provided in the child's natural environment and why. Expand/extend services here as well.

 For all Services: The system calculates based on the entire month and week. Therefore, users should bill according to the child's order prescribed.



 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|------------------------|---|
| Service Type | A read-only field. This field displays a service type description (e.g., Enrollment Services Maintenance), which was previously selected. |
| IFSP Start Date | This field displays the IFSP service start date for the child. |
| IFSP End Date | This field displays the IFSP service start date for the child. |
| *Start Date | Manually enter the start date or use the calendar picker (invoked by clicking this field) for the child's service delivery. |

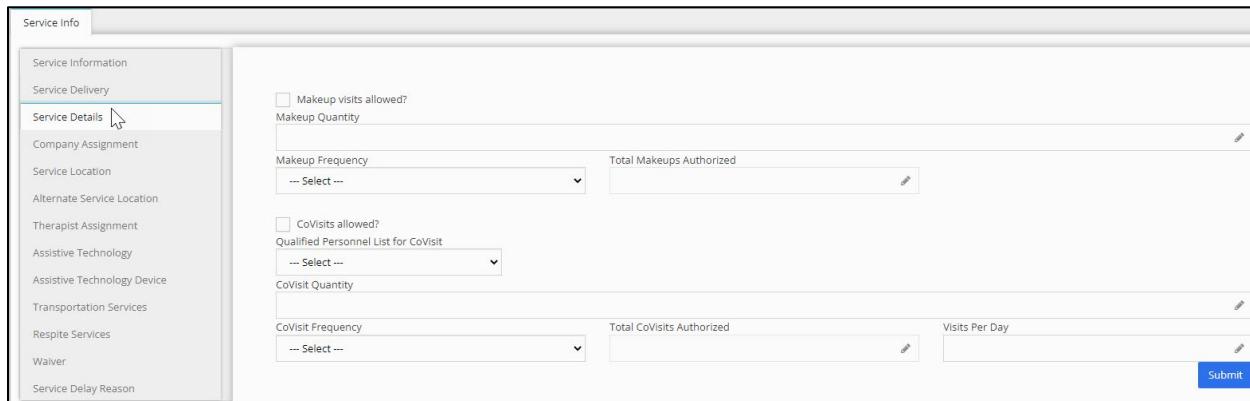
| FIELD | DESCRIPTION |
|---------------------------------|--|
| *End Date | Manually enter the end date or use the calendar picker (invoked by clicking this field) for the child's service delivery. |
| Suspended Start Date | Enter the suspended start date manually or use the calendar picker (invoked by clicking this field) for the child IFSP. |
| Suspend End Date | Enter the suspended end date manually or use the calendar picker (invoked by clicking this field) for the child IFSP. |
| Extended End Date | Enter the suspended end date manually or use the calendar picker (invoked by clicking this field) for the child IFSP. |
| Intensity | A read-only field displays the intensity (e.g., visits per day) of sessions/services provided for the child. |
| *Frequency | Manually enter or use the vertical arrow bar ▲ how often (frequency) the session(s) will occur for the child. |
| *Frequency Unit | Select the appropriate session/service frequency from the list using this drop-down.  |
| *Length (minutes) | Select the appropriate session/service frequency from the list using this drop-down.  |
| IFSP Outcome Name | To add an outcome(s), begin typing (type ahead) in this field to activate a drop-down search list and select the appropriate outcome(s). |
| Session Duration Minutes | A read-only field displays the child's session duration minutes. |

| FIELD | DESCRIPTION |
|--|--|
| # Sessions Authorized | A read-only field displays the number of sessions for the child authorized. |
| Natural Environment | Use this drop-down and select the child's natural environment (e.g., Home Day Care, etc.) from the list. |
| *If any service is not being provided in the child's Natural Environment, explain why the IFSP team determined that it was not appropriate to provide the service in a Natural Environment | Use the text box to explain any service not provided in the child's Natural Environment and why the IFSP team determined it was unsuitable for providing the service in a Natural Environment. |
| Service Group Type | Use this drop-down and select the appropriate service group type from the list. <div style="border: 1px solid black; padding: 5px; width: fit-content;"> ... Select ... With at least 51% typically developing children With 50% or less typically developing children With 0% typically developing children </div> <p> The service group type only appears if a group is selected as a service type.</p> |
| If any service is being provided in a group setting without typically developing peers, explain why the IFSP team agrees this is appropriate | Use the text box and explain why the IFSP team agrees this is appropriate for any service provided in a group without typically developing peers. |
| *Location Type | Use this drop-down and select the appropriate location (e.g., Community-based Site, etc.) from the list. |

| BUTTON | DESCRIPTION |
|---|--|
| Submit <input type="button" value="Submit"/> | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Service Delivery panel. |

8.1.4.7.9.1.1.3 Service Details Panel

 The purpose of this panel is to reflect any co-treatments or make-up visits that may be authorized on the service authorization. For example, a Speech Therapist and Occupational Therapist may need to address a child's feeding issues together; in this case, a co-visit would need to be authorized on each separate service authorization (SLP and OT).



The screenshot shows a software interface titled 'Service Info' with a sidebar containing links like 'Service Information', 'Service Delivery', 'Service Details' (which is selected), 'Company Assignment', 'Service Location', 'Alternate Service Location', 'Therapist Assignment', 'Assistive Technology', 'Assistive Technology Device', 'Transportation Services', 'Respite Services', 'Waiver', and 'Service Delay Reason'. The main panel has sections for 'Makeup visits allowed?' with a checkbox and a 'Makeup Quantity' field, and 'CoVisits allowed?' with a checkbox and a 'Qualified Personnel List for CoVisit' dropdown. There are also 'Total Makeups Authorized' and 'Total CoVisits Authorized' read-only fields, 'Makeup Frequency' and 'Co-Visit Frequency' dropdowns, 'Visits Per Day' and 'Submit' buttons.

| FIELD | DESCRIPTION |
|---|--|
| <input type="checkbox"/> Make up visits allowed? | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. (i) Selecting this checkbox, an asterisk (*) appears adjacent to the 'Makeup Quantity' and 'Makeup Frequency' field name/labels become a required field for you to populate. |
| Makeup Quantity | Manually enter or use the vertical arrow bar  for the number of sessions for the child. |
| Makeup Frequency | Use this drop-down and select the appropriate makeup frequency (e.g., Weekly, etc.) for the child from the list. |
| Total Makeups Authorized | A read-only field displays the total makeups authorized after the 'Submit' button is selected/clicked. |
| <input type="checkbox"/> Co-Visits allowed? | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. (i) Selecting this checkbox, an asterisk (*) appears adjacent to the 'Co-Visit Quantity' and 'Co-Visit Frequency,' and the 'Visits Per Day' field name/labels become a required field for you to populate. |
| Qualified Personnel List for Co-Visits | Use this drop-down and select the qualified person (e.g., Occupational Therapist, etc.) for the child's co-visits (e.g., Weekly, etc.) from the list. |

| FIELD | DESCRIPTION |
|----------------------------------|---|
| CoVisit Quantity | Manually enter or use the vertical arrow bar <input type="button" value="▼"/> for the number of co-visits for the child. |
| CoVisit Frequency | Use this drop-down and select the appropriate co-visit frequency for the child from the list. |
| Total CoVisits Authorized | A read-only field displays the total co-visits authorized after the 'Submit' button is selected/clicked. |
| Visits Per Day | Manually enter or use the vertical arrow bar <input type="button" value="▼"/> for the visits that will occur for the child. |

| BUTTON | DESCRIPTION |
|--|---|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Service Details panel. |

8.1.4.7.9.1.1.4 Company Assignment Panel

 This panel is where the 'billing provider' is assigned. The agency is where the authorization is assigned. Select the appropriate 'Company Name' from a drop-down of available agencies and select the corresponding 'Office' (if applicable).

 Changes to this panel are not allowed after the service is authorized. For example, editing the "company" (provider) name requires new service authorization.



| FIELD | DESCRIPTION |
|---------------------|--|
| Company Name | Use this drop-down and select the appropriate company name providing the child's service from the list. |
| Office | Use this drop-down and select the appropriate office location providing the child's service from the list. |
| Service Site | To enter/select the service site, click this field and type ahead to search for your saved info (example below). |

Service Site

| | | | | |
|--|----------------------|------------|-------|-----------------------|
| Location Name | Address Line 1 | City | State | Location Phone Number |
| test location name  | 500 cold spring road | ROCKY HILL | CT | |

| BUTTON | DESCRIPTION |
|---|--|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Company Assignment panel. |

8.1.4.7.9.1.1.5 Service Location Panel

 Use this panel to select where the provider will deliver the services. For example, the address will pre-populate if the child's services are provided at home.

 This is the physical location where the services are to be provided. Indicating whether or not the services are being provided in a natural environment is a mandatory field.



| FIELD | DESCRIPTION |
|----------------------------|---|
| Location Type | Use this drop-down and select the appropriate location type (e.g., Agency Provider Site, etc.) for the child from the list. |
| Location Type Other | If a location other than provided in the 'Location Type' drop-down above, enter the location type in this textbox. |
| Address 1 | Enter the location/site primary address. |
| Address 2 | If applicable, enter address 2 (e.g., APT#). |
| Address 3 | If applicable, enter address 3. |
| City | Enter the location/site city name. |
| State | Enter the location/site state. |
| Zip | Enter the location/site zip code. |
| Site | Enter if this location type is Off-site or On-site. |

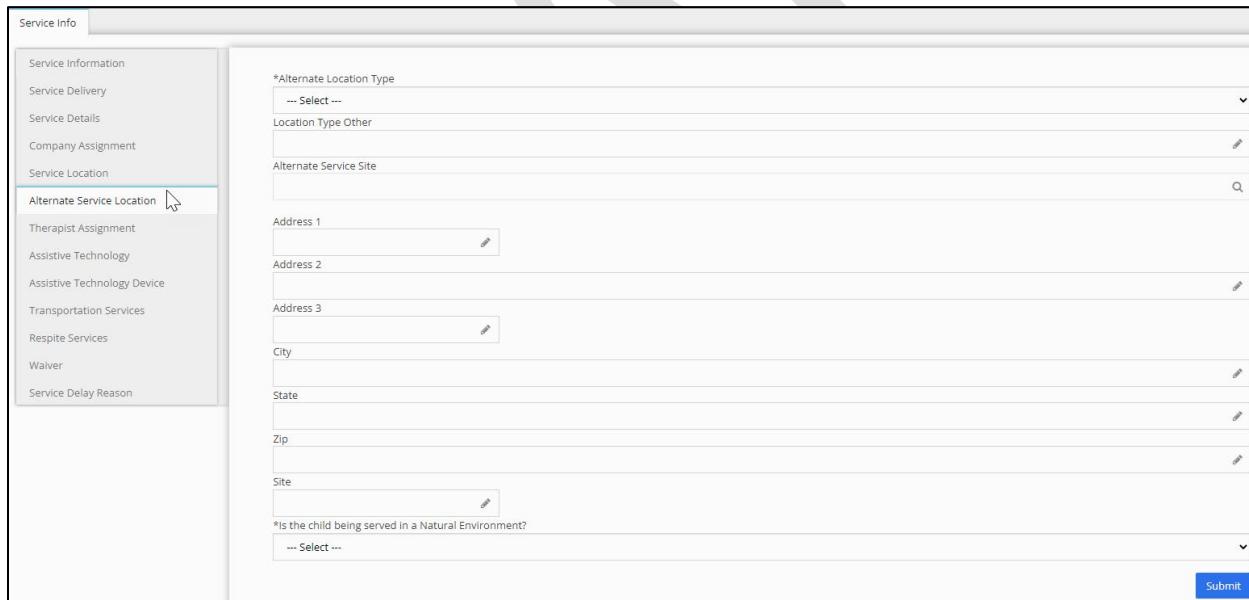
| FIELD | DESCRIPTION |
|--|--|
| *Is the child being served in a Natural Environment? | Use this drop-down and select 'Yes' or 'No' if the child is being served in a Natural Environment. |

| BUTTON | DESCRIPTION |
|--|--|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Service Location panel. |

8.1.4.7.9.1.1.6 Alternate Service Location Panel

 Use this panel when two options for a location for service delivery (e.g., child's home or daycare) indicate an alternate location.

 This panel is not required in all instances.



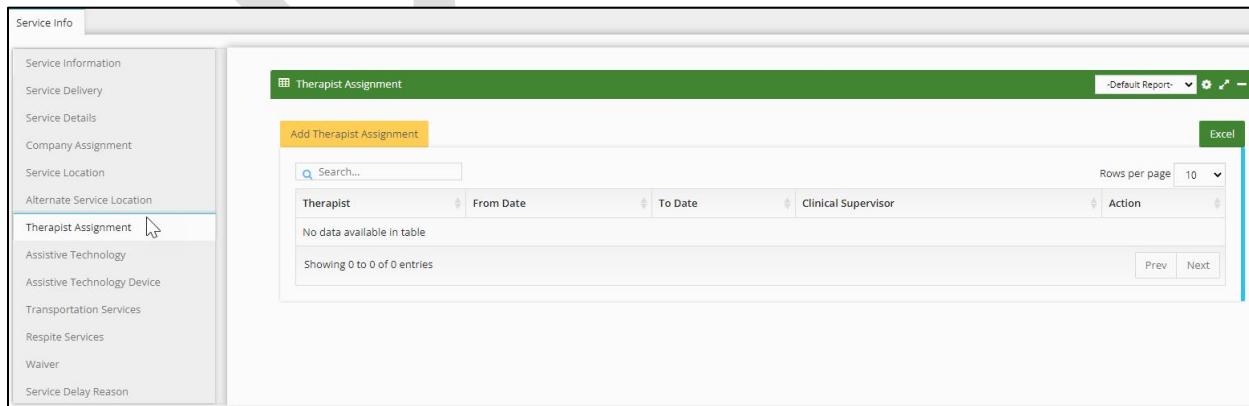
| FIELD | DESCRIPTION |
|----------------------|---|
| Location Type | Use this drop-down and select the appropriate location type (e.g., Agency Provider Site, etc.) for the child from the list. |
| Address 1 | Enter the alternative location/site primary address. |

| FIELD | DESCRIPTION |
|---|--|
| Address 2 | If applicable, enter address 2 (e.g., APT#). |
| Address 3 | If applicable, enter address 3. |
| City | Enter the alternative location/site city name. |
| State | Enter the alternative location/site state. |
| Zip | Enter the alternative location/site zip code. |
| Site | Enter if this alternative location type is Off-site or On-site. |
| *Is the child being served in a Natural Environment? | Use this drop-down and select 'Yes' or 'No' if the child is served in a Natural Environment. |

| BUTTON | DESCRIPTION |
|--|--|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Alternate Service Location panel. |

8.1.4.7.9.1.1.7 Therapist Assignment Grid/Table

 The Therapist's Assignment grid/table and panel, also known as the "Rendering Provider," is used to assign a therapist to the service authorization; various roles, such as the service coordinator, EIOD, or Provider, may do this. The assigned 'Company' indicated on the service authorization (SA) will receive a notification that they (example of roles mentioned above) received a SA and will then be able to access this panel once the 'company has accepted the service authorization.'



(i) See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section Home Tab Controllers; selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|---|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| BUTTON | DESCRIPTION |
|--|--|
|  Excel | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet.</p> <p>To see your results in excel, click Open.</p> <p>(i) Leaving all the Report Filters fields blank will show "all" results.</p> <p>(i) The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system.</p> |

| COLUMN | DESCRIPTION |
|----------------------------|--|
| Therapist | This column displays the therapist's name. |
| From Date | This column displays the therapist's assignment 'from' date. |
| To Date | This column displays the therapist's assignment to date. |
| Clinical Supervisor | This column displays the therapist's clinical supervisor's name (if applicable). |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|---|---|
|  Add Therapist Assignment | Click this button to add a 'Therapist Assignment' record for the child. The Therapist Assignment tab/panel appears (shown below). |

8.1.4.7.9.1.1.7.1 Therapist Assignment Tab/Panel

 Agencies should only select a Sub-Contracted Agency if the 'Company Assigned' has entered a contractual relationship with another agency to supply therapists. If applicable, you would select the Sub-Contracted Agency. The therapist associated with the sub-contracted agency would be available for selection. If the 'Company Assigned' doesn't have a sub-contract relationship or the sub is not used, select directly from the 'Therapist' drop-down.



 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|------------------------------|---|
| Sub-Contracted Agency | Use this drop-down and select the appropriate sub-contracted agency name from the list. |
| *Therapist | Use this drop-down and select the appropriate therapist's name from the list. |
| Clinical Supervisor | Use this drop-down and select the appropriate therapist's clinical supervisor's name from the list.  The clinical supervisor is assigned to a therapist when the therapist is set up. The clinical supervisor will auto-populate if the therapist has a clinical supervisor. |
| From Date | Manually enter the 'from' date or use the calendar picker (invoked by clicking this field) for the therapist. |
| To Date | Manually enter the 'to' date or use the calendar picker (invoked by clicking this field) for the therapist. |

| BUTTON | DESCRIPTION |
|--|--|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Therapist Assignment panel. |

8.1.4.7.9.1.1.8 Assistive Technology Panel

 If the service authorization is for assistive technology—a series of required questions need answering. Here you support and justify the need for assistive technology, and the requested device is allowable for the child.

 **A Service Authorization using the Assistive Technology program name must be created through the IFSP Services panel. You will then complete the Assistive Technology panel. You will not need to complete the Assistive Technology Device panel.**

 **An asterisk (*) adjacent to a field name/label means it is a required field you must populate.**

| FIELD | DESCRIPTION |
|--|---|
| *Does this child require the exploration of assistive technology devices and services? | Use this drop-down and select the appropriate answer ('Yes' or 'No'). |
| *Has the family obtained Assistive Technology through means other than Early Intervention, such as private purchase or loans? | Use this drop-down and select the appropriate answer ('Yes' or 'No'). |

| FIELD | DESCRIPTION |
|--|--|
| *Please explain | Use this textbox and explain your answer to the choice above. |
| *Is the child more than 90 days prior to her/his 3rd birthday? | Use this drop-down and select the appropriate answer ('Yes' or 'No'). |
| *Vendor Assignment Request | Use this textbox and provide the vendor assignment request. |
| *Therapist Requesting ATD | Use this drop-down and select the appropriate therapist requesting Assistive Technology Device (ATD) from the list. |
| *Specific Assistive Technology to be assessed | Use this textbox and provide the specific assistive technology to be assessed. |
| *Outcome # | To add an outcome(s), begin typing (type ahead) in this field to activate a drop-down search list and select the appropriate outcome(s) from the list. |

Confirm that requested device meets NYS Early Intervention Program criteria. Must be able to answer 'Yes' to at least one of the Below statements:

*Device will increase, maintain or improve self-help skills and functional abilities related to daily living activities and routines.

... Select ...

*Device will increase, maintain or improve functional ability.

... Select ...

*Device is a vision or hearing aid for children with diagnosed visual and/or hearing impairments.

... Select ...

*Device will increase, maintain, or improve communication skills and development, consistent with the child's functional level.

... Select ...

*Device will increase, maintain, or improve cognitive development.

... Select ...

**Confirm that the requested device meets NYS Early Intervention Program criteria.
Must be able to answer 'Yes' to at least one of the Below statements:**

| FIELD | DESCRIPTION |
|---|---|
| *Device will increase, maintain or improve self-help skills and functional abilities related to daily living activities and routines. | Use this drop-down and select the appropriate answer ('Yes' or 'No'). |

| FIELD | DESCRIPTION |
|---|---|
| *Device will increase, maintain or improve functional ability. | Use this drop-down and select the appropriate answer ('Yes' or 'No'). |
| *Device is a vision or hearing aid for children with diagnosed visual and/or hearing impairments. | Use this drop-down and select the appropriate answer ('Yes' or 'No'). |
| *Device will increase, maintain, or improve communication skills and development consistent with the child's functional level. | Use this drop-down and select the appropriate answer ('Yes' or 'No'). |
| *Device will increase, maintain, or improve cognitive development. | Use this drop-down and select the appropriate answer ('Yes' or 'No'). |

Confirm that requested device meets NYS Early Intervention Program criteria. Must be able to answer 'No' to all the below statements:

*Device is equipment or medical supplies solely related to either a) a medical condition or chronic illness unrelated to the child's disability and developmental status, b) life sustaining in nature, c) needed to maintain the child's health

-- Select --

*Device is a toy that is not adapted.

-- Select --

*Device is a generic item typically needed by all children.

-- Select --

*Device is standard equipment used by service providers in the provision of early intervention services regardless of service delivery setting

-- Select --

*Device is an environmental adaptation.

-- Select --

*Device is a cochlear implant or any of its components and/or accessories.

-- Select --

*Device is investigational or experimental.

-- Select --

**Confirm that the requested device meets NYS Early Intervention Program criteria.
Must be able to answer 'No' to all the below statements:**

| FIELD | DESCRIPTION |
|--|---|
| *Device is equipment or medical supplies solely related to either a) a medical condition or chronic illness unrelated to the child's disability and developmental status, b) life-sustaining in nature, c) needed to maintain the child's health. | Use this drop-down and select the appropriate answer ('Yes' or 'No'). |
| *Device is a toy that is not adapted. | Use this drop-down and select the appropriate answer ('Yes' or 'No'). |
| *Device is a generic item typically needed by all children. | Use this drop-down and select the appropriate answer ('Yes' or 'No'). |
| *Device is standard equipment used by service providers in the provision of early intervention services regardless of service delivery setting). | Use this drop-down and select the appropriate answer ('Yes' or 'No'). |
| *Device is an environmental adaptation. | Use this drop-down and select the appropriate answer ('Yes' or 'No'). |
| *Device is a cochlear implant or any components and/or accessories. | Use this drop-down and select the appropriate answer ('Yes' or 'No'). |
| *Device is investigational or experimental. | Use this drop-down and select the appropriate answer ('Yes' or 'No'). |

| |
|--|
| EIO/D Section |
| EIO/D Review Date |
| 06/08/2022 |
| Submit to ATD Coordinator for vendor selection |
| ... Select ... |

Early Intervention Official Designee (EIO/D) Section:

| FIELD | DESCRIPTION |
|--|---|
| EIO/D Review Date | This read-only field displays the EIO/D review date. |
| Submit to ATD Coordinator for vendor selection. | Use this drop-down and select the appropriate answer ('Yes' or 'No'). |

| |
|---|
| ATD Coordinator Section |
| ATD Vendor Selected |
| ... Select ... |
| After therapist/family/child collaboration, is an assistive technology device needed? |
| ... Select ... |
| Submit |

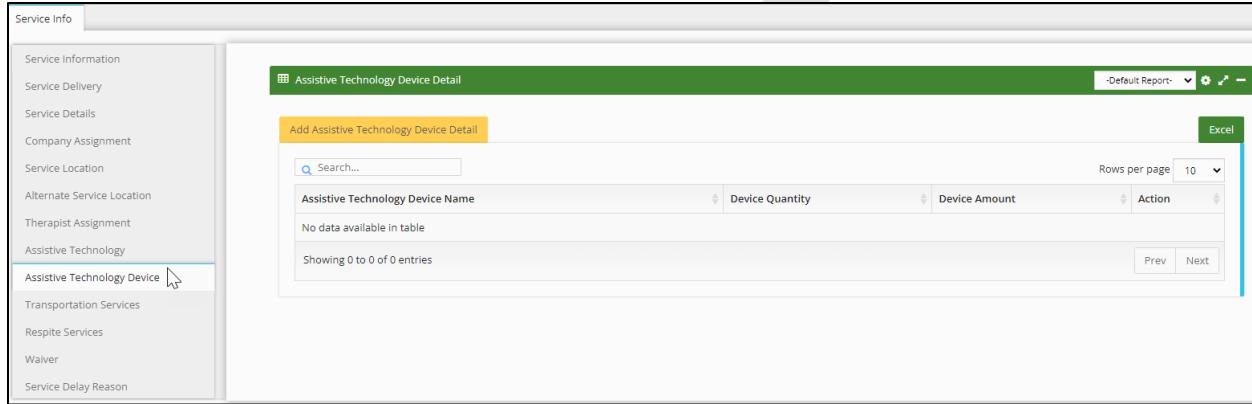
ATD Coordinator Section:

| FIELD | DESCRIPTION |
|--|--|
| ATD Vendor Selected | Use this drop-down and select the appropriate ATD vendor chosen from the list. (i) The ATD Coordinator should only complete the ATD Coordinator Section. |
| After therapist/family/child collaboration, is an assistive technology device needed? | Use this drop-down and select the appropriate answer ('Yes' or 'No'). |
| EIO/D ATD Review Date | Enter the EIO/D review date manually or use the calendar picker (invoked by clicking this field). |

| BUTTON | DESCRIPTION |
|--|--|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Assistive Technology panel. |

8.1.4.7.9.1.1.9 Assistive Technology Device Grid/Table

 The Assistive Technology Coordinator uses this grid/table.

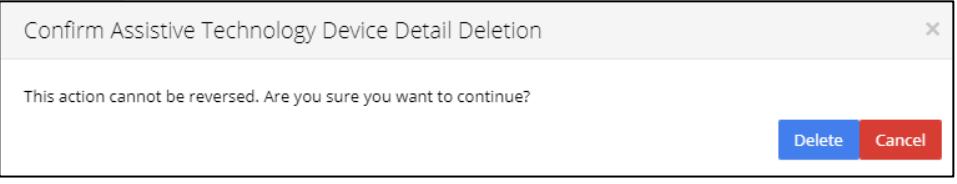


 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| BUTTON | DESCRIPTION |
|---|--|
| Excel  | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet.</p> <p>To see your results in excel, click Open.</p> <p> Leaving all the Report Filters fields blank will show "all" results.</p> <p> The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system.</p> |

| COLUMN | DESCRIPTION |
|---|--|
| Assistive Technology Device Name | This column displays the assistive technology used with the service provided for the child. |
| Device Quantity | This column displays the quantity of use for the devices requested. |
| Device Amount | This column displays the number of devices needed with the service provided for the child. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|---|---|
| Add Assistive Technology Device Detail  | Click this button to add an ‘ATD detail record for the child. When clicked, the Assistive Technology Device Tab and Assistive Technology Device Detail panel appear (shown below). |
| Edit  | Click this button to view or edit an “ATD detail” record for the child. The Assistive Technology Device Tab and Assistive Technology Device Detail panel appear when clicked.  The fields and descriptions for editing an Assistive Technology Device (ATD) Detail panel are the same as for adding an ATD Detail panel (ref. below). |
| Delete  | To delete an existing ATD for a child, click this button adjacent to the appropriate record/row. When clicked, the system prompts a confirmation message pad popup (shown below); click the Delete button to proceed or click the Cancel button to retract.  <p>Confirm Assistive Technology Device Detail Deletion </p> <p>This action cannot be reversed. Are you sure you want to continue?</p> <p>Delete Cancel</p> |

8.1.4.7.9.1.1.9.1 Assistive Technology Device Tab/Assistive Technology Device Detail Panel

When assistive technology is approved, the Assistive Technology Coordinator will add the vendor, request a quote, and enter information in this panel with the device, accessories, and amount.



The screenshot shows a software interface titled "Assistive Technology Device". A sub-tab "Assistive Technology Device Detail" is selected. On the right, there is a form with three fields: "Authorized Device" (dropdown menu showing "Cognitive Dev - Adaptive Toys"), "Device Quantity" (text input field containing "3"), and "Device Amount" (text input field containing "70000.00"). At the bottom right is a blue "Submit" button.

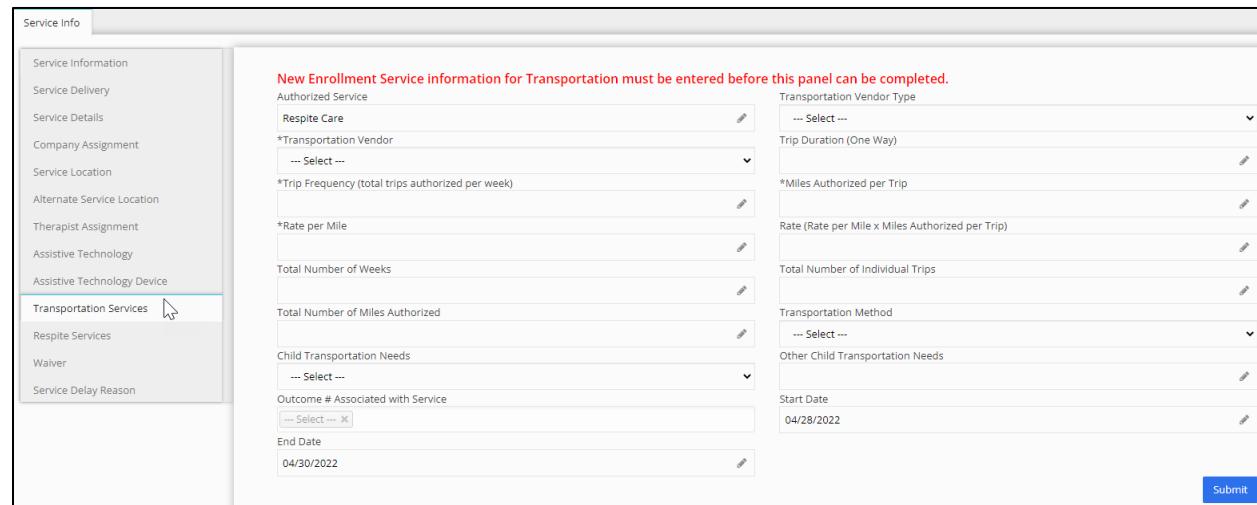
| FIELD | DESCRIPTION |
|--------------------------|--|
| Authorized Device | Use this drop-down and select the appropriate authorized device (e.g., Cognitive–Adaptive Toys, etc.) from the list. |
| Device Quantity | Enter the number of devices required in this text field or use the vertical arrow bar ▲▼. |
| Device Amount | Enter the total device amount in this text field or use the vertical arrow bar ▲▼. |

| BUTTON | DESCRIPTION |
|--|--|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Assistive Technology Device Detail panel. |

8.1.4.7.9.1.1.10 Transportation Services Panel

 If the child has identified transportation needs, complete the Service Information panel and return to this panel to finalize the additional information.

 **New Enrollment Service information for Transportation must be entered before this panel can be completed.**



The screenshot shows the 'Service Info' tab selected. On the left, a sidebar lists various service categories. The 'Transportation Services' category is highlighted with a blue border and has a cursor icon pointing at it. The main area contains several input fields: 'Authorized Service' (read-only, greyed out), 'Transportation Vendor Type' (dropdown menu), 'Trip Duration (One Way)' (dropdown menu), 'Miles Authorized per Trip' (text input), 'Rate per Mile' (text input), 'Total Number of Weeks' (text input), 'Total Number of Miles Authorized' (text input), 'Child Transportation Needs' (dropdown menu), 'Outcome # Associated with Service' (dropdown menu), 'Total Number of Individual Trips' (text input), 'Transportation Method' (dropdown menu), 'Other Child Transportation Needs' (text input), 'Start Date' (text input showing '04/28/2022'), 'End Date' (text input showing '04/30/2022'), and a 'Submit' button in the bottom right corner. A red error message at the top of the form states: 'New Enrollment Service information for Transportation must be entered before this panel can be completed.'

 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|---|---|
| Authorized Service | A read-only field displays the service authorized. |
| Transportation Vendor Type | Use this drop-down and select the appropriate transportation vendor type from the list. |
| *Transportation Vendor | Use this drop-down and select the appropriate transportation vendor from the list. |
| Trip Duration (One Way) | Enter the trip duration for one-way. For example, you are entering the estimated amount (40 min trip) of time for the child's transportation. |
| *Trip Frequency (total trips authorized per week) | Enter the trip frequency (total trips authorized per week). |
| *Miles Authorized per Trip | Enter the Miles Authorized per Trip. |

| FIELD | DESCRIPTION |
|--|--|
| *Rate per Mile | Enter the rate per mile for travel. |
| Rate (Rate per Mile x Miles Authorized per Trip) | The system calculates the rate per Mile x Miles Authorized per trip- |
| Total Number of Weeks | The system calculates the total number of weeks, individual trips, and the total number of miles. |
| Total Number of Individual Trips | The system calculates the total number of individual trips. |
| Total Number of Miles Authorized | The system calculates the total number of miles authorized. |
| Transportation Method | Use this drop-down and select the appropriate transportation method from the list. |
| Child Transportation Needs | Use this drop-down and select the appropriate transportation needs from the list. |
| Other Child Transportation Needs | If applicable, enter any additional transportation needs for the child. |
| Outcome # Associated with Service | Click in this field and select the appropriate outcome number associated with the service from the list. |
| Start Date | Manually enter the start date or use the calendar picker (invoked by clicking this field) for the trip. |
| End Date | Manually enter the end date or use the calendar picker (invoked by clicking this field) for the trip. |

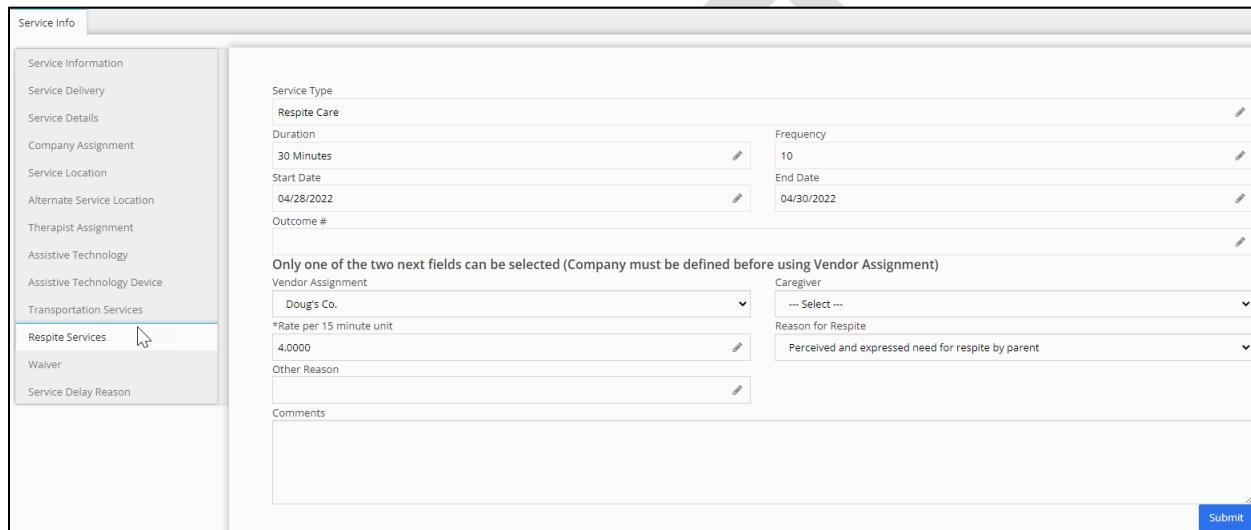
| BUTTON | DESCRIPTION |
|---|--|
| Submit <input type="button" value="Submit"/> | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Transportation Services panel |

8.1.4.7.9.1.1.11 Respite Services Panel

 Use this panel to answer questions specific to respite. Before creating the respite services, you must input data into the Service information panel. Please refer to [Section 69-4.18 - Respite services](#) for additional information on Respite Services.

 **New Enrollment Service information for Respite Care must be entered before this panel can be completed.**

 **The Service Type, Duration, Frequency, Start Date, End Date & Outcome # fields populate from the information entered in the Service Delivery pane.**



 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|--------------|--|
| Service Type | A read-only field displays the type of service to submit. |
| Duration | A read-only field displays the duration (e.g., 30 days) of the child's respite services. |
| Frequency | A read-only field displays the frequency of the child's respite services. |
| Start Date | A read-only field displays when the respite services start for the child. |
| End Date | A read-only field displays the date when the respite services end for the child. |
| Outcome # | A read-only field displays the respite services outcome for the child. |

| FIELD | DESCRIPTION |
|---------------------------------|--|
| | Only one of the two next fields can be selected (Company must be defined before using Vendor Assignment) |
| Vendor Assignment | Use this drop-down and select the appropriate vendor assignment from the list. |
| Caregiver | Use this drop-down and select the appropriate caregiver from the list. (i) Please note that if family or friends provide respite, they must be indicated as respite providers in the child's Teams menu. |
| *Rate per 15-minute unit | Enter the rate per 15-minute unit in this text field. |
| Reason for Respite | Use this drop-down and select the appropriate reason for respite from the list. |
| Other Reason | Enter the other reason in this text field if another cause is not in the Reason for Respite drop-down list above. |
| Comments | Enter any additional information about the reason for respite in this text field. |

| BUTTON | DESCRIPTION |
|--|--|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Respite Services panel. |

8.1.4.7.9.1.1.12 Waiver Grid/Table

 A waiver is an exception to a billing rule. A service coordinator does not need to request a waiver except on behalf of a provider. Providers will have the ability to request upfront waivers themselves. The EI-Hub Case Management has billing rules built in according to NYS requirements.

 **Waivers first, no back-end waivers. Back-end waivers are services providers request after providing the service.**

| Waiver | | | | | | | | | | | |
|--|-------------------|------------|---------------------|------------------|--------------------|---------------------|---------------|--------------------|---------------------|--------|--|
| <input type="button" value="Add Waiver"/> <input type="text" value="Search..."/> <input type="button" value="Excel"/> | | | | | | | | | | | |
| <input type="button" value="Default Report"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | | | | | | | | | | | |
| Waiver Type | Reason for Waiver | Visit Type | Waiver Service Date | Number of Visits | Requestor | Request Date & Time | Waiver Status | EIOD Reviewer | EIO/D Decision Date | Action | |
| Waiver Type 1 | System Generated | Regular | 06/08/2022 | 5 | Automation Testing | 06/08/2022 01:59 PM | Approve | Automation Testing | 06/08/2022 | | |
| Waiver Type 2 | System Generated | Regular | 06/08/2022 | 5 | Automation Testing | 06/08/2022 01:59 PM | Approve | Automation Testing | 06/08/2022 | | |
| Waiver Type 5 | System Generated | Regular | 06/08/2022 | 5 | Automation Testing | 06/08/2022 01:59 PM | Approve | Automation Testing | 06/08/2022 | | |

 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| BUTTON | DESCRIPTION |
|---|--|
|  | Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet. To see your results in excel, click Open . <p> Leaving all the Report Filters fields blank will show "all" results.</p> <p> The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system.</p> |

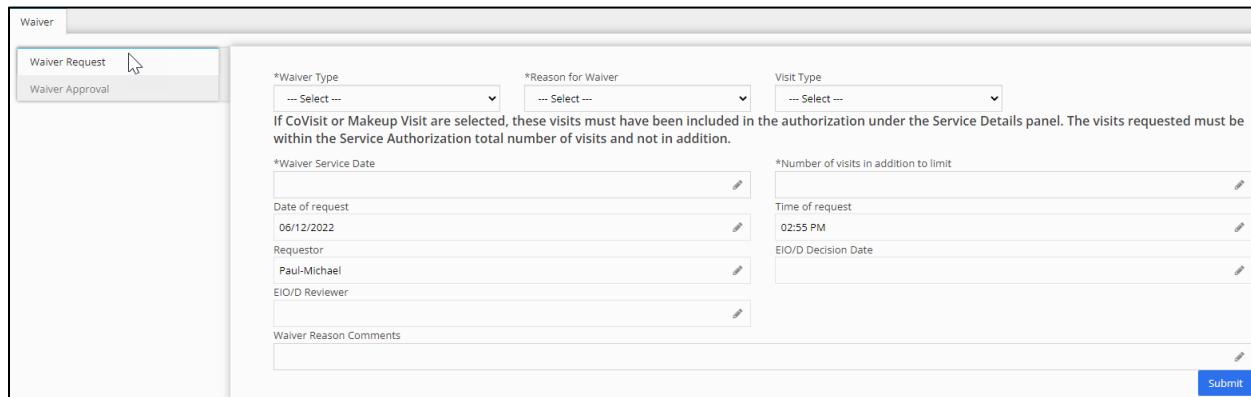
| COLUMN | DESCRIPTION |
|--------------------------------|--|
| Waiver Type | This column displays the waiver type requested. |
| Reason for Waiver | This column displays the reason for the waiver. |
| Visit Type | This column displays the visit type for the child. |
| Waiver Service Date | This column displays the waiver service date. |
| Number of Visits | This column displays the number of visits for the child. |
| Requestor | This column displays the name of the requestor. |
| Request Date & Time | This column displays the request date and time. |
| Waiver Status | This column displays the waiver status. |
| EIOD Reviewer | This column displays the Early Intervention Official Designee (EIO/D) reviewer's name. |
| EIO/D Decision Date | This column displays the EIO/D decision date. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|---|---|
| Add Waiver Add Waiver | To add a 'Waiver' record for the child, click this button. When clicked, the Waiver Tab and Waiver Request and Waiver Approval panels appear (shown below). |

8.1.4.7.9.1.1.12.1 Waiver Request Panel

 Use this panel to request a waiver to ask permission to waive requirements and get service delivered the way the child needs it done.

 In NYEIS, the ability to grant waivers for services delivered existed; this will no longer be the case with the EI-Hub.



The screenshot shows the 'Waiver Request' panel. At the top, there are tabs for 'Waiver Request' (which is selected) and 'Waiver Approval'. Below the tabs are three dropdown menus: 'Waiver Type' (with an asterisk), 'Reason for Waiver' (with an asterisk), and 'Visit Type' (with an asterisk). A note below the dropdowns states: 'If CoVisit or Makeup Visit are selected, these visits must have been included in the authorization under the Service Details panel. The visits requested must be within the Service Authorization total number of visits and not in addition.' To the right of the dropdowns are two input fields: 'Waiver Service Date' (showing 06/12/2022) and 'Number of visits in addition to limit' (empty). Below these are 'Requestor' (Paul-Michael), 'Time of request' (02:55 PM), 'EI/D Reviewer' (empty), and 'EI/D Decision Date' (empty). At the bottom right is a 'Submit' button.

 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|--------------------|--|
| *Waiver Type | Use this drop-down and select the appropriate waiver type request from the list.  Use this field only if the waiver did not prepopulate upon creating the service authorization. |
| *Reason for Waiver | Use this drop-down and select the appropriate reason for waiver type (e.g., Child Needed, etc.) from the list. |
| Visit Type | Use this drop-down and select the appropriate visit type (e.g., Make-up, etc.) from the list. |

 If Co-visit or Makeup Visit is selected, the co-visit must have been included in the authorization under the Service Details panel. In addition, the visits requested must be within the Service Authorization total number of visits and not in addition.

 The waiver visit must be within the total number of sessions. The number of visits, in excess, exceeds the limit for that service for the billing rule. For example, if the waiver allows 1 per discipline per day, and you want to go twice that day, then you enter "1."



Currently, this functionality does not allow a provider to co-treat with more than one provider (e.g., the child has three providers - speech can only co-treat with PT, not with OT (this fix is in development)).

| FIELD | DESCRIPTION |
|--|---|
| *Waiver Service Date | Enter the waiver service date manually or use the calendar picker (invoked by clicking this field). |
| *Number of visits in addition to limit | Enter the number of visits in addition to the limit in this text field or use the horizontal arrow bar ☰. |
| Date of request | A read-only field displays the requested date. |
| Time of request | A read-only field displays the requested time. |
| Requestor | A read-only field displays the name of the requestor. |
| EIO/D Decision Date | A read-only field displays the Early Intervention Official Designee (EIO/D) decision date. |
| EIO/D Reviewer | A read-only field displays the name of the EIO/D reviewer. |
| Waiver Reason Comments | Use the textbox to add any reason comments about the waiver. |

| BUTTON | DESCRIPTION |
|---|--|
| Submit <input type="button" value="Submit"/> | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Waiver Request panel. |

8.1.4.7.9.1.1.12.2 Waiver Approval Panel

 The Early Intervention Official Designee (EIO/D) can 'Approve' or 'Reject' a waiver. If a waiver(s) is denied/rejected, the Service Coordinator (SC) must change the service authorization. The SC can request waivers after a service is authorized but **before** providing the service. For example, the EIO/D approved physical therapy (PT) for the child, but the family is on vacation, so the therapist requests to see the child twice since they missed a week due to vacation.



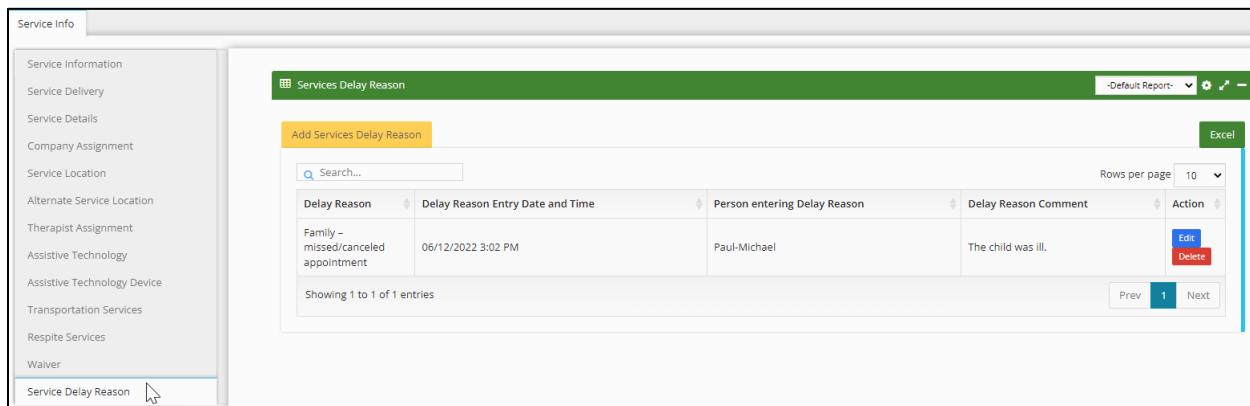
 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|---------------------|--|
| *Waiver Status | Use this drop-down and select the waiver status ('Approve' or 'Reject') from the list. |
| EIO/D Reviewer | A read-only field displays the name of the EIO/D reviewer. |
| EIO/D Decision Date | A read-only field displays the EIO/D decision date. |

| BUTTON | DESCRIPTION |
|--------|---|
| Submit | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Waiver Approval panel. |

8.1.4.7.9.1.1.13 Services Delay Reasons Grid/Table

 This grid/table presents all services which have been delayed and could not be provided within 30 days of consent/authorization.



 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| BUTTON | DESCRIPTION |
|---|--|
|  Excel | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet.</p> <p>To see your results in excel, click Open.</p> <p> Leaving all the Report Filters fields blank will show "all" results.</p> <p> The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system.</p> |

| COLUMN | DESCRIPTION |
|----------------------|--|
| Delay Reasons | This column displays the service delay reason for the child. |

| COLUMN | DESCRIPTION |
|---|--|
| Delay Reason Entry Date and Time | This column displays the entry date and time for the service delay reason. |
| Person Entering Delay Reason | This column displays the person who entered the service delay reason. |
| Delay Reason Comment | This column displays the comment for the service delay reason. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|---|--|
| Add Services Delay Reason Add Services Delay Reason | Click this button to add a 'Services Delay Reason' record for the child. The Service Delay Reason tab/panel appears (shown below). |

8.1.4.7.9.1.1.13.1 Services Delay Reason Tab/Panel

The screenshot shows a software interface for managing service delay reasons. At the top, there's a header bar with the title 'Service Delay Reason'. Below it, a sub-header says 'Services Delay Reason'. The main area contains several input fields and dropdowns:

- A dropdown menu labeled 'Delay Reason' with the option 'Family - missed/canceled appointment' selected.
- A text area labeled 'Delay Reason Comment' containing the text 'The child was ill.'
- A section labeled 'Delay Reason Entry Date and Time' showing the date and time as '6/12/2022 3:02:08 PM'.
- A section labeled 'Person entering Delay Reason' showing the name 'Paul-Michael'.
- A blue 'Submit' button located at the bottom right of the form.

An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|------------------------------|--|
| *Delay Reason | Use this drop-down and select the appropriate delay reason from the list. |
| *Delay Reason Comment | Use the textbox provided and enter a brief comment about the reason for the child's service delay. |

| FIELD | DESCRIPTION |
|---|--|
| Delay Reason Entry Date and Time | This read-only field displays the current date and time stamp when filling out this panel. |
| Person Entering Delay Reason | This read-only field displays your EI-Hub username. |

| BUTTON | DESCRIPTION |
|--|---|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Waiver Approval panel. |

8.1.4.7.10 Natural Environments Panel



Use this panel to indicate where the child spends most of their time during the day.




An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|--|---|
| *What Are The Natural Environments For The Child? | Use the textbox and briefly describe the child's natural environment. |

| FIELD | DESCRIPTION |
|---|---|
| If the child is in daycare, list ways the qualified professionals will train daycare providers to accommodate the needs of the child. | Use this textbox to list the methods by which the qualified professional will train daycare staff to handle the child's needs throughout the day. |

| BUTTON | DESCRIPTION |
|---|--|
| Submit <input type="button" value="Submit"/> | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Natural Environments panel. |

8.1.4.7.11 Other Services/Resources where Family is Participating Panel

 This panel reveals services the child could receive outside the IFSP/EIP. These services are outside the Early Intervention Program (EIP), and the EIP is not paying for the services. Use this panel to capture the information and get a complete picture of the child's status.

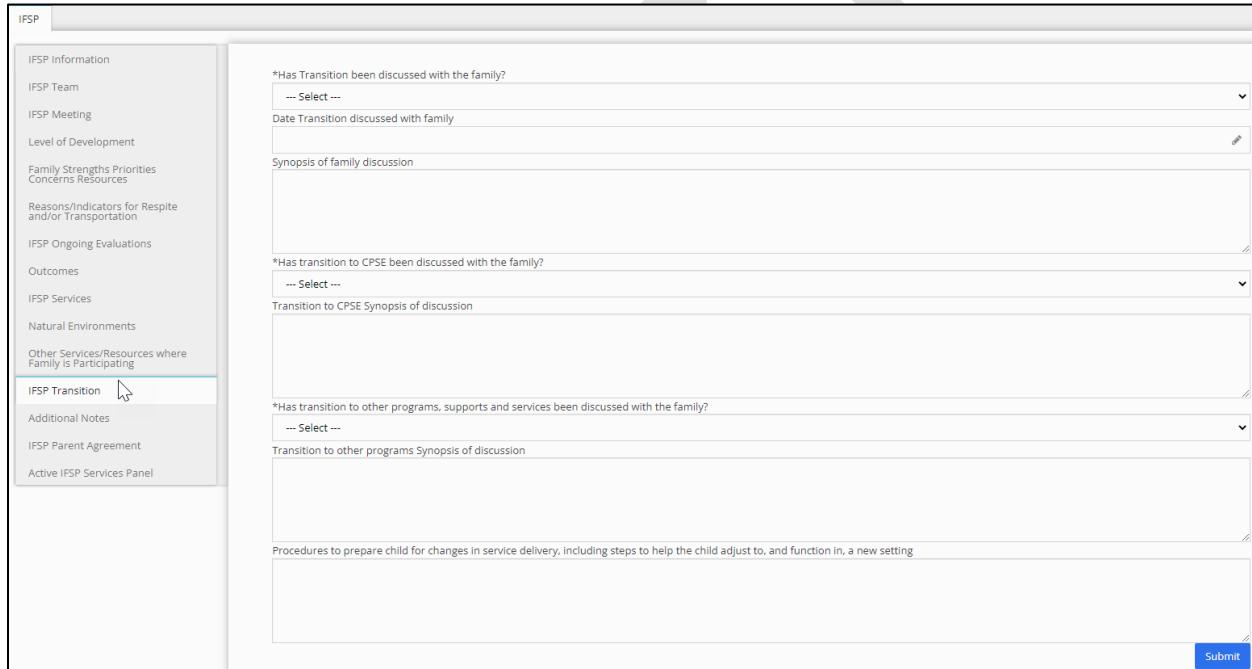
 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|--|--|
| *Medical and Other Services (Needed but not required under Part C) | Enter Medical and Other Services (Needed but not required under Part C) in this textbox. |
| Service or Program | Enter the name of the Service or Provider in this textbox. |
| Provider | Enter the name of the provider in this textbox. |
| Contact Information | Enter the contact information in this textbox. |
| Funding source or steps are taken to secure services | Enter funding source or steps taken to secure services in this textbox. |

| BUTTON | DESCRIPTION |
|--|--|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Other Services/Resources where the Family is Participating panel. |

8.1.4.7.12 IFSP Transition Panel

 This panel captures the details of the Transition discussion with the family and other transition process discussion details, such as transitioning to the CPSE and transitioning to other programs and supports.



The screenshot shows the 'IFSP' tab selected in the top navigation bar. On the left, a sidebar menu lists various IFSP-related sections: IFSP Information, IFSP Team, IFSP Meeting, Level of Development, Family Strengths Priorities Concerns Resources, Reasons/Indicators for Respite and/or Transportation, IFSP Ongoing Evaluations, Outcomes, IFSP Services, Natural Environments, Other Services/Resources where Family is Participating, IFSP Transition (which is currently active), Additional Notes, IFSP Parent Agreement, and Active IFSP Services Panel. The main content area contains three sections: 1) 'Has Transition been discussed with the family?' with a dropdown menu labeled '... Select ...' and a date input field 'Date Transition discussed with family'. 2) 'Has transition to CPSE been discussed with the family?' with a dropdown menu labeled '... Select ...' and a text input field 'Transition to CPSE Synopsis of discussion'. 3) 'Has transition to other programs, supports and services been discussed with the family?' with a dropdown menu labeled '... Select ...' and a text input field 'Transition to other programs Synopsis of discussion'. At the bottom right is a blue 'Submit' button.

 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|--|--|
| *Has Transition been discussed with the family? | Use this drop-down and select the appropriate answer ('Yes' or 'No'). |
| Date Transition discussed with family | Enter the transition discussion date manually or use the calendar picker (invoked by clicking this field). |

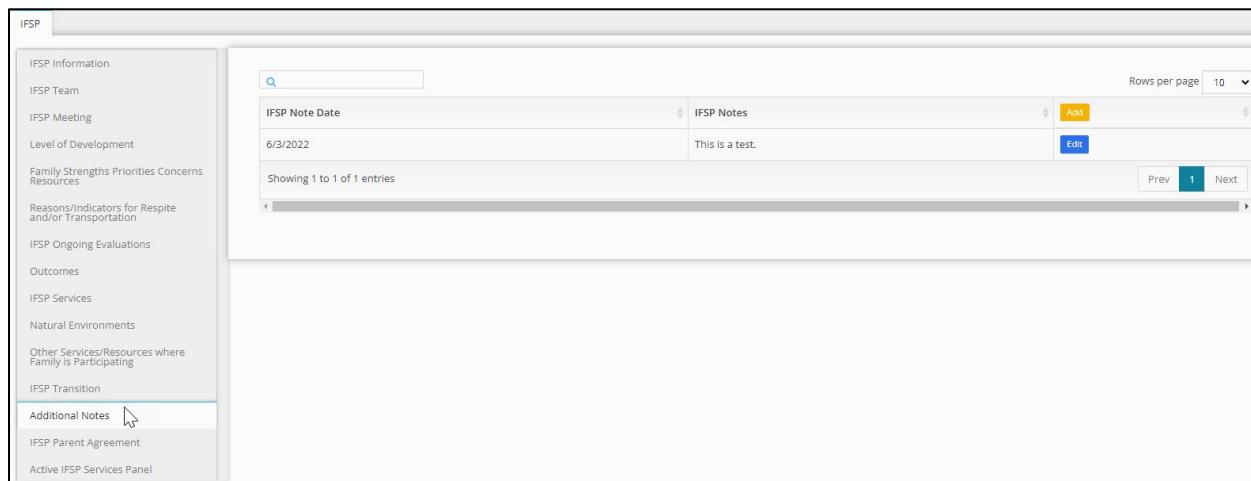
| FIELD | DESCRIPTION |
|---|---|
| |  Remember you must discuss a 'Transition' at every IFSP meeting. |
| Synopsis of family discussion | Use this textbox to provide a synopsis of the family discussion. |
| *Has transition to CPSE been discussed with the family? | Use this drop-down and select the appropriate answer ('Yes' or 'No'). |
| Transition to CPSE Synopsis of discussion | Use this textbox to provide a synopsis of the discussion. |
| *Has transition to other programs, supports, and services been discussed with the family? | Use this drop-down and select the appropriate answer ('Yes' or 'No'). |
| Transition to other programs Synopsis of discussion | Use this textbox to provide a synopsis of the discussion. |
| Procedures to prepare child for changes in service delivery, including steps to help the child adjust to, and function in, a new setting | Use this textbox to provide the procedures to prepare the child for changes in service delivery, including steps to help the child adjust to and function in a new setting. |

| BUTTON | DESCRIPTION |
|--|---|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the IFSP Transition panel. |

8.1.4.7.13 Additional Notes Grid/Table

 This panel is not required; this is an area for documenting anything the user (e.g., SC, EIO/D, etc.) wants to add helpful notes to a child's record.

 These additional notes do not serve the purpose of a 'Session Note.' Instead, these are general notes that may be helpful such as the code to a gated community or the hours the child is in daycare, etc.



 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| COLUMN | DESCRIPTION |
|----------------|--|
| IFSP Note Date | This column displays the IFSP note date. |
| IFSP Notes | This column displays the IFSP notes. |

| BUTTON | DESCRIPTION |
|--------|--|
| Add | Click this button to add an 'Additional IFSP Note' for the child. The Add IFSP Note popup panel appears (shown below). |

| BUTTON | DESCRIPTION |
|---|--|
| Edit  | <p>Click this button to view or edit the child's IFSP Note record. When clicked, the Edit IFSP Note popup panel appears.</p> <p> The fields and descriptions for editing an IFSP Note popup panel are the same as for adding an IFSP Note popup panel.</p> |

8.1.4.7.13.1 Add IFSP Note Popup Panel



Add IFSP Note

IFSP Note Date

IFSP Notes

Submit Cancel

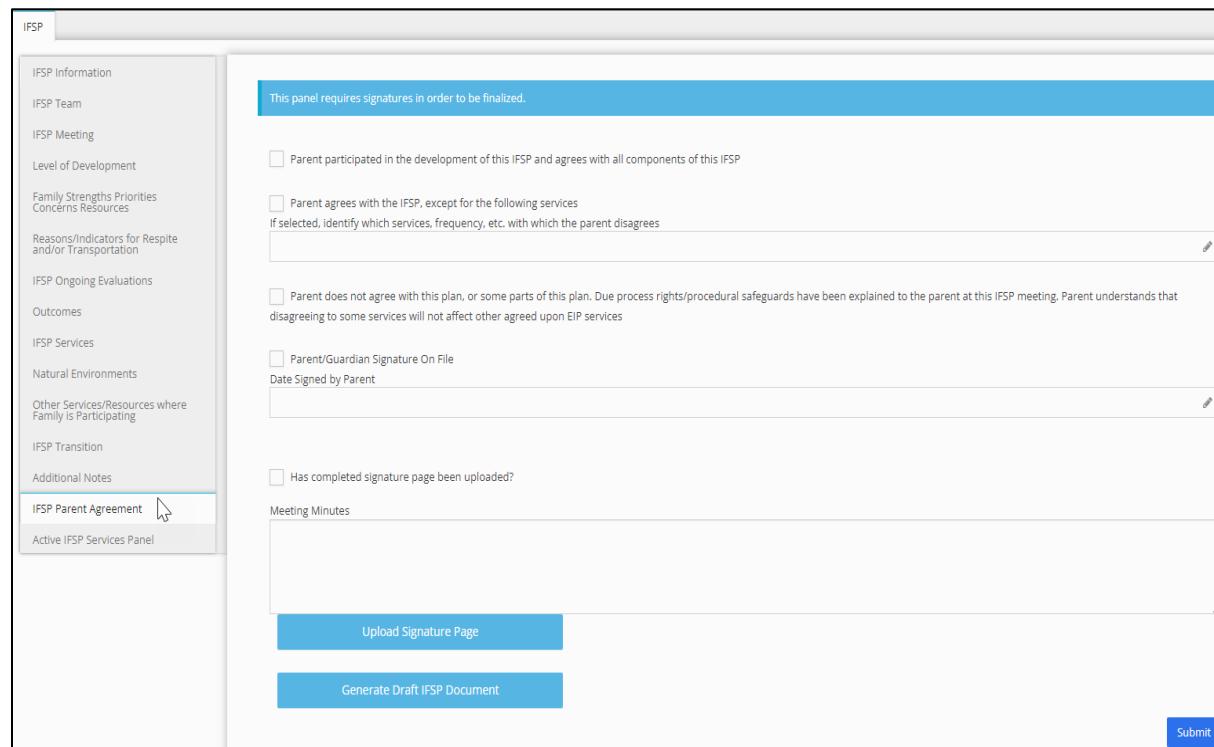
| FIELD | DESCRIPTION |
|----------------|--|
| IFSP Note Date | Enter the IFSP note date manually or use the calendar picker (invoked by clicking this field). |
| IFSP Notes | Enter a brief description for the IFSP note in the textbox. |

| BUTTON | DESCRIPTION |
|---|--|
| Submit  | <p>To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Additional Notes panel.</p> <p> Please note if you mistakenly click the 'Submit' button without adding information (leaving fields blank), the system allows for saving blank notes. After making an entry, the 'Edit' button appears adjacent to the blank row.- Select/click the 'Edit' button to add the information. There is no delete functionality for notes in the EI-Hub.</p> |
| Cancel  | To cancel the action for populating the popup panel, click this button. When clicked, the Add IFSP Note popup panel closes. |

8.1.4.7.14 IFSP Parent Agreement Panel

 Use this panel for the child's parent to indicate if they agree/disagree with IFSP. The Service Coordinator (SC) records the parent's choice in this panel and the date. The SC also can upload a copy of the signed paper document.

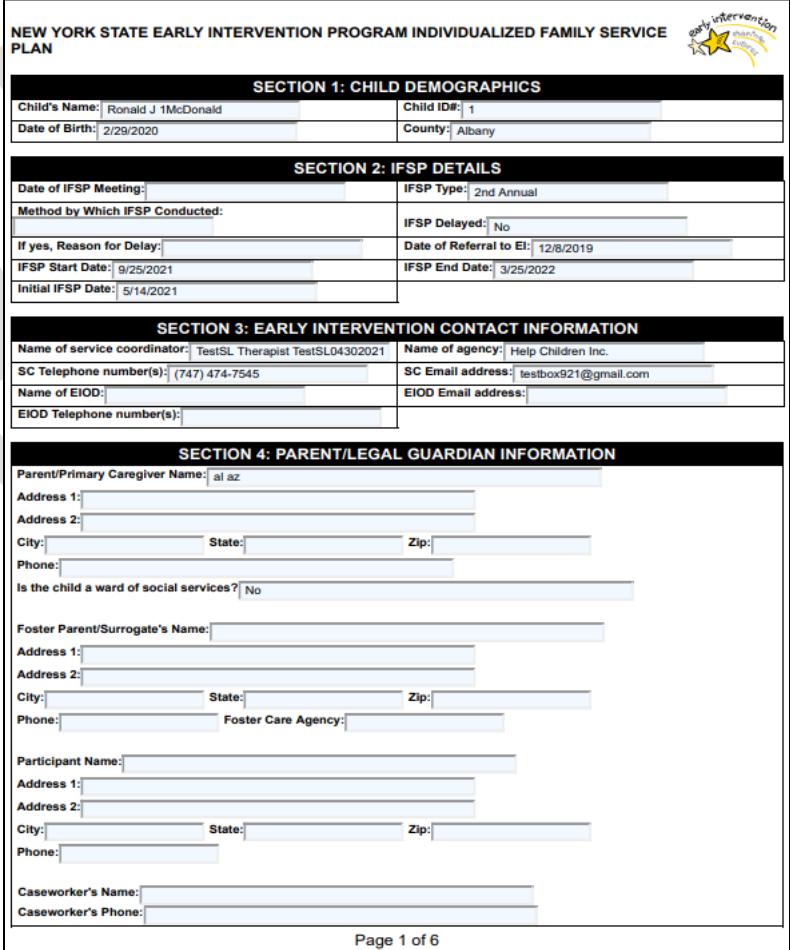
 **There are no e-signatures in the EI-Hub Case Management. However, this panel requires that the obtainment of parent/caregiver signatures be recorded.**



| FIELD / CHECKBOX | DESCRIPTION |
|---|--|
| <input type="checkbox"/> Parent participated in the development of this IFSP and agrees with all components of this IFSP? | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| <input type="checkbox"/> Parent agrees with the IFSP, except for the following services | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| If selected, identify which services, frequency, etc., with which the parent disagrees | Use the textbox to list which aspects of the IFSP the parent disagrees with, such as services, frequency, etc. |

| FIELD / CHECKBOX | DESCRIPTION |
|---|--|
| <input type="checkbox"/> Parent does not agree with this plan or some parts. Due process rights/procedural safeguards have been explained to the parent at this IFSP meeting. Parent understands that disagreeing to some services will not affect other agreed upon EIP services | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| <input type="checkbox"/> Parent/Guardian Signature On File | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Date Signed by Parent | Enter the parent/guardian signature date manually or use the calendar picker (invoked by clicking this field). |
| <input type="checkbox"/> Has completed signature page been uploaded? | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Meeting Minutes | Use the textbox to enter relevant notes about the IFSP meeting and/or parent agreement. |

| BUTTON | DESCRIPTION |
|---|---|
| Upload Signature Page Upload Signature Page | To upload a parent/guardian signature, click this button. When clicked, the Upload Signature popup panel appears (shown below). |

| BUTTON | DESCRIPTION |
|---|---|
| Generate Draft IFSP Document Generate Draft IFSP Document | To generate an IFSP draft PDF document, click this button. When clicked, the system generates and downloads the IFSP pdf file (e.g., 'Downloads' folder in Windows OS) document and invokes a browser download link (example shows using an MS Edge browser). Next, select/click the Open hyperlink, and the pdf file appears in your browser (e.g., shown below using MS Edge). You can also view the PDF file by opening it from your 'Downloads' folder.  |
| | <p>i The screenshot below differs from the template of the full IFSP housed in EI-Hub.</p>  |

8.1.4.7.14.1 Upload Signature Page Popup Panel

Document Area : IFSP
*Document Type

Parent Documents

Allowed File Formats: *.pdf, *.jpg, *.jpeg, *.png, *.doc, *.docx,

Document Name

Choose File No file chosen

Notes

Upload Cancel

(i) An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|--|--|
| Document Area: IFSP *Document Type | Use this drop-down and select the appropriate document type (e.g., Parent Documents) from the list. |
| Document Name | Enter the name of the uploaded document file. |
| Choose File <input type="button" value="Choose File"/> | To upload your file into the EI-Hub database, click this button. When clicked, your PC's web browser (e.g., MS Edge) prompts an "Open" window; navigate to where your document/file resides, click on the file (highlighted), and click the Open button on the window. The name of your file name should read adjacent to the 'Choose File' button. |
| Notes | Use this textbox to enter relevant notes about your document file uploaded into the system. |

| BUTTON | DESCRIPTION |
|--|--|
| Upload <input type="button" value="Upload"/> | After populating the fields in the Upload Signature Page popup panel (mentioned above), your file uploads into the EI-Hub database when clicked. |

| BUTTON | DESCRIPTION |
|--|---|
| Cancel  | To cancel the action for uploading a file, click this button. When clicked, the Upload File panel closes. |

| BUTTON | DESCRIPTION |
|--|---|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the IFSP Parent Agreement panel. |

8.1.4.7.15 Active IFSP Services Grid/Table

 After the Initial IFSP has been created, there are two methods of creating subsequent IFSPs:

Method 1:

- The user can Copy the previous IFSP, or they can create a new IFSP.
- If the previous IFSP is copied, most panels are duplicated into the Draft IFSP. The contents of the IFSP meeting, Levels of Development, Reasons/Indicators for Respite & Transportation, Transition & Parent Agreement panels do not copy over into the Draft. The contents of the other panels are copied in their entirety. The panels may need to be selectively updated. However, **all** active services from the previous IFSP are copied into the Draft IFSP. The user can selectively delete service authorizations that are no longer required.

Method 2:

- The other method of creating a subsequent IFSP is to create a new IFSP by using the **Add IFSP** button. This method will generate a completely blank IFSP. All panels would have to be completed. This method may be applicable for an annual review when none of the information in the previous panels applies to the new IFSP.
 - The child may need to continue with the previously authorized services, which require the completion of multiple panels created by the Active IFSP Services panel.
- By accessing this panel, you can select the previously authorized services you wish to bring forth into the new IFSP. For example, selecting a service from the Active IFSP Services panel will copy the service into the Draft IFSP. The dates will be updated to reflect the Draft IFSP dates, but all other service elements will remain the same.

 Users can Copy (Method 1), e.g., applicable if an exited child re-enters EIP, Add IFSP (Method 2), and start entirely from scratch and Add an IFSP. Please note the system will carry nothing forward (e.g., outcomes, etc.).

Method 3:

| | |
|----------------|-----------------|
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|----------------|-----------------|

- It starts from scratch, but you can copy previously authorized services.

Please remember the functionality of the Active IFSP Services panel is only applicable when creating, not copying/cloning, an IFSP. If you attempt to, you will receive an error message, "Error: Copy Active IFSP service to a current Draft IFSP failed."

| IFSP Type | IFSP Start Date | IFSP End Date | Service Type | Therapist | Service Start Date | Service End Date | Quantity | Frequency | Length | Intensity | Authorization Number | Action |
|-----------|-----------------|---------------|----------------------|-----------|--------------------|------------------|----------|-----------|--------|-----------|----------------------|--|
| Initial | 03/02/2022 | 06/09/2022 | Assistive Technology | | | | 0 | | | IND | A12071 | <button>Clone Active IFSP Service</button> |
| Initial | 03/02/2022 | 06/09/2022 | Audiology | | | | 30 | | | IND | | <button>Clone Active IFSP Service</button> |

i See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|---------------|--|
| Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| BUTTON | DESCRIPTION |
|--------------|--|
| Excel | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet.</p> <p>To see your results in excel, click Open.</p> <p>i Leaving all the Report Filters fields blank will show "all" results.</p> <p>i The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system.</p> |

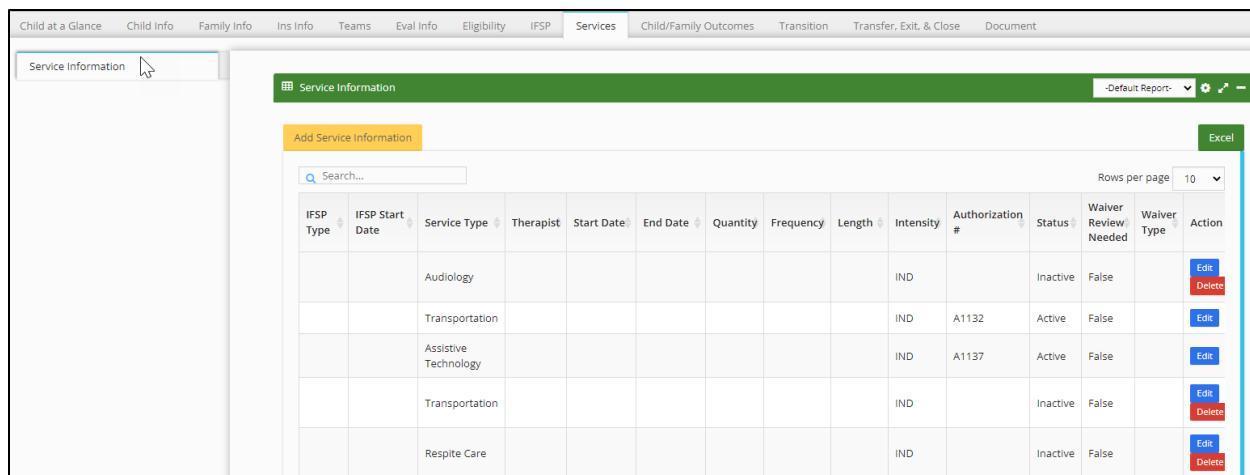
| COLUMN | DESCRIPTION |
|------------------|--|
| IFSP Type | This column displays the types of IFSP (e.g., Initial, 6-month review, annual) |

| COLUMN | DESCRIPTION |
|---|--|
| IFSP Start Date | This column displays the start date of the IFSP. |
| IFSP End Date | This column displays the end date of the IFSP. |
| Service Type | This column displays the service type. |
| Therapist | This column displays the name of the therapist. |
| Service Start Date | This column displays the service start date. |
| Service End Date | This column displays the service end date. |
| Quantity | This column displays the number (quantity) of sessions for the child. |
| Frequency | This column displays how often (frequency) the sessions occurred for the child. |
| Length | This column displays the length of sessions for the child. |
| Intensity | This column displays the intensity (e.g., visits per day) of sessions/services provided for the child. |
| Authorization Number | This column displays the authorization number for the service provided for the child. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |
| Action / Clone Active IFSP Service | To clone an active IFSP service for the child, click this button. Clone Active IFSP Service |

8.1.5 Services Tab

8.1.5.1 Services Information Grid/Table

 This grid/table will show only services authorized on a child's IFSP. Enter an IFSP service by selecting/clicking the **Add Service Information** button.



| IFSP Type | IFSP Start Date | Service Type | Therapist | Start Date | End Date | Quantity | Frequency | Length | Intensity | Authorization # | Status | Waiver Review Needed | Waiver Type | Action |
|-----------|-----------------|----------------------|-----------|------------|----------|----------|-----------|--------|-----------|-----------------|----------|----------------------|-------------|---|
| | | Audiology | | | | | | | IND | | Inactive | False | | <button>Edit</button> <button>Delete</button> |
| | | Transportation | | | | | | | IND | A1132 | Active | False | | <button>Edit</button> |
| | | Assistive Technology | | | | | | | IND | A1137 | Active | False | | <button>Edit</button> |
| | | Transportation | | | | | | | IND | | Inactive | False | | <button>Edit</button> <button>Delete</button> |
| | | Respite Care | | | | | | | IND | | Inactive | False | | <button>Edit</button> <button>Delete</button> |

 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| COLUMN | DESCRIPTION |
|-----------------|--|
| IFSP Type | This column displays the IFSP Type that the child is receiving. |
| IFSP Start Date | This column displays the IFSP Start Date of the IFSP in which the child is receiving IFSP services. |
| Service Type | This column displays the service type for the child, such as physical therapy. This field is automatically populated by what is entered into the "program field " of the individual service authorization. |
| Therapist | This column displays the name of the child's rendering therapist providing the service. |
| Start Date | This column displays the starting date of the service authorization. |
| End Date | This column displays the ending date of the service authorization because services can 'stop' before the end date of the service authorization. |
| Quantity | This column displays the number (quantity) of sessions for the child within the authorized time period – the EI Hub automatically calculates this value. |

| COLUMN | DESCRIPTION |
|-----------------------------|--|
| Frequency | This column displays how often (e.g., daily or weekly) the sessions occurred for the child. |
| Length | This column displays the length of sessions for the child calculated in minutes. |
| Intensity | This column displays the intensity (e.g., visits per day) of sessions/services provided for the child. |
| Authorization # | This column displays the authorization number for the service provided for the child.  A service authorization number appears when it's 'Active.' |
| Status | This column displays the status (' Active ' or ' Inactive ') of the service provided for the child. |
| Waiver Review Needed | This column displays if a waiver review is needed for the child. |
| Waiver Type | This column displays the type of waiver for the child. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|---|---|
| Add Service Information  | To add 'Service Information for the child, click this button. The Service Info tab with the associated panels and the IFSP Service Link tab appears when clicked.  For all panel fields/descriptions and buttons, please refer to <u>Service Information Panel</u>. |
| Edit  | Click this button to view or edit an "service information" record for the child. The Service Info tab with the associated panels and the IFSP Service Link tab appears when clicked.  For all panel fields/descriptions and buttons, please refer to <u>Service Information Panel</u>. |

| BUTTON | DESCRIPTION |
|--|---|
| Delete  | <p>To delete existing service information for a child, click this button adjacent to the appropriate record/row. When clicked, the system prompts a confirmation message pad popup (shown below); click the Delete button to proceed or click the Cancel button to retract.</p> <div style="border: 1px solid #ccc; padding: 10px; margin-top: 10px;"> <p>Confirm Service Information Deletion ×</p> <p>This action cannot be reversed. Are you sure you want to continue?</p> <div style="text-align: right; margin-top: 10px;"> Delete Cancel </div> </div> |

8.1.6 Child Family Outcomes Tab

 The Family Outcome Survey and the Child Outcomes Summary Form (COSF) are two separate panels.

 **These sections (grayed-out) are on hold as the process will be ready after the El-Hub go-live launch (TBD).**

8.1.6.1 Family Outcome Survey Panel

 This panel is only accessible/editable to users with a 'Superuser' El-Hub account type.

 First, certain families are selected to participate in the outcome survey. Then, the county sets targets, and there will be notifications to county employees on which child should get a survey once the child exits the Early Intervention Program (EIP). The family then evaluates their experience of the EIP. Finally, the survey is paper, returned to the county, and entered into this panel.

The following displayed responses to "Early intervention services that have helped me and/or my family" (shown below). To edit a reply (s), click the **Edit** button adjacent to a question row.

| Info | Ins Info | Teams | Eval Info | Eligibility | IFSP | Services | Child/Family Outcomes | Transition | Transfer, Exit, & Close | Document |
|--|----------------------|-------|-----------|-------------|------|----------|-----------------------|------------|-------------------------|----------|
| Early intervention services have helped me and/or my family: | | | | | | | | | | |
| | <input type="text"/> | | | | | | | | Rows per page | 25 |
| Question | | | | | | | | Response | | |
| Understand how the Early Intervention system works. | | | | | | | | | Edit | |
| Understand the roles of the people who work with my child and family. | | | | | | | | | Edit | |
| Communicate more effectively with the people who work with my child and family. | | | | | | | | | Edit | |
| Be able to evaluate how much progress my child is making. | | | | | | | | | Edit | |
| Know about my child's and family's rights concerning Early Intervention services. | | | | | | | | | Edit | |
| Get the services that my child and family need. | | | | | | | | | Edit | |
| Feel that I can get the services and supports that my child and family need. | | | | | | | | | Edit | |
| Know where to go for support to meet my child's needs. | | | | | | | | | Edit | |
| Know where to go for support to meet my family's needs. | | | | | | | | | Edit | |
| Understand my child's special needs. | | | | | | | | | Edit | |
| Feel more confident in my skills as a parent. | | | | | | | | | Edit | |
| Feel that my efforts are helping my child. | | | | | | | | | Edit | |
| Be more effective in managing my child's behavior. | | | | | | | | | Edit | |
| Make changes in family routines that will benefit my child with special needs. | | | | | | | | | Edit | |
| Do things with and for my child that are good for my child's development. | | | | | | | | | Edit | |
| Do activities that are good for my child even in times of stress. | | | | | | | | | Edit | |
| Improve my family's quality of life. | | | | | | | | | Edit | |
| Keep up friendships for my child and family. | | | | | | | | | Edit | |
| Feel that my child will be accepted and welcomed in the community. | | | | | | | | | Edit | |
| Feel that my family will be accepted and welcomed in the community. | | | | | | | | | Edit | |
| Know about services in the community. | | | | | | | | | Edit | |
| Participate in typical activities for children and families in my community. | | | | | | | | | Edit | |
| Think back on your child and family's time in the Early Intervention Program. If your child received Telehealth services, they worked well. Telehealth services mean your child received services through a computer, tablet, or smartphone. | | | | | | | | | Edit | |
| Think back on your child and family's time in the Early Intervention Program. Telehealth services may not have been available to your child and family. If they were available, would you have used them? Telehealth services mean your child received services through a computer, tablet, or smartphone. | | | | | | | | | Edit | |
| Showing 1 to 24 of 24 entries | | | | | | | | Prev | 1 | Next |

| THIS COLUMN DISPLAYS THE QUESTION | THIS COLUMN DISPLAYS THE RESPONSE |
|---|-----------------------------------|
| Understand how the Early Intervention system works. | |
| Understand the roles of the people who work with my child and family. | |
| Communicate more effectively with the people who work with my child and family. | |
| Be able to evaluate how much progress my child is making. | |

| THIS COLUMN DISPLAYS THE QUESTION | THIS COLUMN DISPLAYS THE RESPONSE |
|---|--|
| Know about my child's and family's rights concerning Early Intervention services. | |
| Get the services that my child and family need. | |
| Feel that I can get the services and supports that my child and family need. | |
| Know where to go for support to meet my child's needs. | |
| Know where to go for support to meet my family's needs. | |
| Understand my child's special needs. | |
| Feel more confident in my skills as a parent. | |
| Feel that my efforts are helping my child. | |
| Be more effective in managing my child's behavior. | |
| Make changes in family routines that will benefit my child with special needs. | |
| Do things with and for my child that are good for my child's development. | |
| Do activities that are good for my child even in times of stress. | |
| Improve my family's quality of life. | |
| Keep up friendships for my child and family. | |
| Feel that my child will be accepted and welcomed in the community. | |
| Feel that my family will be accepted and welcomed in the community. | |
| Know about services in the community. | |

| THIS COLUMN DISPLAYS THE QUESTION | THIS COLUMN DISPLAYS THE RESPONSE |
|--|-----------------------------------|
| Participate in typical activities for children and families in my community. | |
| Think back on your child and family's time in the Early Intervention Program. If your child received Telehealth services, they worked well. Telehealth services mean your child received services through a computer, tablet, or smartphone. | |
| Think back on your child and family's time in the Early Intervention Program. Telehealth services may not have been available to your child and family. If they were available, would you have used them? Telehealth services mean your child received services through a computer, tablet, or smartphone. | |

| BUTTON | DESCRIPTION |
|--|--|
| Edit Edit | To view or edit a questionnaire response, click this button adjacent to the appropriate row. When clicked, the "Edit Family Outcome Survey" popup panel appears (shown below). |

8.1.6.1.1 Edit Family Outcome Survey Popup Panel

Edit Family Outcome Survey

Understand how the Early Intervention system works.

*Questionnaire Responses

i An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|--------------------------|---|
| *Questionnaire Responses | <p>Use this drop-down and select the appropriate response for the question you're editing from the list (example below).</p> <p><input type="button" value="*Questionnaire Responses"/> <input type="button" value="-- Select --"/></p> <ul style="list-style-type: none"> -- Select -- Very Strongly Disagree Strongly Disagree Disagree Agree Agree Strongly Very Strongly Agree |

| BUTTON | DESCRIPTION |
|--|---|
| Submit <input type="button" value="Submit"/> | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the Family Outcome Survey panel. |
| Cancel <input type="button" value="Cancel"/> | To cancel your entry, click this button. The system does not save the information entered in the "Edit Family Outcome Survey" popup panel, which closes. |

8.1.6.2 COSF Grid/Table

 This grid/table captures a Child Outcomes Summary Form (COSF) at entry and, minimum, at the program's exit. The entry establishes a baseline for a child, done at the initial IFSP for children in identified sample size cohorts. It is a grid/table because providers, family members, etc., can use individual forms. Therefore, this grid can capture multiple COSF forms. Internal calculations are done behind the scene to generate federal indicator reports.

 This process is not for every child entering the EIP.

 NYC boroughs complete a COSF exit form at each IFSP after the initial IFSP.



 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the [Unit 5 User Guide](#).

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|-------------------------------------|--|
| Current Active IFSP | This column displays the child's current active IFSP. |
| Exit Date | This column displays the child's exit date. |
| Initial Service Date | This column displays the child's first service date. |
| Last Service Date | This column displays the child's last service date. |
| Did not receive 6-months of service | If applicable, this column displays if the child did not receive six (6) months of the services. |

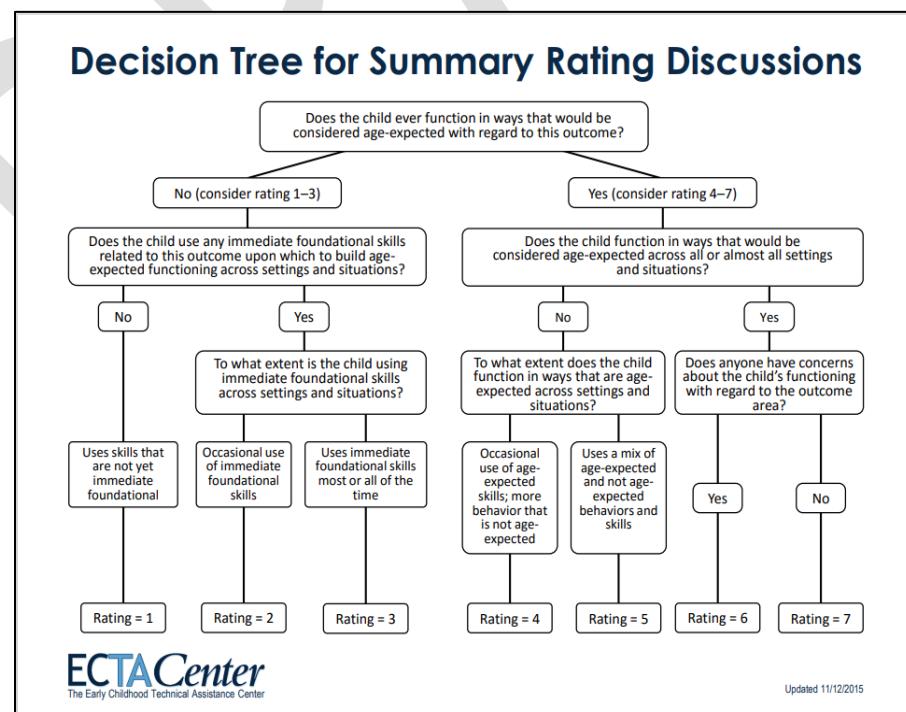
| BUTTON | DESCRIPTION |
|--|--|
| Add  | Click this button to add a Child Outcomes Summary Form (COSF) record in the EI-Hub database for the child. When clicked, the COSF tab/panel appears (shown below). |

8.1.6.2.1 COSF Tab/Panel

-  **Positive Social-Emotional Skills (including social relationships)** refer to relating to others, for example, using words or small sentences or playing with other children.
-  **Acquiring and using knowledge and skills (including early language/communication)** refers to thinking, remembering, problem-solving, and understanding the world. For example, recognizing familiar faces or pictures, knowing the names of objects, or reacting to sights and sounds.
-  **Appropriate behavior to meet needs (taking appropriate action to meet requirements)** refers to taking care of and communicating basic needs. For example, helping with feeding, toilet training, or using words or small sentences.

 Decision Tree: <http://ectacenter.org/eco/assets/pdfs/Decision Tree.pdf> (see below)

 A child must have an Active IFSP to populate and submit a COSF.





In this example below, a child must have an Active IFSP to populate and submit a COSF.

The screenshot shows a software interface for submitting a Child Out-of-School Form (COSF). At the top, there's a navigation bar with 'COSF' and a back arrow. Below it is a search bar with 'COSF'. A red error message box contains the text: 'This child does not have an Initial IFSP and the COSF cannot be submitted at this time.' The main form area has several fields: 'Current Initial or Active IFSP' (disabled), 'Exit Date' (text input), 'Initial Service Date' (text input), 'Last Service Date' (text input), 'COSF Submitted by:' (text input with value 'nyeisuat_pm007'), 'Role:' (text input with value 'Superuser'), and a dropdown menu for '*COSF Type' with the option '... Select ...'. A blue 'Submit' button is located at the bottom right.



An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD / CHECKBOX | DESCRIPTION |
|----------------------|--|
| Current Active IFSP | <input checked="" type="checkbox"/> This field is read-only and is prepopulated by the system if the child has an active IFSP. |
| Exit Date | Manually enter the end date or use the calendar picker (invoked by clicking this field) for the child's individualized Family Service Plan (IFSP). |
| Initial Service Date | Enter the initial service date manually or use the calendar picker (invoked by clicking this field). |
| Last Service Date | Enter the last service date manually or use the calendar picker (invoked by clicking this field). |
| COSF Submitted by: | This field is pre-populated by the user logged in to the EI-Hub; this field is also editable. |
| Role | This field is pre-populated by the user role in the EI-Hub; this field is also editable. |

| FIELD / CHECKBOX | DESCRIPTION |
|-------------------|---|
| <p>*COSF Type</p> | <p>i When first accessing this panel, all the sections appear, as shown above.</p> <p>Use this drop-down and select the appropriate COSF type for the child from the list.</p> <ul style="list-style-type: none"> • If you select 'Entry.' The following section appears: <div style="border: 1px solid black; padding: 5px;"> <p>*COSF Type</p> <p>Entry </p> <p>COSF Entry Section</p> <p>*COSF Entry Completion Date 08/09/2022</p> <p>1. To what extent does this child show POSITIVE SOCIAL EMOTIONAL SKILLS (including relationships) Appropriate for his or her age and across a variety of settings and situations? ... Select ...</p> <p>2. To what extent does this child ACQUIRE AND USE KNOWLEDGE AND SKILLS appropriate for his or her age and across a variety of settings and situations? ... Select ...</p> <p>3. To what extent does this child TAKE APPROPRIATE ACTION TO MEET NEEDS appropriate for his or her age and across a variety of settings and situations? ... Select ...</p> </div> <ul style="list-style-type: none"> • If you select 'Exit.' The following section appears: <div style="border: 1px solid black; padding: 5px;"> <p>*COSF Type</p> <p>Exit </p> <p>COSF Exit Section</p> <p>*COSF Exit Completion Date 08/09/2022</p> <p>1. To what extent does this child show POSITIVE SOCIAL EMOTIONAL SKILLS (including relationships) Appropriate for his or her age and across a variety of settings and situations? ... Select ...</p> <p>1. Has the child shown ANY new skills or behaviors related to POSITIVE SOCIAL EMOTIONAL SKILLS (including relationships) since the ENTRY outcomes form was completed? ... Select ...</p> <p>2. To what extent does this child ACQUIRE AND USE KNOWLEDGE AND SKILLS appropriate for his or her age and across a variety of settings and situations? ... Select ...</p> <p>2. Has the child shown ANY new skills or behaviors related to ACQUIRING AND USING KNOWLEDGE AND SKILLS since the ENTRY outcomes form was completed? ... Select ...</p> <p>3. To what extent does this child TAKE APPROPRIATE ACTION TO MEET NEEDS appropriate for his or her age and across a variety of settings and situations? ... Select ...</p> <p>3. Has the child shown ANY new skills or behaviors related to TAKES APPROPRIATE ACTION TO MEET NEEDS since the ENTRY outcomes form was completed? ... Select ...</p> <p>Questions 1, 2, and 3 were not completed due to ... Select ...</p> </div> |

8.1.6.2.1.1 COSF Entry Section

| FIELD | DESCRIPTION |
|--|--|
| *COSF Entry Completion Date | Manually enter the COSF entry completion date or use the calendar picker (invoked by clicking this field) for the child.  The system defaults to the current date listed on your PC. |
| 1. To what extent does this child show POSITIVE SOCIAL EMOTIONAL SKILLS (including relationships) Appropriate for his or her age and across a variety of settings and situations? | Use this drop-down and select the appropriate number rating (1-7) for the child's positive social-emotional skills. |
| 2. To what extent does this child ACQUIRE AND USE KNOWLEDGE AND SKILLS appropriate for his or her age and across a variety of settings and situations? | Use this drop-down and select the appropriate number rating (1-7) for the child's acquisition and use of knowledge and skills. |
| 3. To what extent does this child TAKE APPROPRIATE ACTION TO MEET NEEDS appropriate for his or her age and across a variety of settings and situations? | Use this drop-down and select the appropriate number rating (1-7) for the child to take appropriate action to meet needs. |

COSF Exit Section

| FIELD | DESCRIPTION |
|--|---|
| *COSF Exit Completion Date | <p>Enter the COSF exit completion date manually or use the child's calendar picker (invoked by clicking this field).</p> <p>(i) The system defaults to the current date listed on your PC.</p> |
| 1. To what extent does this child show POSITIVE SOCIAL EMOTIONAL SKILLS (including relationships) Appropriate for his or her age and across a variety of settings and situations? | <p>Use this drop-down and select the appropriate number rating (1-7) for the child's positive social-emotional skills.</p> |
| 1. Has the child shown ANY new skills or behaviors related to POSITIVE SOCIAL EMOTIONAL SKILLS (including relationships) since the ENTRY outcomes form was completed? | <p>Use this drop-down and select the appropriate response ('Yes' or 'No').</p> <p>(i) If you select/click 'Yes', a textbox appears (shown below). Briefly describe the child's progress, including new skills, behaviors, and/or functional abilities.</p> <div style="border: 1px solid black; padding: 5px;"> <p>Yes</p> <p>If Yes, briefly describe progress made, including new skills, behaviors, and/or functional abilities.</p> </div> |
| 2. To what extent does this child ACQUIRE AND USE KNOWLEDGE AND SKILLS appropriate for his or her age and across a variety of settings and situations? | <p>Use this drop-down and select the appropriate number rating (1-7) for the child's acquisition and use of knowledge and skills.</p> |
| 2. Has the child shown ANY new skills or behaviors related to ACQUIRING AND USING KNOWLEDGE AND SKILLS since the ENTRY outcomes form was completed? | <p>Use this drop-down and select the appropriate response ('Yes' or 'No').</p> |

| FIELD | DESCRIPTION |
|---|---|
| | <p>(i) If you select/click 'Yes,' a textbox appears (shown below). Briefly describe the child's progress, including new skills, behaviors, and/or functional abilities.</p> <div style="border: 1px solid black; padding: 5px;"> <p>Yes</p> <p>If Yes, briefly describe progress made, including new skills, behaviors, and/or functional abilities.</p> </div> |
| 3. To what extent does this child TAKE APPROPRIATE ACTION TO MEET NEEDS appropriate for his or her age and across a variety of settings and situations? | <p>Use this drop-down and select the appropriate number rating (1-7) for the child to take appropriate action to meet needs.</p> |
| 3. Has the child shown ANY new skills or behaviors related to TAKES APPROPRIATE ACTION TO MEET NEEDS since the ENTRY outcomes form was completed? | <p>Use this drop-down and select the appropriate response ('Yes' or 'No').</p> <p>(i) If you select/click 'Yes,' a textbox appears (shown below). Briefly describe the child's progress, including new skills, behaviors, and/or functional abilities.</p> <div style="border: 1px solid black; padding: 5px;"> <p>Yes</p> <p>If Yes, briefly describe progress made, including new skills, behaviors, and/or functional abilities.</p> </div> |
| Questions 1, 2, and 3 were not completed due to | <p>Use this drop-down and select the appropriate answer from the list.</p> <div style="border: 1px solid black; padding: 5px; background-color: #e0f2e0;"> <p>--- Select ---</p> <ul style="list-style-type: none"> Child passed away Less than 6 months of service Lost contact with family Moved out of state Parents refused EI services </div> |

| BUTTON | DESCRIPTION |
|--------|---|
| Submit | <p>To save your entry, click this button. When clicked, the system keeps the information in the EI-HUB database, and the record updates the COSF panel.</p> |

8.1.7 Transition Tab



- Documentation of the Transition process occurs in two locations within the EI Hub:
- Transition summary information is first entered on the child's IFSP under the IFSP Tab within the IFSP Transition Panel
 - Additional transition information is documented under the Transition tab within the Transition Plan Panel.

The Transition Plan allows the service coordinator to track and document each step of the child's transition, whether the child transitions into the Part-B program or a non-Part-B program.

This section focuses on the Transition Tab and categories featured on the navigational tab. The tab and panels outline the entire transition process.

Before moving into any other panels, you must complete the Transition Plan panel. Note the checkbox where transition planning begins, which, once checked, creates the start of the record. Since The topic of transition should be introduced to families at their first meeting with their Initial Service Coordinator and consistently documented in the child's IFSP, you should check this block after that initial conversation takes place.

8.1.7.1 Transition Plan Panel



Transition plans are developed for all children, whether transitioning to CPSE, other early childhood services and support in their community, or when they will not receive support or services from any source. The transition tab/panels in the EI-Hub record the transition process. Within the IFSP, the IFSP transition panel captures various components of the transition process, such as:

- Discussions with and education of parents regarding options for transition.
- Procedures to prepare the child and family for changes in service delivery, including steps to help the child adjust to a new setting.
- Procedures to prepare staff who may serve the child following transition, and
- Identify transition services and other activities the IFSP team determines are needed to ensure the child's smooth transition.

The screenshot shows the 'Transition Plan' panel within the EI Hub. The top navigation bar includes tabs for Child at a Glance, Child Info, Family Info, Ins Info, Teams, Eval Info, Eligibility, IFSP, Services, Child/Family Outcomes, Transition, Transfer, Exit, & Close, and Document. On the left, a sidebar lists various transition-related documents: Transition Plan, Eligibility And Transition Dates, Part B Eligibility, Transition Conference Notification, Transition Plan Members, EI Services Ending Details & Needed Post Transition Services, Written Notification and OptOut, Consent for Referral to CPSE, Consent for Transmittal of EIP Evaluations and Records, Consent to Convene a Transition Conference, Part B Program - Form A Part 1b, Transition Plan Part B Program Family Outcomes Form A, Transition Plan Non-Part B Program Form B Part 1b, and Non-Part B Program - Family Outcomes Worksheet - Form B. The main content area contains a 'Name of Child' input field with 'Walnut Tree' typed in, and a 'Submit' button at the bottom right.

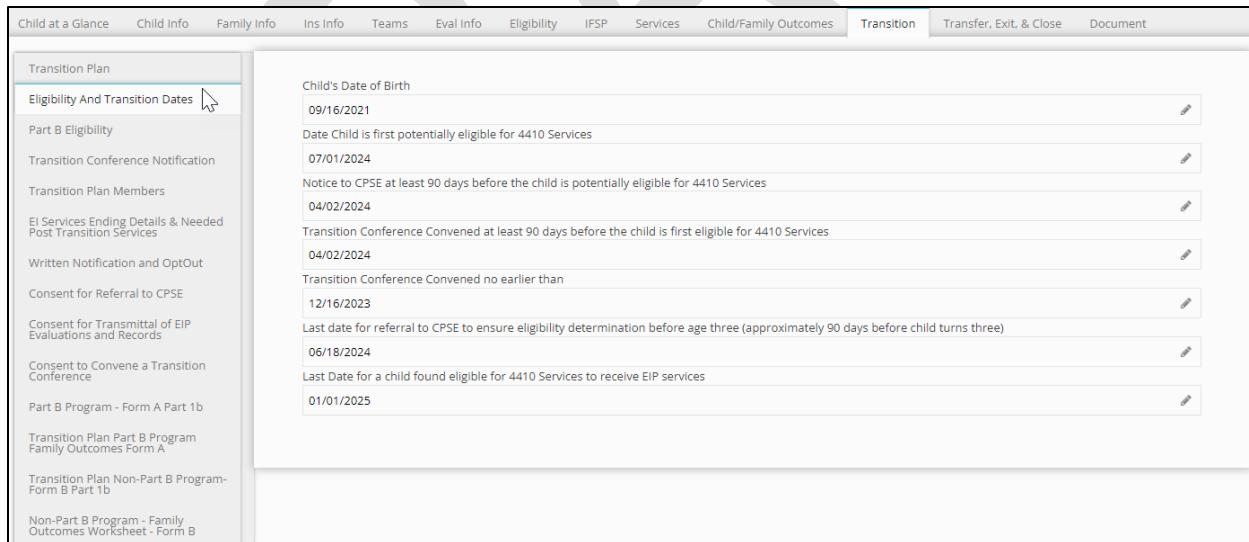
| FIELD / CHECKBOX | DESCRIPTION |
|------------------|--|
| Name of Child | This field (read-only) displays the child's full name. |

| BUTTON | DESCRIPTION |
|---|---|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-HUB database, and the record updates. |

8.1.7.2 Eligibility And Transition Dates Panel

 This panel (read-only) calculates all actual transition activity due dates based on the 'EIP to 4410 Calculator.' This information is already built into the EI-Hub and calculated off the child's DOB.

 Referring a child after the '90-day' timeline for making a notification to the Committee on Preschool Special Education (CPSE) and convening a transition conference, but before 45 days and the child's 3rd birthday, the Early Intervention Program (EIP) can still accept the referral. Still, with parental consent, the child should be immediately referred to CPSE if considered eligible.



The screenshot shows the 'Transition Plan' section of the EI-Hub. The 'Eligibility And Transition Dates' tab is active. On the left, a sidebar lists various documents and forms such as 'Child at a Glance', 'Child Info', 'Family Info', etc. The main area displays the following data:

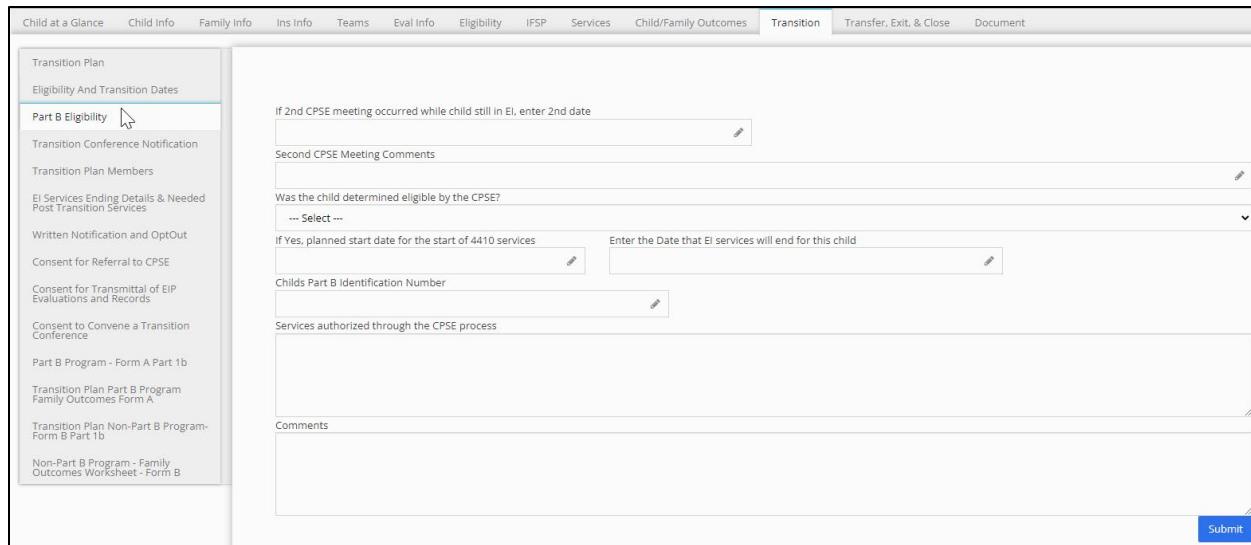
- Child's Date of Birth: 09/16/2021
- Date Child is first potentially eligible for 4410 Services: 07/01/2024
- Notice to CPSE at least 90 days before the child is potentially eligible for 4410 Services: 04/02/2024
- Transition Conference Convened at least 90 days before the child is first eligible for 4410 Services: 04/02/2024
- Transition Conference Convened no earlier than: 12/16/2023
- Last date for referral to CPSE to ensure eligibility determination before age three (approximately 90 days before child turns three): 06/18/2024
- Last Date for a child found eligible for 4410 Services to receive EIP services: 01/01/2025

| FIELD | DESCRIPTION |
|-----------------------|--|
| Child's Date of Birth | ⓘ This field (read-only) displays the child's date of birth. |

| FIELD | DESCRIPTION |
|---|---|
| Date Child is first potentially eligible for 4410 Services | ⌚ This field (read-only) displays the date when the child is first potentially eligible for 4410 Services. |
| Notice to CPSE at least 90 days before the child is eligible for 4410 Services | ⌚ This field (read-only) displays the notice to Committee on Preschool Special Education (CPSE) at least 90 days before the child is eligible for 4410 Services. |
| Transition Conference Convened at least 90 days before the child is first eligible for 4410 Services | ⌚ This field (read-only) displays the transition convene the transition conference at least 90 days before the child's eligibility for services under NYS Education Law, or no fewer than 90 days before the child's third birthday, whichever is first [10 NYCRR 69-4.20(b)(4)]. |
| Transition Conference Convened no earlier than | ⌚ This field (read-only) displays the requirement that the transition conference shall not be held more than nine months before the child's third birthday. |
| Last date for referral to CPSE to ensure eligibility determination before age three (approximately 90 days before the child turns three) | ⌚ This field (read-only) displays the last date for referral to CPSE to ensure eligibility determination before age three (approximately 90 days before the child turns three). |
| Last Date for a child found eligible for 4410 Services to receive EIP services | ⌚ This field (read-only) displays the last date for a child found eligible for 4410 Services to receive EIP services. |

8.1.7.3 Part B Eligibility Panel

 Use this panel to record information about the child's part 'B eligibility' – called 4410 services. This section captures information regarding if eligibility was determined by an Initial CPSE meeting, if a 2nd CPSE meeting was deemed necessary, and the results of the CPSE meetings regarding the child's eligibility for Part B (3-5) system.



The screenshot shows the 'Part B Eligibility' section of the application. On the left is a sidebar with links to other transition-related forms. The main area contains several input fields:

- 'If 2nd CPSE meeting occurred while child still in EI, enter 2nd date'
- 'Second CPSE Meeting Comments'
- 'Was the child determined eligible by the CPSE? ... Select ...'
- 'If Yes, planned start date for the start of 4410 services' (with a calendar icon)
- 'Enter the Date that EI services will end for this child'
- 'Childs Part B Identification Number'
- 'Services authorized through the CPSE process'
- 'Comments'

A blue 'Submit' button is located at the bottom right.

 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

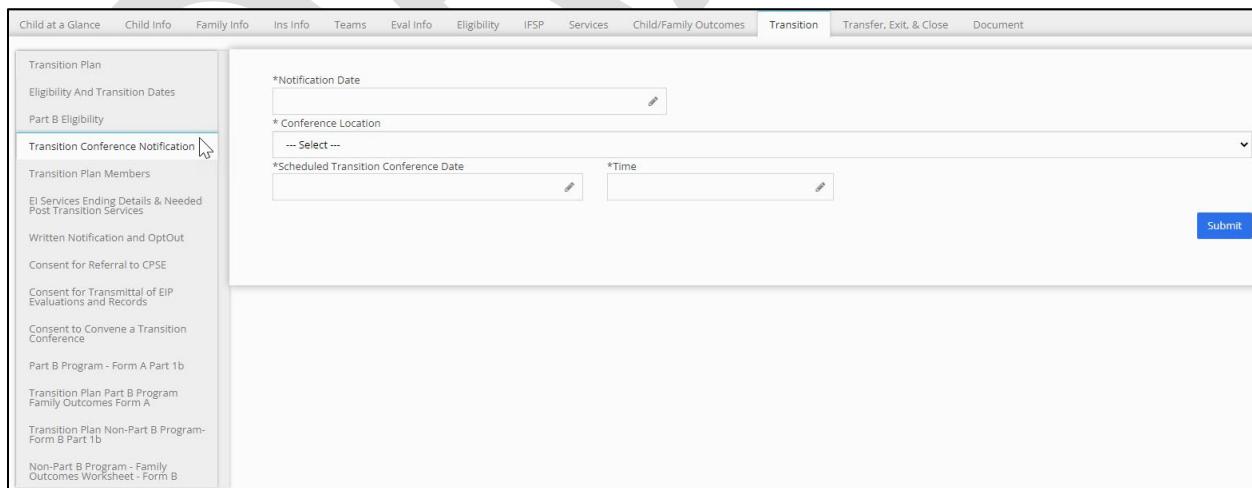
| FIELD / CHECKBOX | DESCRIPTION |
|--|--|
| If 2nd CPSE meeting occurred while child still in EI, enter 2nd date | Enter the second CPSE meeting date manually or use the calendar picker (invoked by clicking this field). |
| Second CPSE Meeting Comments | If applicable, enter a brief comment about the second CPSE meeting in the text field. |
| Was the child determined eligible by the CPSE? | Use this drop-down and select the appropriate answer ('Yes' or 'No'). |
| If Yes, planned start date for the start of 4410 services | Enter the plan start date manually or use the calendar picker (invoked by clicking this field) if applicable.  No date entered this field if the child was determined to be ineligible for the Part B program. |

| FIELD / CHECKBOX | DESCRIPTION |
|--|---|
| Enter the Date that EI services will end for this child | If applicable, enter the EI services end date manually or use the calendar picker (invoked by clicking this field). |
| Childs Part B Identification Number | If the child's Part B number is known, enter it; otherwise, leave this field blank. |
| Services authorized through the CPSE process | Use this textbox and provide any applicable services authorized through the CPSE process for the child. |
| Comments | Enter any additional comments that may pertain to the child's Part B Eligibility. |

| BUTTON | DESCRIPTION |
|--|--|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-HUB database, and the record updates the 'Part B Eligibility' panel. |

8.1.7.4 Transition Conference Notification Panel

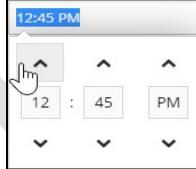
 Comparable to the IFSP meeting panel, use this panel to note the date for the invite for Transition Conference to the CPSE chairperson/designee and/or other identified participants that a Transition Conference has been scheduled.



The screenshot shows a software application window titled 'Transition Conference Notification Panel'. On the left, there is a vertical sidebar with a tree view of different sections: Child at a Glance, Child Info, Family Info, Ins Info, Teams, Eval Info, Eligibility, IFSP, Services, Child/Family Outcomes, Transition, Transfer, Exit, & Close, and Document. The 'Transition' section is currently active. In the main content area, there are several input fields: a text input for 'Notification Date', a dropdown menu for 'Conference Location' with an option '... Select ...', a text input for 'Scheduled Transition Conference Date', and a text input for 'Time'. At the bottom right of the main area is a blue 'Submit' button.



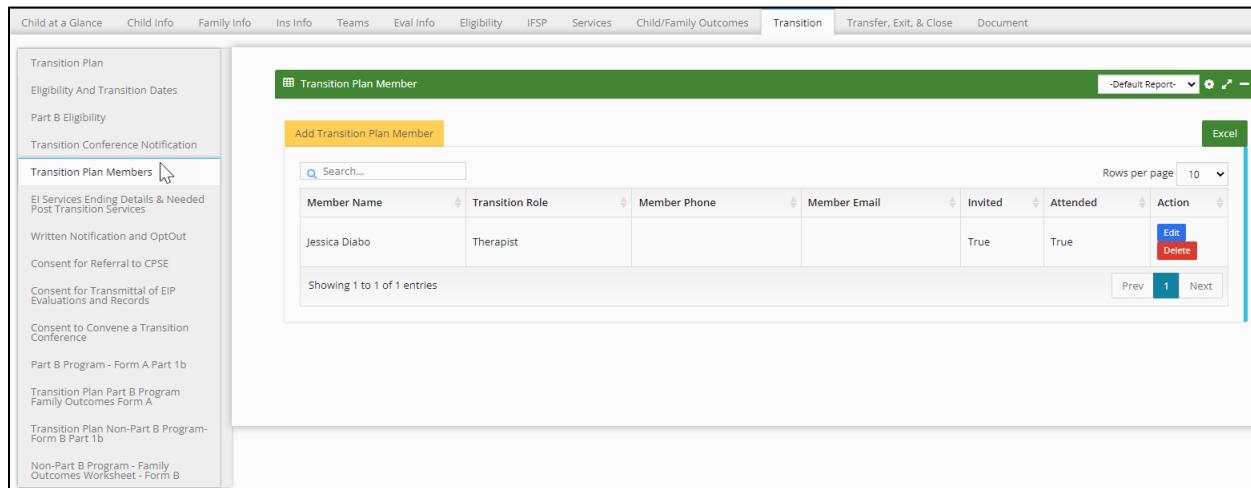
An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|---------------------------------------|---|
| *Notification Date | Manually enter the notification date or use the calendar picker (invoked by clicking this field) to display the date that a '3-5 Transition Conference' has been requested. |
| *Conference Location | Use this drop-down and select the appropriate meeting location from the list. |
| *Scheduled Transition Conference Date | Enter the scheduled transition meeting date manually or use the calendar picker (invoked by clicking this field). |
| *Time | Manually enter the meeting time or use the time picker (invoked by clicking this field, shown below).  (i) Clicking this field, the system automatically defaults to your PC's current time. |

| BUTTON | DESCRIPTION |
|---|--|
| Submit  | To save your entry, click this button bar. When clicked, the system keeps the information in the EI-HUB database, and the record updates the 'Transition Conference Notification' panel. |
| Generate Transition Conference Notification  | To generate a conference notification, click this button. When clicked, the system keeps the information in the EI-HUB database, and the record updates. (i) Your EI-Hub Case Management Administrator must configure the Custom PDF setup for the panel Transition Conference Notification beforehand. (⚠) This functionality will not be available until post-go-live. |

8.1.7.5 Transition Plan Members Grid/Table

 Comparable to the IFSP team panel, the Transition grid/table reflects the participants of the child's transition conference.



| Member Name | Transition Role | Member Phone | Member Email | Invited | Attended | Action |
|---------------|-----------------|--------------|--------------|---------|----------|---|
| Jessica Diabo | Therapist | | | True | True | Edit Delete |

 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

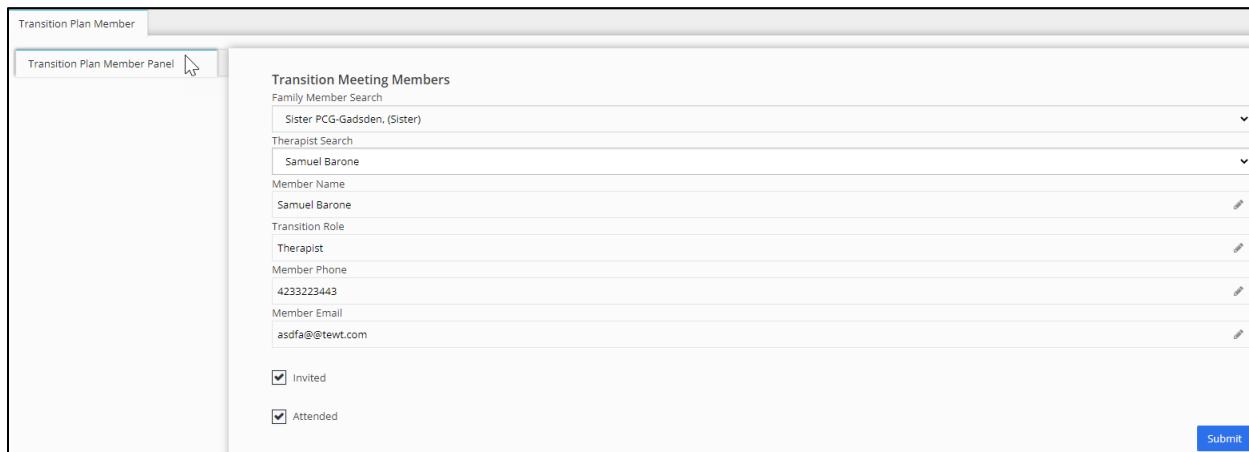
| BUTTON | DESCRIPTION |
|---|---|
|  Excel | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet.</p> <p>To see your results in excel, click Open.</p> <p> Leaving all the Report Filters fields blank will show "all" results.</p> <p> The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system.</p> |

| COLUMN | DESCRIPTION |
|------------------------|---|
| Member Name | This column displays the member's name. |
| Transition Role | This column displays the member's transition role. |
| Member Phone | This column displays the member's phone number. |
| Member Email | This column displays the member's email address. |
| Invited | <p>This column displays a member invited.</p> <ul style="list-style-type: none"> • True: A member was invited • False: A member was not invited |
| Attended | <p>This column displays if the member attended.</p> <ul style="list-style-type: none"> • True: A member attended • False: A member did not attend |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

| BUTTON | DESCRIPTION |
|--|--|
| Add Transition Plan Member  | To add a transition plan member, click this button. The Transition Plan Member Tab/Transition Plan Member Panel appears (see below). |
| Edit   For all panel fields/descriptions and buttons, please refer to the Transition Plan Member Tab/Transition Plan Member Panel (see below). | Click this button to view or edit an "transition plan member" record for the child. The Service Info tab with the associated panels and the IFSP Service Link tab appears when clicked. |
| Delete  | <p>To delete an existing transition plan member, click this button adjacent to the appropriate record/row. When clicked, the system prompts a confirmation message pad popup (shown below); click the Delete button to proceed or click the Cancel button to retract.</p> <div style="border: 1px solid #ccc; padding: 10px; margin-top: 10px;"> <p>Confirm Transition Plan Member Deletion X</p> <p>This action cannot be reversed. Are you sure you want to continue?</p> <div style="text-align: right; margin-top: 10px;"> Delete Cancel </div> </div> |

8.1.7.5.1 Transition Plan Member Tab/Transition Plan Member Panel

 You can use this panel to select from existing people (e.g., family, friends, therapists, etc.) listed within the child's record and add additional people.



| FIELD | DESCRIPTION |
|-----------------------------|--|
| Family Member Search | Use this drop-down and select the appropriate family member from the list. |
| Therapist Search | Use this drop-down and select the appropriate therapist from the list. |
| Member Name | This read-only field populates the member's name.  When selecting/clicking the 'Edit' button adjacent to an existing record listed in the 'Transition Plan Members Grid/Table,' this field is editable in this panel. |
| Transition Role | This read-only field populates the role (if applicable).  When selecting/clicking the 'Edit' button adjacent to an existing record listed in the 'Transition Plan Members Grid/Table,' this field is editable in this panel. |
| Member Phone | This read-only field populates the phone number (if applicable).  When selecting/clicking the 'Edit' button adjacent to an existing record listed in the 'Transition Plan Members Grid/Table,' this field is editable in this panel. |
| Member Email | Enter the member's email address (if applicable). |

| FIELD | DESCRIPTION |
|-----------------------------------|--|
| | (i) When selecting/clicking the 'Edit' button adjacent to an existing record listed in the 'Transition Plan Members Grid/Table,' this field is editable in this panel. |
| <input type="checkbox"/> Invited | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| <input type="checkbox"/> Attended | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. (i) To accurately reflect attendance at the transition conference, you can add members at the meeting that were not invited initially and indicate those who attended. |

| BUTTON | DESCRIPTION |
|--|---|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-HUB database, and the record updates the 'Transition Plan Members' panel. |

8.1.7.6 EI Services Ending Details & Needed Post Transaction Services Panel

 This panel can be completed for all children leaving the EIP and reflect on services they may receive after their time in the program.

Due to the size of this panel, it's shown in sections.

 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

 When selecting/ticking a checkbox for a specific service or resource, you must complete the two other fields beneath the selected checkbox to save the information.

 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| CHECKBOX / FIELD | DESCRIPTION |
|--|---|
| *Last Date for EI Services | Enter the last date for Early Intervention Services manually or use the calendar picker (invoked by clicking this field). |
| *Date Parent informed of Last Date for EI Services | Enter the date the child's parent informed of the last date for Early Intervention Services manually or use the calendar picker (invoked by clicking this field). |
| <input type="checkbox"/> Transition Plan discussed with parent | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |

| CHECKBOX / FIELD | DESCRIPTION |
|---|--|
| If yes, date discussed | Enter the date discussed manually or use the calendar picker (invoked by clicking this field). |
| Post-Transition Programs & Support Services Decision | Use this drop-down field and select the appropriate program/support item from the list. When populating this field, it enables the remaining checkboxes and fields below. |
| <input type="checkbox"/> Head Start | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Referral made by EIP? | Use this drop-down field and select the appropriate response ('Yes' or 'No'). |
| Family provided information on how to make referral? | Use this drop-down field and select the appropriate response ('Yes' or 'No'). |
| <input type="checkbox"/> Typically Developing Preschool Program | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Referral made? | Use this drop-down field and select the appropriate response ('Yes' or 'No') from the list. |
| Family provided information on how to make referral? | Use this drop-down field and select the appropriate response ('Yes' or 'No'). |

| | |
|--|----------------------------------|
| <input type="checkbox"/> Day Care Center | Referral made? --- Select --- |
| Family provided information on how to make referral? --- Select --- | |
| <input type="checkbox"/> Service under Private Insurance | Referral made? --- Select --- |
| Family provided information on how to make referral? --- Select --- | |
| <input type="checkbox"/> Office for People with Developmental Disabilities (OPWDD) | Referral made? --- Select --- |
| Family provided information on how to make referral? --- Select --- | |
| <input type="checkbox"/> Office of Mental Health (OMH) | Referral made? --- Select --- |
| Family provided information on how to make referral? --- Select --- | |

| CHECKBOX / FIELD | DESCRIPTION |
|--|---|
| <input type="checkbox"/> Day Care Center | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Referral made? | Use this drop-down field and select the appropriate response ('Yes' or 'No'). |
| Family provided information on how to make referral? | Use this drop-down field and select the appropriate response ('Yes' or 'No'). |
| <input type="checkbox"/> Service under Private Insurance | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Referral made? | Use this drop-down field and select the appropriate response ('Yes' or 'No'). |
| Family provided information on how to make referral? | Use this drop-down field and select the appropriate response ('Yes' or 'No'). |
| <input type="checkbox"/> Office for People with Developmental Disabilities (OPWDD) | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Referral made? | Use this drop-down field and select the appropriate response ('Yes' or 'No'). |

| CHECKBOX / FIELD | DESCRIPTION |
|---|---|
| Family provided information on how to make referral? | Use this drop-down field and select the appropriate response ('Yes' or 'No'). |
| <input type="checkbox"/> Office of Mental Health (OMH) | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Referral made? | Use this drop-down field and select the appropriate response ('Yes' or 'No'). |
| Family provided information on how to make referral? | Use this drop-down field and select the appropriate response ('Yes' or 'No'). |

| |
|---|
| <input type="checkbox"/> Children with Special Health Care Needs (CSHCN) Referral made? --- Select --- |
| Family provided information on how to make referral? --- Select --- |
| <input type="checkbox"/> Physically Handicapped Children's Program (PHCP) Referral made? --- Select --- |
| Family provided information on how to make referral? --- Select --- |
| <input type="checkbox"/> Private Child Care / Home Day Care Referral made? --- Select --- |
| Family provided information on how to make referral? --- Select --- |
| <input type="checkbox"/> EI At-Risk / Child Find Tracking Referral made? --- Select --- |
| Family provided information on how to make referral? --- Select --- |

| CHECKBOX / FIELD | DESCRIPTION |
|---|---|
| <input type="checkbox"/> Children with Special Health Care Needs (CSHCN) | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Referral made? | Use this drop-down field and select the appropriate response ('Yes' or 'No'). |

| CHECKBOX / FIELD | DESCRIPTION |
|--|---|
| Family provided information on how to make referral? | Use this drop-down field and select the appropriate response ('Yes' or 'No'). |
| <input type="checkbox"/> Physically Handicapped Children's Program (PHCP) | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Referral made? | Use this drop-down field and select the appropriate response ('Yes' or 'No'). |
| Family provided information on how to make referral? | Use this drop-down field and select the appropriate response ('Yes' or 'No'). |
| <input type="checkbox"/> Private Child Care / Home Day Care | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Referral made? | Use this drop-down field and select the appropriate response ('Yes' or 'No'). |
| Family provided information on how to make referral? | Use this drop-down field and select the appropriate response ('Yes' or 'No'). |
| <input type="checkbox"/> EI At-Risk / Child Find Tracking | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Referral made? | Use this drop-down field and select the appropriate response ('Yes' or 'No'). |
| Family provided information on how to make referral? | Use this drop-down field and select the appropriate response ('Yes' or 'No'). |

| | |
|--|---|
| <input type="checkbox"/> NYS Commission for the Blind and Visually Impaired | |
| Referral made? | <input type="button" value="... Select ..."/> |
| Family provided information on how to make referral? | <input type="button" value="... Select ..."/> |
| | |
| <input type="checkbox"/> Referral back to EIP if child is under age 3 | |
| Referral made? | <input type="button" value="... Select ..."/> |
| Family provided information on how to make referral? | <input type="button" value="... Select ..."/> |
| | |
| <input type="checkbox"/> Other (Manually Enter Below) | |
| Name of Early Childhood Programs and Support Services not Listed (1000 characters limit) | |
| | |
| Comments (1000 characters limit) | |
| | |
| <input type="button" value="Submit"/> | |

| CHECKBOX / FIELD | DESCRIPTION |
|--|---|
| <input type="checkbox"/> NYS Commission for the Blind and Visually Impaired | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Referral made? | Use this drop-down field and select the appropriate response ('Yes' or 'No'). |
| Family provided information on how to make referral? | Use this drop-down field and select the appropriate response ('Yes' or 'No'). |
| <input type="checkbox"/> Referral back to EIP if child is under age 3 | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Referral made? | Use this drop-down field and select the appropriate response ('Yes' or 'No') from the list. |
| Family provided information on how to make referral? | Use this drop-down field and select the appropriate response ('Yes' or 'No'). |
| <input type="checkbox"/> Other (Manually Enter Below) | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Name of Early Childhood Programs and Support Services not Listed (1000 characters limit) | Enter the name of Early Childhood Programs and Support Services not Listed (1000 characters limit). |

| CHECKBOX / FIELD | DESCRIPTION |
|--|---|
| Comments (1000-character limit) | Enter any additional comments (1000-character limit). |

| BUTTON | DESCRIPTION |
|--|--|
| Submit <input type="button" value="Submit"/> | To save your entry, click this button. When clicked, the system keeps the information in the EI-HUB database, and the record updates the 'EI Services Ending Details & Needed Post Transition Services' panel. |

8.1.7.7 Written Notification and OptOut Panel

☞ Use this panel to capture written notification consents required for the transition process. You may also upload paper copies of consent through this panel.

(i) Many reports run off consent dates, making this an essential panel for reporting purposes.

(i) An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| CHECKBOX / FIELD | DESCRIPTION |
|--|---|
| <input type="checkbox"/> Parent/Guardian chooses to waive the 30-calendar day opt-out period | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |

| CHECKBOX / FIELD | DESCRIPTION |
|--|--|
| <input type="checkbox"/> Parent/Guardian understands if they don't contact the Service Coordinator within 30 days of today, notification will be sent to the CPSE of their local school district | <p>If 'Yes,' select/tick the checkbox. If 'No,' leave blank.</p> <p>*Committee on Preschool Special Education (CPSE).</p> <p>(i) Selecting/ticking this checkbox, the following fields appear on the panel.</p> <ul style="list-style-type: none"> 'Service coordinator received oral/written objection to written notification on - date.' 'No parental objection received within 30 calendar days.' <div style="border: 1px solid #ccc; padding: 10px;"> <p><input type="checkbox"/> Parent/Guardian chooses to waive the 30-calendar day opt-out period</p> <p><input checked="" type="checkbox"/> Parent/Guardian understands if they don't contact the Service Coordinator within 30 days of today, notification will be sent to the CPSE of their local school district</p> <p><input type="checkbox"/> Parent/Guardian chooses to opt out of written notification being sent to the CPSE of their local school district</p> <p>*Date of Parent's decision <input type="text" value="Date of Parent's decision"/> [edit]</p> <p>Service coordinator received oral/written objection to written notification on - date <input type="text" value="Service coordinator received oral/written objection to written notification on - date"/> [edit]</p> <p>No parental objection received within 30 calendar days <input type="text" value="No parental objection received within 30 calendar days"/> [edit]</p> </div> |
| <input type="checkbox"/> Parent/Guardian chooses to opt out of written notification being sent to the CPSE of their local school district | <p>If 'Yes,' select/tick the checkbox. If 'No,' leave blank.</p> |
| Date of Parent's decision | Enter the parent's decision date manually or use the calendar picker (invoked by clicking this field). |
| Service coordinator received oral/written objection to written notification on – date | Manually enter the date of the oral/written notification or use the calendar picker (invoked by clicking this field). |
| No parental objection received within 30 calendar days | Enter the date for no parental objection received within 30 calendar days or use the calendar picker (invoked by clicking this field). |

| BUTTON | DESCRIPTION |
|--|--|
| Upload Consents/Notifications/ Revocations  Upload Consents/Notifications/Revocations | Click this button to upload supporting documentation (Consents, Notifications, or Revocations). When clicked, the 'Upload Consents/Notifications/Revocations' popup panel appears (see below). |
| Submit  Submit | To save your entry, click this button. When clicked, the system keeps the information in the EI-HUB database, and the record updates the 'Written Notifications and OptOut' panel. |

8.1.7.7.1.1 Upload Consents/Notifications/Revocations Popup Panel

Upload Consents/Notifications/Revocations

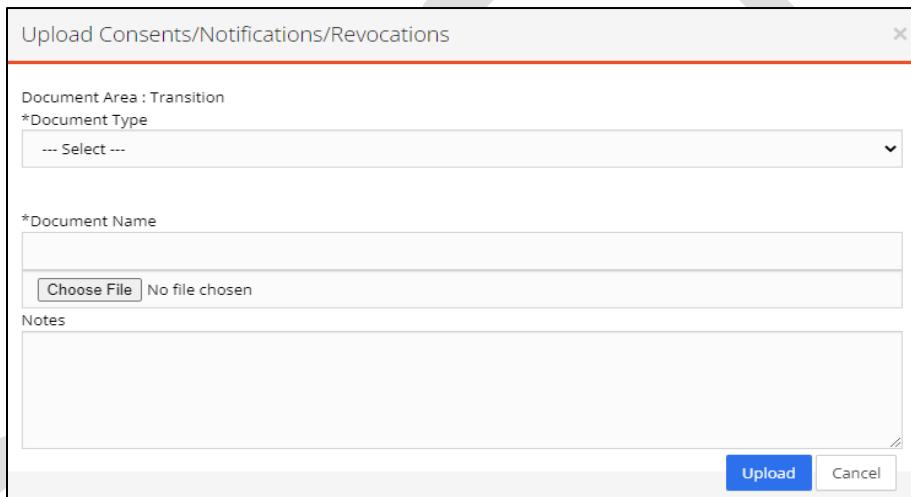
Document Area : Transition
***Document Type**
 --- Select ---

*Document Name

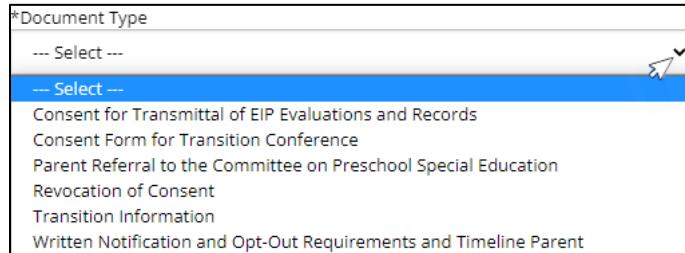
Choose File No file chosen

Notes

Upload Cancel



 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|---|---|
| Document Area: Transition *Document Type | Use this drop-down and select the appropriate document type (e.g., Parent Documents) from the list.  |

| FIELD | DESCRIPTION |
|---|--|
| *Document Name | Enter the name of the uploaded document file. |
| Choose File <input type="button" value="Choose File"/> | To upload your file into the EI-Hub database, click this button. When clicked, your PC's web browser (e.g., MS Edge) prompts an "Open" window; navigate to where your document/file resides, click on the file (highlighted), and click the Open button on the window. The name of your file name should read adjacent to the 'Choose File' button. |
| Notes | Use this textbox to enter relevant notes about your document file uploaded into the system. |

| BUTTON | DESCRIPTION |
|---|--|
| Upload <input type="button" value="Upload"/> | After populating the fields in the Upload Consents/Notifications/Revocations popup panel (mentioned above), your file uploads into the EI-Hub database when clicked. |
| Cancel <input type="button" value="Cancel"/> | To cancel the action for uploading a file, click this button. When clicked, the Upload File panel closes. |

8.1.7.8 Consent for Referral to CPSE Panel

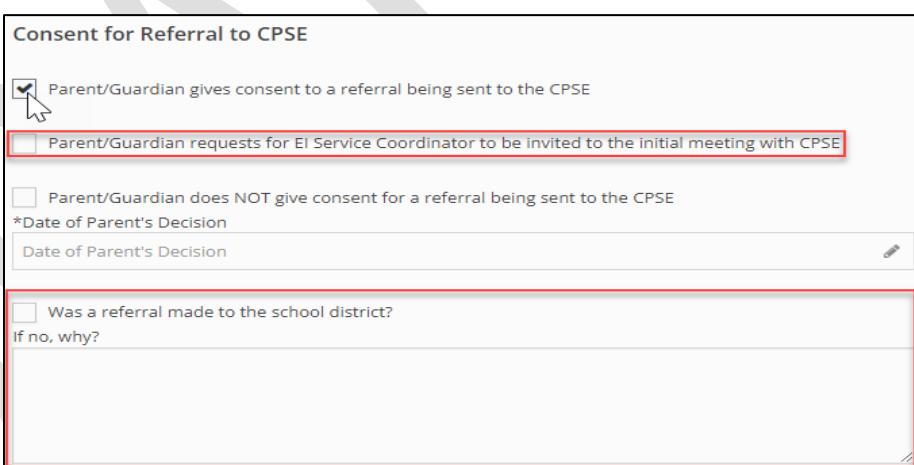
☛ Use this panel to capture the consent for Committee on Preschool Special Education (CPSE) required for the transition process. You may also upload paper copies of consent through this panel.

The screenshot shows the 'Consent for Referral to CPSE' panel within the EI-Hub software. On the left, there is a sidebar with various menu options: Child at a Glance, Child Info, Family Info, Ins Info, Teams, Eval Info, Eligibility, IFSP, Services, Child/Family Outcomes, Transition, Transfer, Exit, & Close, and Document. The 'Transition' tab is selected. The main panel has the following structure:

- Consent for Referral to CPSE**
- Parent/Guardian gives consent to a referral being sent to the CPSE
- Parent/Guardian does NOT give consent for a referral being sent to the CPSE
- *Date of Parent's Decision**
- Date of Parent's Decision** (text input field)
- If no, why?** (text area)
- Revocation of consent for Referral to CPSE
- Referral to CPSE Date of Revocation** (text input field)
- Upload Consents/Notifications/Revocations** (blue button)
- Submit** (blue button)



An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| CHECKBOX / FIELD | DESCRIPTION |
|--|---|
| <input type="checkbox"/> Parent gives consent to a referral being sent to the CPSE | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. i When selecting/ticking this checkbox, the 'Parent/Guardian requests for EI Service Coordinator to be invited to the initial meeting with CPSE' is unchecked/deselected, and the following appears: <ul style="list-style-type: none">The 'Parent/Guardian requests for EI Service Coordinator to be invited to the initial meeting with CPSE' checkboxThe 'Was a referral made to the school district?' checkbox<ul style="list-style-type: none">Below, the 'If no, why?' textbox appears (shown below)Also, the 'If no, why?' textbox below the '*Date of Parent's Decision' field no longer appears.  |
| <input type="checkbox"/> Parent/Guardian does NOT give consent for a referral being sent to the CPSE | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |

| CHECKBOX / FIELD | DESCRIPTION |
|---|---|
| | <p>(i) This checkbox is selected/ticked by default when accessing this panel. When unchecking/deselecting this checkbox, the following appears:</p> <ul style="list-style-type: none"> • The 'Parent/Guardian gives consent to a referral being sent to the CPSE' checkbox is selected/ticked • The 'If no, why?' textbox below the '*Date of Parent's Decision' field is removed • The 'Parent/Guardian requests for EI Service Coordinator to be invited to the initial meeting with CPSE' checkbox • The 'Was a referral made to the school district?' checkbox <ul style="list-style-type: none"> ◦ Below, the 'If no, why?' textbox appears (the same as shown above) |
| <input type="checkbox"/> Parent/Guardian requests for EI Service Coordinator to be invited to the initial meeting with CPSE | This checkbox appears when selecting/ticking the 'Parent/Guardian gives consent to a referral being sent to the CPSE' checkbox. If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| *Date of Parent's Decision | Enter the parent's decision date manually or use the calendar picker (invoked by clicking this field). |
| <input type="checkbox"/> Was a referral made to the school district? | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. (i) The 'Date of CPSE Referral' date field will appear when the 'Was a referral made to the school district?' is selected/ticked (shown below). |
| Date of CPSE Referral | Enter the CPSE Referral date manually or use the calendar picker (invoked by clicking this field). (i) This date field will appear when the 'Was a referral made to the school district?' above is selected/ticked (shown below). |

| |
|---|
| <input checked="" type="checkbox"/> Was a referral made to the school district? |
| Date of CPSE Referral |
| [Redacted] |

| CHECKBOX / FIELD | DESCRIPTION |
|---|---|
| If no, why? | <p>(i) This textbox appears for both the *Date of Parent's Decision and 'Was a referral made to the school district?'</p> <ul style="list-style-type: none"> • *Date of Parent's Decision: Enter why there was no parent decision. • Was a referral made to the school district? Enter why there was no referral to the school district. |
| <input type="checkbox"/> Revocation of consent for Referral to CPSE | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Referral to CPSE Date of Revocation | Enter the referral to the CPSE date manually or use the calendar picker (invoked by clicking this field). |

| BUTTON | DESCRIPTION |
|---|--|
| Upload Consents/Notifications/Revocations | Click this button to upload supporting documentation (Consents, Notifications, or Revocations). When clicked, the 'Upload Consents/Notifications/Revocations' popup panel appears (see below). |

8.1.7.8.1.1 Upload Consents/Notifications/Revocations Popup Panel

Upload Consents/Notifications/Revocations

Document Area : Transition

*Document Type

--- Select ---

*Document Name

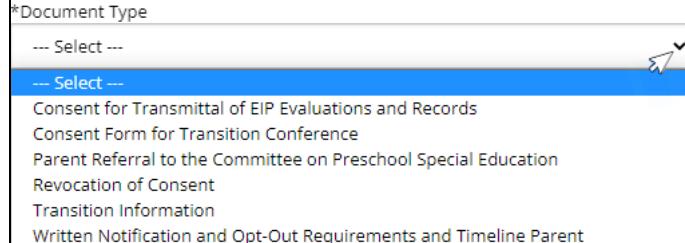
Choose File No file chosen

Notes

Upload Cancel



An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

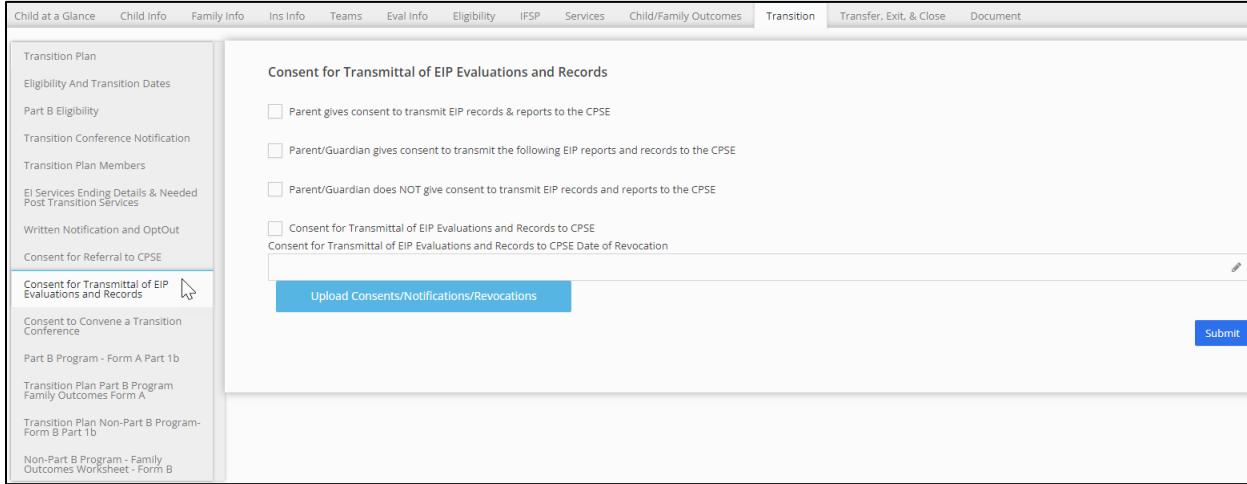
| FIELD | DESCRIPTION |
|--|--|
| Document Area: Transition *Document Type | Use this drop-down and select the appropriate document type (e.g., Parent Documents) from the list.  |
| *Document Name | Enter the name of the uploaded document file. |
| Choose File <input type="button" value="Choose File"/> | To upload your file into the EI-Hub database, click this button. When clicked, your PC's web browser (e.g., MS Edge) prompts an "Open" window; navigate to where your document/file resides, click on the file (highlighted), and click the Open button on the window. The name of your file name should read adjacent to the 'Choose File' button. |
| Notes | Use this textbox to enter relevant notes about your document file uploaded into the system. |

| BUTTON | DESCRIPTION |
|--|---|
| Upload <input type="button" value="Upload"/> | After populating the fields in the Upload Consents/Notifications/Revocations' popup panel (mentioned above), your file uploads into the EI-Hub database when clicked. |
| Cancel <input type="button" value="Cancel"/> | To cancel the action for uploading a file, click this button. When clicked, the Upload File panel closes. |

| BUTTON | DESCRIPTION |
|--|---|
| Submit <input type="button" value="Submit"/> | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the 'Consents for Referral to CPSE' panel. |

8.1.7.9 Consent for Transmittal of EIP Evaluations and Records Panel

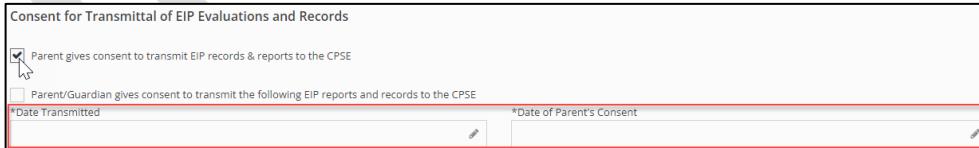
 Use this panel to capture the consent for the Early Intervention Program (EIP) transmittal required for the child's transition process. You may also upload paper copies of consent through this panel.



The screenshot shows a software interface for managing child records. On the left, there's a vertical sidebar with several tabs: Child at a Glance, Child Info, Family Info, Ins Info, Teams, Eval Info, Eligibility, IFSP, Services, Child/Family Outcomes, Transition, Transfer, Exit, & Close, and Document. The 'Transition' tab is currently selected. The main content area is titled 'Consent for Transmittal of EIP Evaluations and Records'. It contains four checkboxes:

- Parent gives consent to transmit EIP records & reports to the CPSE
- Parent/Guardian gives consent to transmit the following EIP reports and records to the CPSE
- Parent/Guardian does NOT give consent to transmit EIP records and reports to the CPSE
- Consent for Transmittal of EIP Evaluations and Records to CPSE
Consent for Transmittal of EIP Evaluations and Records to CPSE Date of Revocation

Below these checkboxes is a blue button labeled 'Upload Consents/Notifications/Revocations'. In the bottom right corner of the main area is a blue 'Submit' button.

| CHECKBOX / FIELD | DESCRIPTION |
|--|--|
| <input type="checkbox"/> Parent gives consent to transmit EIP records & reports to the CPSE | <p>If 'Yes,' select/tick the checkbox. If 'No,' leave blank.</p> <p> Selecting/ticking this checkbox, the following fields appear (shown below).</p> <ul style="list-style-type: none"> • *Date Transmitted: Enter the transmitted date manually or use the calendar picker (invoked by clicking this field). • *Date of Parent's Consent: Enter the parent's consent date manually or use the calendar picker (invoked by clicking this field).  |
| <input type="checkbox"/> Parent/Guardian gives consent to transmit the following EIP reports and records to the CPSE | <p>If 'Yes,' select/tick the checkbox. If 'No,' leave blank.</p> <p> Selecting/ticking this checkbox, the following fields appear (shown below).</p> <ul style="list-style-type: none"> • *Forms to be transmitted: Enter the name of the form(s) to be transmitted. • *Date Transmitted: Enter the transmitted date manually or use the calendar picker (invoked by clicking this field). • *Date of Parent's Consent: Enter the parent's consent date manually or use the calendar picker (invoked by clicking this field). |

| CHECKBOX / FIELD | DESCRIPTION |
|--|--|
| | <p><input checked="" type="checkbox"/> Parent/Guardian gives consent to transmit the following EIP reports and records to the CPSE</p> <p>*Forms to be transmitted</p> <p>Forms to be transmitted</p> <p>*Date Transmitted</p> <p style="text-align: right;">*Date of Parent's Consent</p> |
| <input type="checkbox"/> Parent/Guardian does NOT give consent for a referral being sent to the CPSE | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| <input type="checkbox"/> Parent/Guardian does NOT give consent to transmit EIP records and reports to the CPSE | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| <input type="checkbox"/> Consent for Transmittal of EIP Evaluations and Records to CPSE | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. (i) Selecting/ticking this checkbox turns the 'Consent for Transmittal of EIP Evaluations and Records to CPSE Date of Revocation' as a required (*) field. |
| Consent for Transmittal of EIP Evaluations and Records to CPSE Date of Revocation | Enter the date transmitted manually or use the calendar picker (invoked by clicking this field). |

| BUTTON | DESCRIPTION |
|---|--|
| Upload Consents/Notifications/Revocations Upload Consents/Notifications/Revocations | Click this button to upload supporting documentation (Consents, Notifications, or Revocations). When clicked, the 'Upload Consents/Notifications/Revocations' popup panel appears (see below). |

8.1.7.9.1.1 Upload Consents/Notifications/Revocations Popup Panel

Upload Consents/Notifications/Revocations

Document Area : Transition

*Document Type

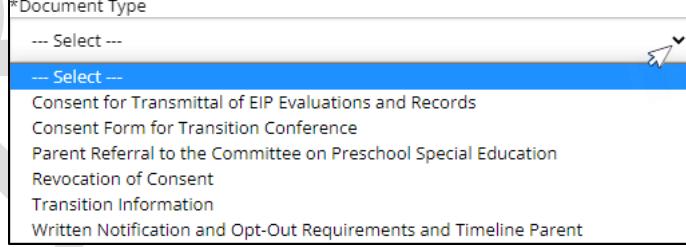
--- Select ---

*Document Name

No file chosen

Notes

 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

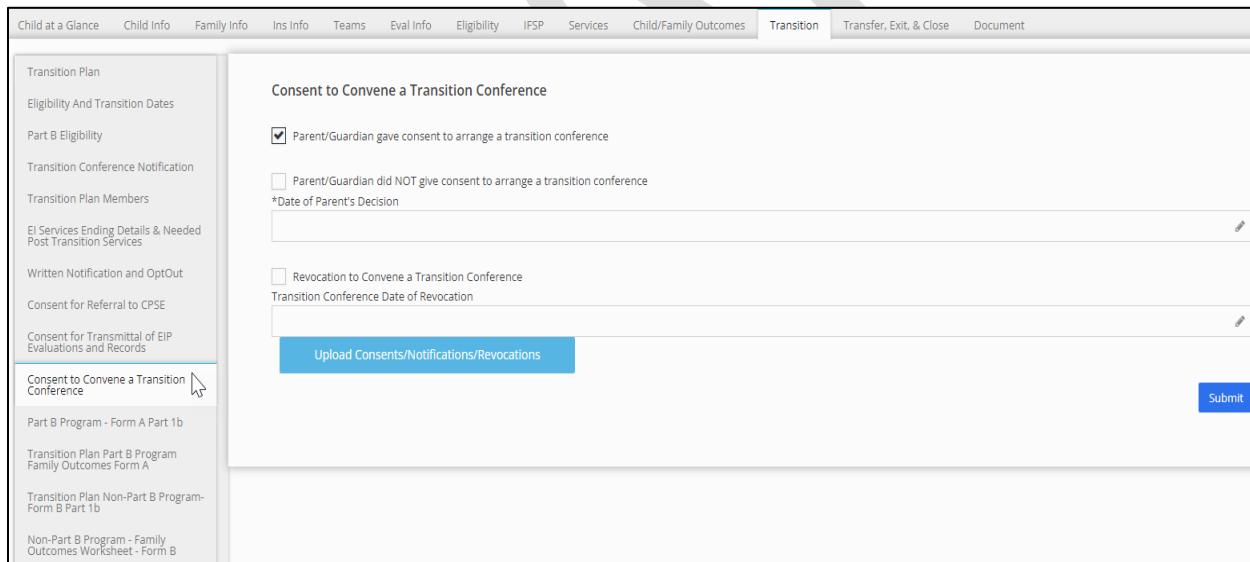
| FIELD | DESCRIPTION |
|--|--|
| Document Area: Transition *Document Type | Use this drop-down and select the appropriate document type (e.g., Parent Documents) from the list.  |
| *Document Name | Enter the name of the uploaded document file. |
| Choose File <input type="button" value="Choose File"/> | To upload your file into the EI-Hub database, click this button. When clicked, your PC's web browser (e.g., MS Edge) prompts an "Open" window; navigate to where your document/file resides, click on the file (highlighted), and click the Open button on the window. The name of your file name should read adjacent to the 'Choose File' button. |
| Notes | Use this textbox to enter relevant notes about your document file uploaded into the system. |

| BUTTON | DESCRIPTION |
|---|---|
| Upload  Upload | After populating the fields in the Upload Consents/Notifications/Revocations' popup panel (mentioned above), your file uploads into the EI-Hub database when clicked. |
| Cancel  Cancel | To cancel the action for uploading a file, click this button. When clicked, the Upload File panel closes. |

| BUTTON | DESCRIPTION |
|---|---|
| Submit  Submit | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the 'Consents for Referral to CPSE' panel. |

8.1.7.10 Consent to Convene a Transition Conference

 Comparable to the IFSP meeting panel, use this panel to record the child's transition conference schedule, where it will be, and the time.



Child at Glance Child Info Family Info Ins Info Teams Eval Info Eligibility IFSP Services Child/Family Outcomes Transition Transfer, Exit, & Close Document

Transition Plan
Eligibility And Transition Dates
Part B Eligibility
Transition Conference Notification
Transition Plan Members
EI Services Ending Details & Needed Post Transition Services
Written Notification and OptOut
Consent for Referral to CPSE
Consent for Transmittal of EIP Evaluations and Records
Consent to Convene a Transition Conference
Part B Program - Form A Part 1b
Transition Plan Part B Program Family Outcomes Form A
Transition Plan Non-Part B Program Form B Part 1b
Non-Part B Program - Family Outcomes Worksheet - Form B

Consent to Convene a Transition Conference

Parent/Guardian gave consent to arrange a transition conference

Parent/Guardian did NOT give consent to arrange a transition conference

*Date of Parent's Decision

Revocation to Convene a Transition Conference

Transition Conference Date of Revocation

 Upload Consents/Notifications/Revocations

 Submit

 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|--|--|
| <input type="checkbox"/> Parent/Guardian gave consent to arrange a transition conference | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. (i) This checkbox is selected/ticked by default when accessing this panel. (i) If you uncheck/deselect this checkbox, the ' Parent/Guardian did NOT give consent to arrange a transition conference' is selected/ticked. |
| <input type="checkbox"/> Parent/Guardian did NOT give consent to arrange a transition conference | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. (i) Selecting this checkbox, the "*Reason for Declining Transition Conference" field is required to populate. (i) If you uncheck/deselect this checkbox, the ' Parent/Guardian did NOT give consent to arrange a transition conference' is selected/ticked. |
| *Reason for Declining Transition Conference | Use this textbox to enter the reason for Declining Transition Conference. Reason for declining consent is required if the parent declines consent; you must enter "N/A" if there is no reason. The reason is not something other than required by programmatic regulation. (i) This field appears when selecting/ticking the 'Parent/Guardian did NOT consent to arrange a transition conference' checkbox. |
| *Date of Parent's Decision | Enter the parent's decision date manually or use the calendar picker (invoked by clicking this field). (i) This field appears for users with the 'Superuser' role. |
| <input type="checkbox"/> Revocation to Convene a Transition Conference | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Transition Conference Date of Revocation | Enter the transition conference revocation date manually or use the calendar picker (invoked by clicking this field). |

| BUTTON | DESCRIPTION |
|--|--|
| Upload Consents/Notifications/ Revocations Upload Consents/Notifications/Revocations | Click this button to upload supporting documentation (Consents, Notifications, or Revocations). When clicked, the 'Upload Consents/Notifications/Revocations' popup panel appears (see below). |

8.1.7.10.1.1 Upload Consents/Notifications/Revocations Popup Panel

Upload Consents/Notifications/Revocations

Document Area : Transition

*Document Type

... Select ...

*Document Name

Choose File No file chosen

Notes

Upload Cancel

(i) An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|---|---|
| Document Area: Transition *Document Type | Use this drop-down and select the appropriate document type (e.g., Parent Documents) from the list. |
| *Document Name | Enter the name of the uploaded document file. |

| FIELD | DESCRIPTION |
|--|--|
| Choose File <input type="button" value="Choose File"/> | To upload your file into the EI-Hub database, click this button. When clicked, your PC's web browser (e.g., MS Edge) prompts an "Open" window; navigate to where your document/file resides, click on the file (highlighted), and click the Open button on the window. The name of your file name should read adjacent to the 'Choose File' button. |
| Notes | Use this textbox to enter relevant notes about your document file uploaded into the system. |

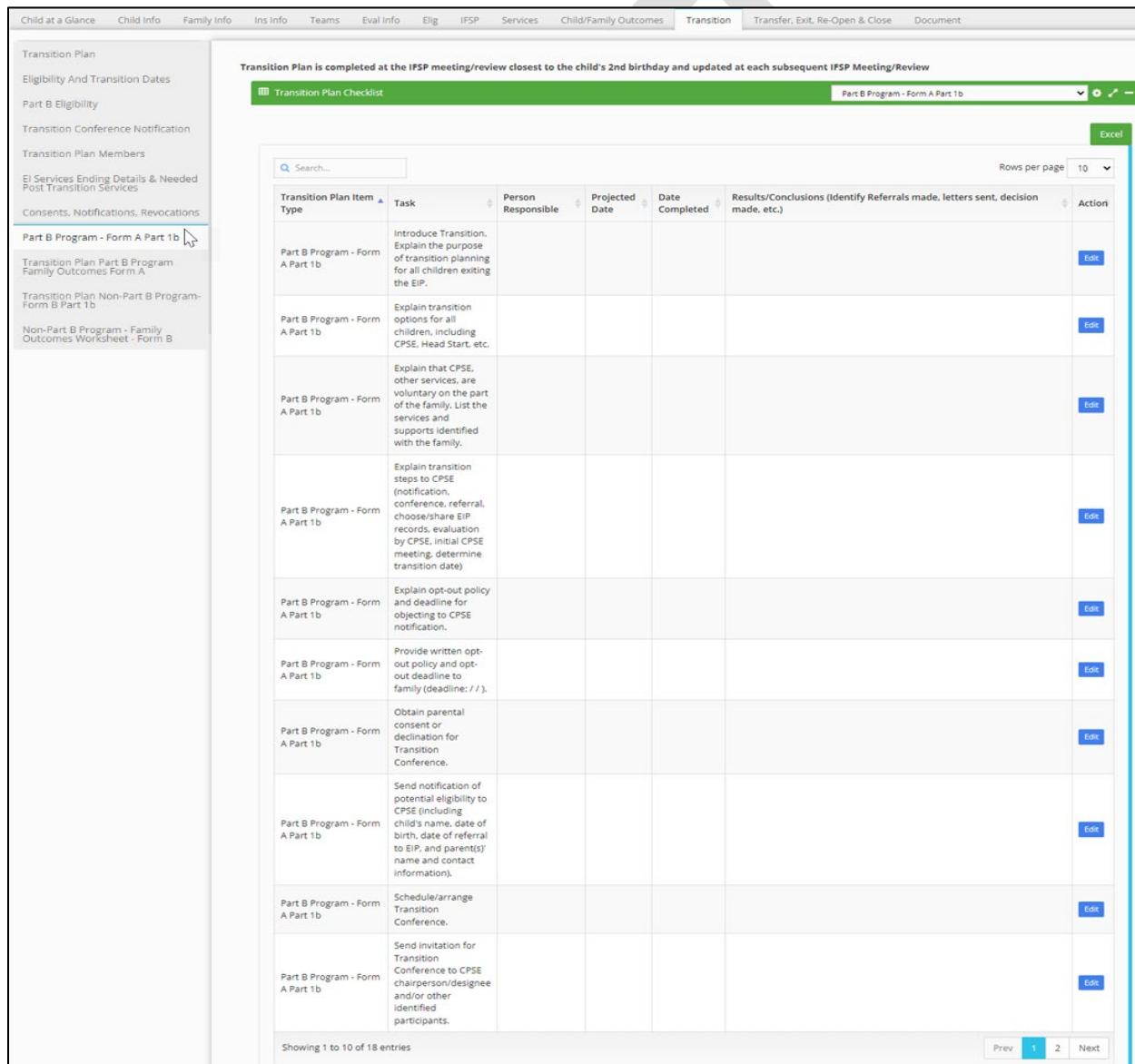
| BUTTON | DESCRIPTION |
|--|---|
| Upload <input type="button" value="Upload"/> | After populating the fields in the Upload Consents/Notifications/Revocations' popup panel (mentioned above), your file uploads into the EI-Hub database when clicked. |
| Cancel <input type="button" value="Cancel"/> | To cancel the action for uploading a file, click this button. When clicked, the Upload File panel closes. |

| BUTTON | DESCRIPTION |
|--|---|
| Submit <input type="button" value="Submit"/> | To save your entry, click this button. When clicked, the system keeps the information in the EI-Hub database, and the record updates the 'Consents for Referral to CPSE' panel. |

8.1.7.11 Part B Program – Form A Part 1b Grid/Table

 When a child transitions into the 4410 services/school system, the Service Coordinator (SC) will enter the information in this panel (screenshot of pages 1 & 2 examples shown below). The SC will sit down with the family item by item, select edit, and fill in the data. Recording this data can be done in more than one sitting; the SC can do it over time.

 The Transition Plans Form A and B are optional tools service coordinators (SC) use to take their children and families through the transition process. SC can input their information in this panel, and the paper copies are uploaded here as they attend the IFSP meeting/review closest to the child's 2nd birthday and are updated at each subsequent IFSP Meeting/Review.



The screenshot shows a software interface for managing transition plans. On the left, a sidebar lists various transition-related forms. The main area is titled "Transition Plan Checklist" and displays a grid of tasks. The columns are: Transition Plan Item Type, Task, Person Responsible, Projected Date, Date Completed, Results/Conclusions (Identify Referrals made, letters sent, decision made, etc.), and Action (with an "Edit" button for each row). There are 18 rows in the grid, corresponding to different tasks in the checklist. The grid also includes a search bar, a "Rows per page" dropdown set to 10, and a "Print" button.

| Transition Plan Item Type | Task | Person Responsible | Projected Date | Date Completed | Results/Conclusions (Identify Referrals made, letters sent, decision made, etc.) | Action |
|---------------------------------|--|--------------------|----------------|----------------|--|--------|
| Part B Program - Form A Part 1b | Introduce Transition. Explain the purpose of transition planning for all children exiting the EIP. | | | | | Edit |
| Part B Program - Form A Part 1b | Explain transition options for all children, including CPSE, Head Start, etc. | | | | | Edit |
| Part B Program - Form A Part 1b | Explain that CPSE, other services, are voluntary on the part of the family. List the services and supports identified with the family. | | | | | Edit |
| Part B Program - Form A Part 1b | Explain transition steps to CPSE (notification, conference, referral, choose/share EIP records, evaluation by CPSE, initial CPSE meeting, determine transition date) | | | | | Edit |
| Part B Program - Form A Part 1b | Explain opt-out policy and deadline for objecting to CPSE notification. | | | | | Edit |
| Part B Program - Form A Part 1b | Provide written opt-out policy and opt-out deadline to family (deadline: //). | | | | | Edit |
| Part B Program - Form A Part 1b | Obtain parental consent or declination for Transition Conference. | | | | | Edit |
| Part B Program - Form A Part 1b | Send notification of potential eligibility to CPSE (including child's name, date of birth, date of referral to EIP, and parent(s)' name and contact information). | | | | | Edit |
| Part B Program - Form A Part 1b | Schedule/arrange Transition Conference. | | | | | Edit |
| Part B Program - Form A Part 1b | Send invitation for Transition Conference to CPSE chairperson/designee and/or other identified participants. | | | | | Edit |

Transition Plan

- Eligibility And Transition Dates
- Part B Eligibility
- Transition Conference Notification
- Transition Plan Members
- EI Services Ending Details & Needed Post Transition Services
- Written Notification and OptOut
- Consent for Referral to CPSE
- Consent for Transmittal of EIP Evaluations and Records
- Consent to Convene a Transition Conference
- Part B Program - Form A Part 1b**
- Transition Plan Part B Program Family Outcomes Form A
- Transition Plan Non-Part B Program- Form B Part 1b
- Non-Part B Program - Family Outcomes Worksheet - Form B

Transition Plan is completed at the IFSP meeting/review closest to the child's 2nd birthday and updated at each subsequent IFSP Meeting/Review

Transition Plan Checklist

Part B Program - Form A Part 1b

Excel

| Transition Plan Item Type | Task | Person Responsible | Projected Date | Date Completed | Results/Conclusions (Identify Referrals made, letters sent, decision made, etc.) | Action |
|---------------------------------|--|--------------------|----------------|----------------|--|----------------------|
| Part B Program - Form A Part 1b | Convene Transition Conference and document participants and topics discussed. Topics should include: a. Differences between CPSE and EIP services. b. CPSE evaluation/eligibility process. c. Eligibility criteria for CPSE services. d. Options for CPSE service delivery. e. Last day of EIP eligibility if child not referred or not eligible for CPSE services is day before 3rd birthday. f. Options for other services and supports. e.g., Head Start. | | | | | Edit |
| Part B Program - Form A Part 1b | If parent declines transition conference, provide parent with CPSE transition information in writing (see previous question, a-f above). | | | | | Edit |
| Part B Program - Form A Part 1b | Send the parent referral to CPSE, with parental permission. | | | | | Edit |
| Part B Program - Form A Part 1b | Refer to other services and supports. | | | | | Edit |
| Part B Program - Form A Part 1b | Obtain parental consent for transmittal of child records to the CPSE and/or other programs. Assist parent in choosing the records to send. | | | | | Edit |
| Part B Program - Form A Part 1b | Send child records, with copy of parental consent, to CPSE and/or other programs. | | | | | Edit |
| Part B Program - Form A Part 1b | Obtain parental consent on the IFSP, which includes this transition plan. | | | | | Edit |
| Part B Program - Form A Part 1b | Other (Specify) | | | | | Edit |

Showing 11 to 18 of 18 entries

Prev | 1 | **2** | Next

(i) See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section Home Tab Controllers; selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|---|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| BUTTON | DESCRIPTION |
|---|--|
| Excel  | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet.</p> <p>To see your results in excel, click Open.</p> <p>(i) Leaving all the Report Filters fields blank will show "all" results.</p> <p>(i) The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system.</p> |

| COLUMN | DESCRIPTION |
|---|---|
| Transition Plan Item | This column displays the transition plan item. |
| Task | This column displays the transition plan task. |
| Person Responsible | This column displays the name of the person responsible for the transition plan. |
| Projected Date | This column displays the projected date. |
| Date Completed | This column displays the completed date. |
| Results/Conclusions (Identify Referrals made, letter sent, decision made, etc.) | This column displays the results/conclusion of the child's Transition Plan. |
| Action Edit  | Click this button adjacent to the appropriate Transition Plan Item row/column to view or edit data. When clicked, the 'Transition Plan Checklist Completion' tab/panel appears (example below). |

8.1.7.11.1 Transition Plan Checklist Completion Tab/Panel

 The panel below appears when selecting/clicking an **Edit** button adjacent to a transition plan item.



 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|--|--|
| This is not a labeled field | This first field on the Transition Plan Checklist completion panel identifies the selected transition task. |
| Person Responsible | Enter the person responsible for the transition plan item. |
| Projected Date | Enter the projected date manually or use the calendar picker (invoked by clicking this field) for the child's transition services. |
| Date Completed | Enter the date completed manually or use the calendar picker (invoked by clicking this field) for the child's transition services. |
| Results/Conclusions (Identify Referrals made, letters sent, decisions made, etc.) | Use the textbox to enter the results/conclusions for the child's transition services. |

| BUTTON | DESCRIPTION |
|--------|---|
| Submit | To save your entry, click this button. When clicked, the system keeps the information in the EI-HUB database, and the record updates. |

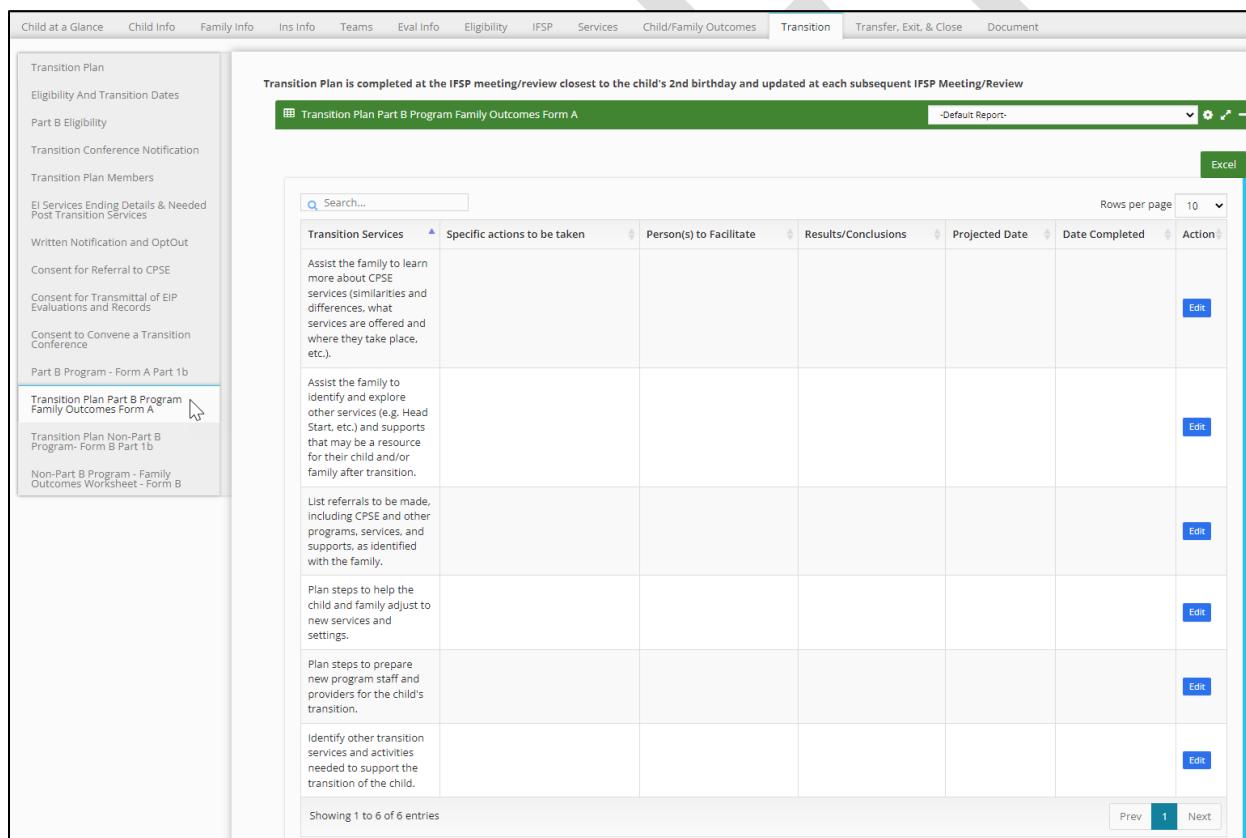
8.1.7.12 Transition Plan Part B Program Family Outcomes Form A Grid/Table

 This grid/table is from the 'Transition Tool kit'; it explains the distinction between the checklist and the Outcomes worksheets.

- **IFSP Transition Plan Checklist** (page 1) identifies the steps to be completed to satisfy Early Intervention Program (EIP) requirements related to ensuring the child's timely transition.
- **The IFSP Transition Plan Outcomes Worksheet** (page 2) identifies the areas where transition services must focus on achieving outcomes that support a smooth transition for the child.

The Service Coordinator (SC) sits down with the family item by item, selects edit, and fills in the data. Again, recording the child's outcome data can be done in multiple sittings, and the SC can do it over time.

 **The Transition Plan is completed at the IFSP meeting/review closest to the child's 2nd birthday and updated at each subsequent IFSP Meeting/Review.**



The screenshot shows a software interface for managing transition plans. On the left, a sidebar lists various items under 'Transition Plan' and 'Part B Program'. The main area is titled 'Transition Plan Part B Program Family Outcomes Form A'. It features a search bar and a table with columns for 'Transition Services', 'Specific actions to be taken', 'Person(s) to Facilitate', 'Results/Conclusions', 'Projected Date', 'Date Completed', and 'Action'. Each row in the table contains a detailed description of a service and an 'Edit' button. At the bottom, a message states 'Showing 1 to 6 of 6 entries'.

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

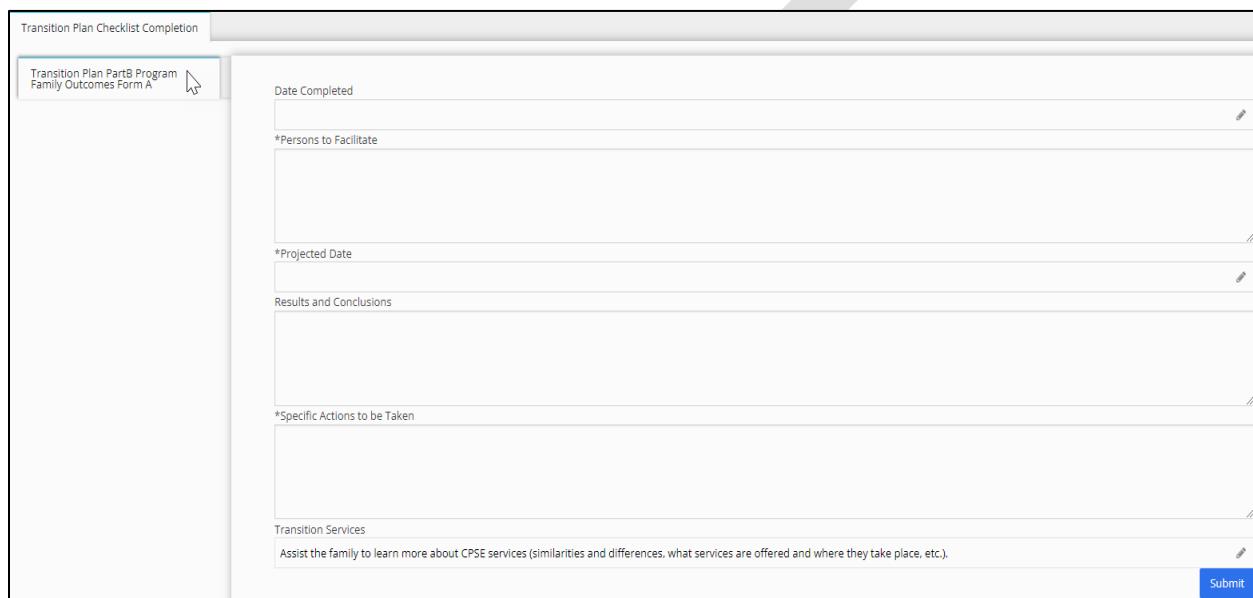
| BUTTON | DESCRIPTION |
|---|--|
| Excel  | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet.</p> <p>To see your results in excel, click Open.</p> <p>(i) Leaving all the Report Filters fields blank will show "all" results.</p> <p>(i) The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system.</p> |

| COLUMN | DESCRIPTION |
|--|---|
| Transition Services | This column displays the transition service item. |
| Specific actions to be taken | This column displays the specific actions to be taken for the transition service. |
| Person(s) Facilitate | This column displays the name of the person(s) responsible for facilitating the transition service. |
| Results/Conclusions | This column displays the results/conclusion of the child's transition service. |
| Projected Date | This column displays the date the transition date is projected to be completed. |
| Date Completed | This column displays the completed date for the transition service. |
| Action  | <p>Click the Edit button adjacent to the appropriate Transition Plan Item row/column to view or edit data.</p> <p>For example, when clicked, the 'Transition Plan Checklist Completion/Transition Plan Part B Program Family Outcomes Form A' panel appears (shown below).</p> |

8.1.7.12.1 Transition Plan Checklist Completion Tab/Transition Plan Part B Program Family Outcomes Form A Panel

 If a child has already transitioned into the '4410 program,' there would be no need to do the forms that the Service Coordinator (SC) will do here. Instead, they will sit down with the family item by item, select edit, and fill in the data. Again, recording the data can be done in multiple settings, and the SC can do it over time.

The panel below appears when selecting/clicking an **Edit** button adjacent to a transition service item.



 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|-------------------------------|--|
| Date Completed | Enter the date completed manually or use the calendar picker (invoked by clicking this field) for the child's transition services. |
| *Persons to Facilitate | Use the textbox to enter the person's name (s) to facilitate the transition services. |
| *Projected Date | Enter the projected date manually or use the calendar picker (invoked by clicking this field) for the child's transition services. |
| Results and Conclusions | Use the textbox to enter the results/conclusions for the child's transition services. |
| *Specific Actions to be Taken | Use the textbox to enter the specific actions for the transition services. |

| FIELD | DESCRIPTION |
|---------------------|---|
| Transition Services | A read-only field displays the transition services. |

| BUTTON | DESCRIPTION |
|---|--|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-HUB database, and the record updates the 'Transition Plan Part B Program Family Outcomes Form A' panel (grid/table). |

8.1.7.13 Transition Plan Non-Part B Program – Form B Part 1b Grid/Table

 The EI Hub allows the user to enter information collected on Transition forms completed (if utilized) by the Service Coordinator with the family. For example, 'Part 1b of Form B' reflects the steps you should review with the family for a child not transitioning into the 3-5 system (Part B). Again, recording the data can be done in multiple sittings, and the SC can do it over time.

 **The Transition Plan is completed at the IFSP meeting/review closest to the child's 2nd birthday and updated at each subsequent IFSP Meeting/Review.**

Child at a Glance Child Info Family Info Ins Info Teams Eval Info Elig IFSP Services Child/Family Outcomes Transition Transfer, Exit, Re-Open & Close Document

Transition Plan
Eligibility And Transition Dates
Part B Eligibility
Transition Conference Notification
Transition Plan Members
EI Services Ending Details & Needed Notifications, Revocations
Part B Program - Form A Part 1b
Transition Plan Part B Program Family Outcomes Form A
Transition Plan Non-Part B Program- Form Part 1b
Non-Part B Program Family Outcomes Worksheet Form B

Transition Plan Checklist

Non-Part B Program - Form B Part 1b

| Transition Plan Item Type | Task | Person Responsible | Projected Date | Date Completed | Results/Conclusions (Identify Referrals made, letters sent, decision made, etc.) | Action |
|-------------------------------------|---|--------------------|----------------|----------------|--|----------------------|
| Non-Part B Program - Form B Part 1b | Introduce Transition. Explain the purpose of transition planning for the child/children exiting the EIP. | | | | | Edit |
| Non-Part B Program - Form B Part 1b | Explain options for services and supports available to the child and family upon exiting the EIP. | | | | | Edit |
| Non-Part B Program - Form B Part 1b | Assist parent to identify services and supports to assist their child and family upon exiting the EIP. List the services and supports identified with the family. | | | | | Edit |
| Non-Part B Program - Form B Part 1b | Refer to service(s) and support(s) as needed. | | | | | Edit |
| Non-Part B Program - Form B Part 1b | Obtain parental consent for transmittal of child records to service(s) chosen by the parent. Assist parent in choosing the records to send. | | | | | Edit |
| Non-Part B Program - Form B Part 1b | Send copy of the child records, with parental consent to service(s) chosen by the parent. | | | | | Edit |
| Non-Part B Program - Form B Part 1b | Obtain parental agreement with the IFSP, which includes the transition plan. | | | | | Edit |
| Non-Part B Program - Form B Part 1b | Other 1 (Specify) | | | | | Edit |
| Non-Part B Program - Form B Part 1b | Other 2 (Specify) | | | | | Edit |

Showing 1 to 9 of 9 entries

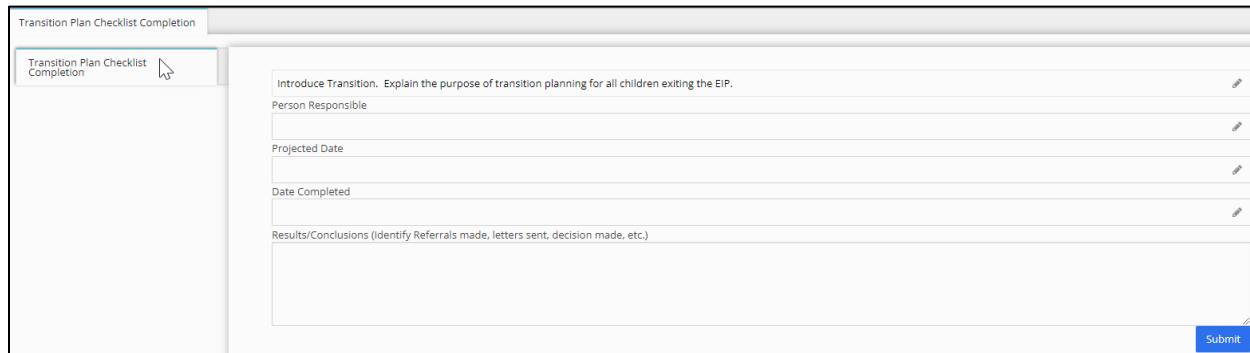
| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| BUTTON | DESCRIPTION |
|---|--|
| Excel  | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet.</p> <p>To see your results in excel, click Open.</p> <p>(i) Leaving all the Report Filters fields blank will show "all" results.</p> <p>(i) The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system.</p> |

| COLUMN | DESCRIPTION |
|---|--|
| Transition Plan Item Type | This column displays the transition plan item. |
| Task | This column displays the transition plan task. |
| Person Responsible | This column displays the name of the person responsible for the transition plan. |
| Projected Date | This column displays the date the transition task is projected to be completed. |
| Date Completed | This column displays the date the transition task was completed. |
| Results/Conclusions (Identify Referrals made, letter sent, decision made, etc.) | This column displays the results/conclusion of the child's Transition Plan. |
| Action Edit  | <p>This column displays (if applicable) corresponding action buttons, in this case (example shown below), the Edit button.</p> <p>Click this button adjacent to the appropriate Transition Plan Item row/column to view or edit data. When clicked, the 'Transition Plan Checklist Completion' tab/panel appears (example below).</p> |

8.1.7.13.1 Transition Plan Checklist Completion Tab/Panel

 The panel below appears when selecting/clicking an **Edit** button adjacent to a transition plan item.



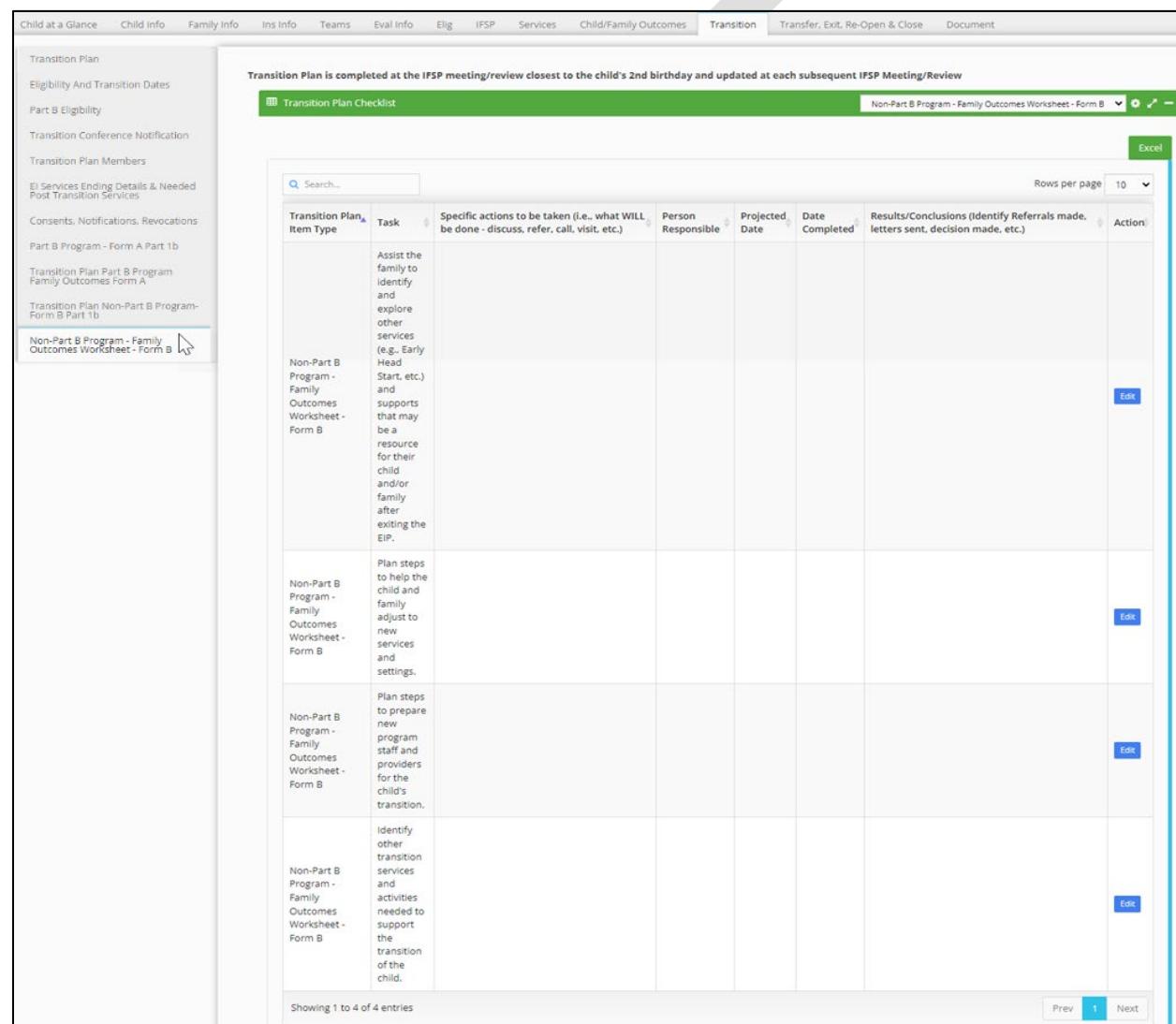
| FIELD | DESCRIPTION |
|--|---|
| This is not a labeled Field | This first field on the Transition Plan Checklist completion panel identifies the selected transition task. |
| Person Responsible | Enter the name of the person responsible for the transition plan. |
| Projected Date | Enter the projected date manually or use the calendar picker (invoked by clicking this field). |
| Date Completed | Enter the completed date manually or use the calendar picker (invoked by clicking this field). |
| Results/Conclusions (Identify Referrals made, letter sent, decision made, etc.) | Enter the results/conclusion of the child's Transition Plan. |

| BUTTON | DESCRIPTION |
|--|--|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-HUB database, and the record updates the 'Transition Plan Checklist' panel (grid/table). |

8.1.7.14 Non-Part B Program – Family Outcomes Worksheet – Form B Grid/Table

 This grid/table is another form that the Service Coordinator (SC) can fill out for a child found not eligible to transition to CPSE. The SC will sit down with the family item by item, select edit, and fill in the data. Again, recording the child's outcome data can be done in multiple sittings, and the SC can do it over time

 The Transition Plan is completed at the IFSP meeting/review closest to the child's 2nd birthday and updated at each subsequent IFSP Meeting/Review.



| Transition Plan Item Type | Task | Specific actions to be taken (i.e., what WILL be done - discuss, refer, call, visit, etc.) | Person Responsible | Projected Date | Date Completed | Results/Conclusions (Identify Referrals made, letters sent, decision made, etc.) | Action |
|---|--|--|--------------------|----------------|----------------|--|----------------------|
| Non-Part B Program - Family Outcomes Worksheet - Form B | Assist the family to identify and explore other services (e.g., Early Head Start, etc.) and supports that may be a resource for their child and/or family after exiting the EIP. | | | | | | Edit |
| Non-Part B Program - Family Outcomes Worksheet - Form B | Plan steps to help the child and family adjust to new services and settings. | | | | | | Edit |
| Non-Part B Program - Family Outcomes Worksheet - Form B | Plan steps to prepare new program staff and providers for the child's transition. | | | | | | Edit |
| Non-Part B Program - Family Outcomes Worksheet - Form B | Identify other transition services and activities needed to support the transition of the child. | | | | | | Edit |

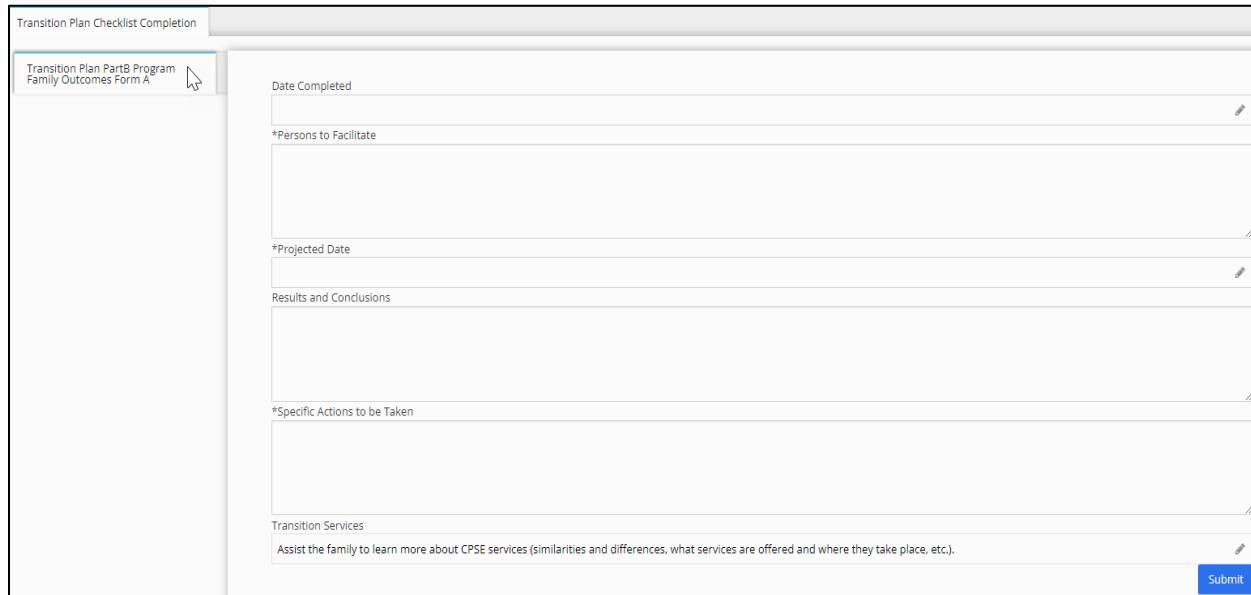
| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| BUTTON | DESCRIPTION |
|---|--|
| Excel  | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet.</p> <p>To see your results in excel, click Open.</p> <p>(i) Leaving all the Report Filters fields blank will show "all" results.</p> <p>(i) The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system.</p> |

| COLUMN | DESCRIPTION |
|---|---|
| Transition Plan Item Type | This column displays the transition form used (e.g., Transition Form B). |
| Task | This column displays the transition plan task. |
| Specific actions to be taken (i.e., what Will be done - discuss, refer, call, visit, etc.) | This column displays specific actions to be taken. |
| Person Responsible | This column displays the name of the person responsible for the transition plan. |
| Projected Date | This column displays the projected date. |
| Date Completed | This column displays the completed date. |
| Results/Conclusions (Identify Referrals made, letter sent, decision made, etc.) | This column displays the results/conclusion of the child's Transition Plan. |
| Action Edit  | <p>This column displays (if applicable) corresponding action buttons, in this case (example shown below), the Edit button.</p> <p>Click this button adjacent to the appropriate Transition Plan Item row/column to view or edit data. The Transition Plan Checklist Completion tab/panel appears (example below) when clicked.</p> |

8.1.7.14.1 Transition Plan Checklist Completion Tab/ Transition Plan Part B Program Family Outcomes Form A Panel

 This panel provides the details of the transition task being addressed.



The screenshot shows a web-based form titled "Transition Plan Checklist Completion". On the left, a vertical sidebar lists tabs: "Transition Plan Checklist Completion" (selected), "Transition Plan Part B Program Family Outcomes Form A" (selected), and "Transition Plan Part B Program Family Outcomes Form B". The main content area contains several input fields:

- "Date Completed": A date input field.
- "*Persons to Facilitate": A text input field.
- "*Projected Date": A date input field.
- "Results and Conclusions": A large text area for notes.
- "*Specific Actions to be Taken": A large text area for notes.
- "Transition Services": A read-only text area containing the instruction "Assist the family to learn more about CPSE services (similarities and differences, what services are offered and where they take place, etc.)."

A blue "Submit" button is located at the bottom right of the form area.

 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

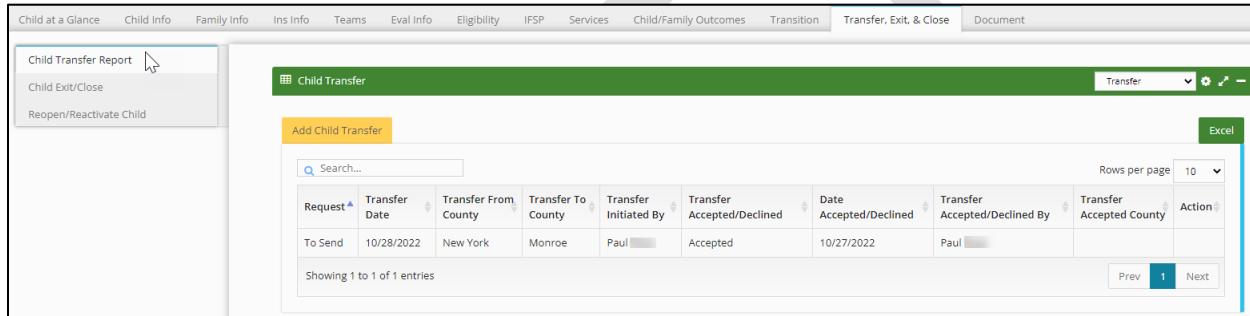
| FIELD | DESCRIPTION |
|--|--|
| Date Completed | Enter the completed date manually or use the calendar picker (invoked by clicking this field). |
| *Person to Facilitate | Enter the name of the person responsible for facilitating the transition service step. |
| *Projected Date | Enter the projected date manually or use the calendar picker (invoked by clicking this field). |
| Results/Conclusions (Identify Referrals made, letter sent, decision made, etc.) | Enter the results/conclusion of action taken on the child's transition step.. |
| *Specific Actions to be Taken | Enter the specific actions to be taken (e.g., what will be done, discussed, referred to, called, visited, etc.). |
| Transition Services | A read-only field displays the name/description of the transition service item. |

| BUTTON | DESCRIPTION |
|---|--|
| Submit  Submit | To save your entry, click this button. When clicked, the system keeps the information in the EI-HUB database, and the record updates the Transition Plan Checklist panel (grid/table). |

8.1.8 Transfer, Exit, & Close Tab

8.1.8.1 Child Transfer Report Grid/Table

 This grid/table reflects a child's history if transferred from one county to another. For example, using this grid/table to add a child transfer allows you to move children from one county to the next.



| Request | Transfer Date | Transfer From County | Transfer To County | Transfer Initiated By | Transfer Accepted/Declined | Date Accepted/Declined | Transfer Accepted/Declined By | Transfer Accepted County | Action |
|---------|---------------|----------------------|--------------------|-----------------------|----------------------------|------------------------|-------------------------------|--------------------------|--------|
| To Send | 10/28/2022 | New York | Monroe | Paul [redacted] | Accepted | 10/27/2022 | Paul [redacted] | [redacted] | |

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| BUTTON | DESCRIPTION |
|---|--|
|  Excel | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet.</p> <p>To see your results in excel, click Open.</p> <p> Leaving all the Report Filters fields blank will show "all" results.</p> <p> The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system.</p> |

| COLUMN | DESCRIPTION |
|--------------------------------------|---|
| Request | This column displays the child's transfer request. |
| Transfer Date | <p>This column displays the child's transfer date.</p> <p>(i) This field displays the date the transferring county sent the transferred record to the receiving county; this is NOT the date the family told you they were moving or a date in the future.</p> |
| Transfer From County | This column displays the county the child is transferring from |
| Transfer To County | This column displays the county the child is transferring to |
| Transfer Initiated By | This column displays the name of the person who initiated the child's transfer from a county. |
| Transfer Accepted/Declined | This column displays whether the child's transfer is accepted or declined. |
| Date Accepted/Declined | This column displays the date the child's transfer was accepted or declined. |
| Transfer Accepted/Declined By | This column displays the name of the person who accepted or declined the child's transfer. |
| Transfer Accepted County | This column displays whether the child's transfer is accepted or declined. |

| BUTTON | DESCRIPTION |
|--|--|
| Add Child Transfer  | Click this button to add a 'child transfer' record for the child. The Child Transfer tab/panel appears (shown below). |
| Edit  | <p>Click this button adjacent to the appropriate child transfer record/row to edit. When clicked, the 'Child Transfer' tab/panel appears.</p> <p>(i) If the child has transferred, the transferring county no longer has an 'Edit' button; it disappears after completing the transfer.</p> |

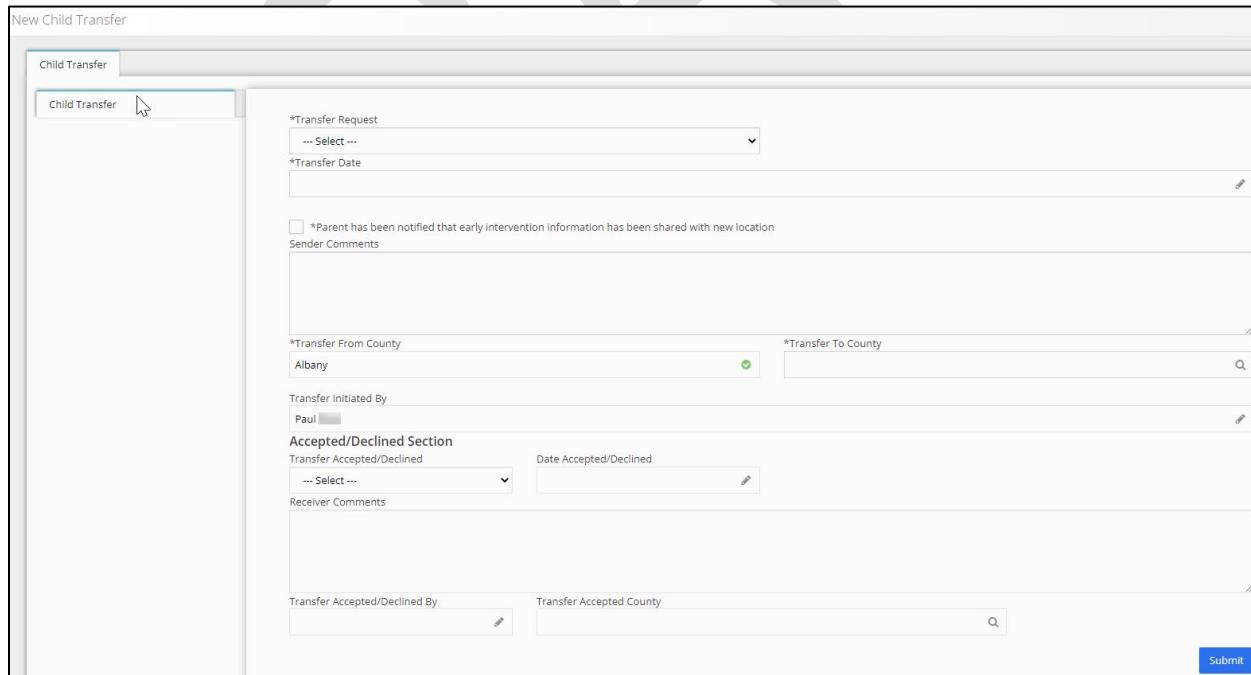
8.1.8.2 Child Transfer Tab/Panel

 A two-way process to send a child from one county to another by initiating a transfer on this panel.

- Until the new county accepts the child, the child's record will remain visible in the old county.
- There is a dashboard (EI-Hub Home page – Transfer Alerts) for the county to notify of the request, and the county can accept.
- Once accepted, all transferring county IFSPs along with the associated service authorizations, are closed, and the new county will have access to the child's record.
- For children that are transferring prior to an IFSP, open service authorizations such as the initial service coordinator or evaluation will be closed when the transfer is accepted.
- The receiving county has access to the child's record upon acceptance.
- IFSPs and SAs are closed and cannot be edited or extended.
- New authorizations and IFSP will need to be entered for any transfer.
- Once the receiving county accepts the transferred record, they assign a new EIO/D and initial SC.
- The receiving county will create a new IFSP through the amendment process.

Counties can also request a transfer if they see a child is active in another county. A referral may trigger this to a new county. Counties can decline transfers as well in the event it is an error.

Transfer Request Panel Example



The screenshot shows the 'New Child Transfer' panel with the 'Child Transfer' tab selected. The 'Transfer Request' dropdown is set to 'Select ...'. The 'Transfer Date' field is empty. A checkbox for 'Parent has been notified that early intervention information has been shared with new location' is unchecked. The 'Sender Comments' area is empty. The 'Transfer From County' dropdown is set to 'Albany'. The 'Transfer To County' dropdown is empty. The 'Transfer Initiated By' field contains 'Paul'. The 'Accepted/Delayed Section' dropdown is set to 'Select ...'. The 'Date Accepted/Delayed' field is empty. The 'Receiver Comments' area is empty. The 'Transfer Accepted/Delayed By' field is empty. The 'Transfer Accepted County' field is empty. A 'Submit' button is located at the bottom right.

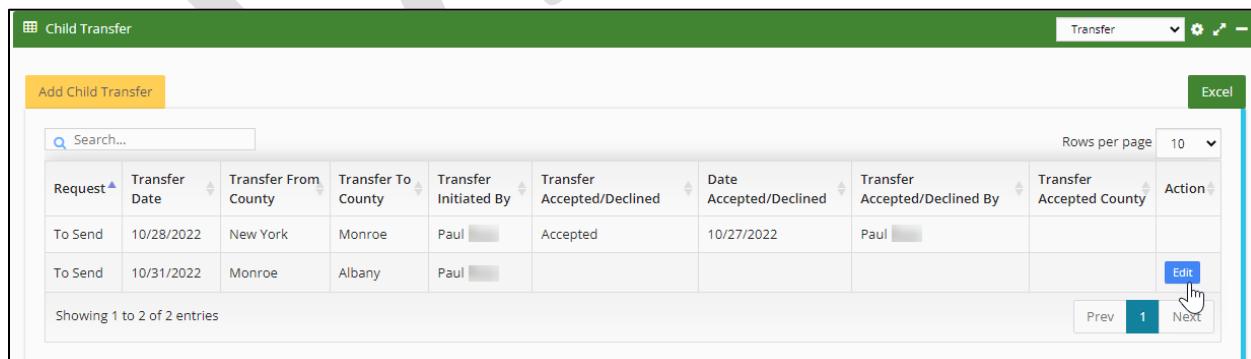
 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD / CHECKBOX | DESCRIPTION |
|---|---|
| *Transfer Request | Use this drop-down field and select the appropriate item ('To Send' or 'To Receive'). |
| *Transfer Date | Enter the child's transfer date manually or use the calendar picker (invoked by clicking this field). |
| <input type="checkbox"/> *Parent has been notified that early intervention information has been shared with new location. | If 'Yes,' select/tick the checkbox. If 'No,' leave blank. |
| Sender Comments | If applicable, enter any sender comments. |
| *Transfer From County | This read-only field auto-populates the county. |
| *Transfer To County | To search for a county, begin to type (activates the type-ahead feature) and select the appropriate location from the list (example shown above). |
| Transfer Initiated By | A read-only field displays the person who initiated the transfer. |

Child Transfer Grid/Table & Panel (Accept or Decline process)

Authorized users access the Child Transfer Report (grid/table), select/click the **Edit** button in the 'Action' column adjacent to the appropriate child transfer record, and either accept or decline the child's transfer.

 Transfer acceptance is initiated through the child lookup results area or by navigating directly to the user's dashboard.



The screenshot shows a grid-based interface for managing child transfers. The columns are labeled: Request, Transfer Date, Transfer From County, Transfer To County, Transfer Initiated By, Transfer Accepted/Declined, Date Accepted/Declined, Transfer Accepted/Declined By, Transfer Accepted County, and Action. There are two entries:

| Request | Transfer Date | Transfer From County | Transfer To County | Transfer Initiated By | Transfer Accepted/Declined | Date Accepted/Declined | Transfer Accepted/Declined By | Transfer Accepted County | Action |
|---------|---------------|----------------------|--------------------|-----------------------|----------------------------|------------------------|-------------------------------|--------------------------|-------------|
| To Send | 10/28/2022 | New York | Monroe | Paul [redacted] | Accepted | 10/27/2022 | Paul [redacted] | | Edit |
| To Send | 10/31/2022 | Monroe | Albany | Paul [redacted] | | | | | Edit |

At the bottom right of the grid, there is a blue 'Edit' button with a hand cursor icon pointing to it, indicating it is the target for the action described in the text above.

| | |
|---------------------------------------|--------------------------|
| Accepted/Declined Section | |
| Transfer Accepted/Declined | Date Accepted/Declined |
| Accepted | 06/14/2022 |
| Receiver Comments | |
| Approved... | |
| Transfer Accepted/Declined By | Transfer Accepted County |
| Paul-Michael | Rensselaer |
| Accepted Child Phase Level | |
| Accept Child at Referral Level | |
| <input type="button" value="Submit"/> | |

Accepted/Declined Section

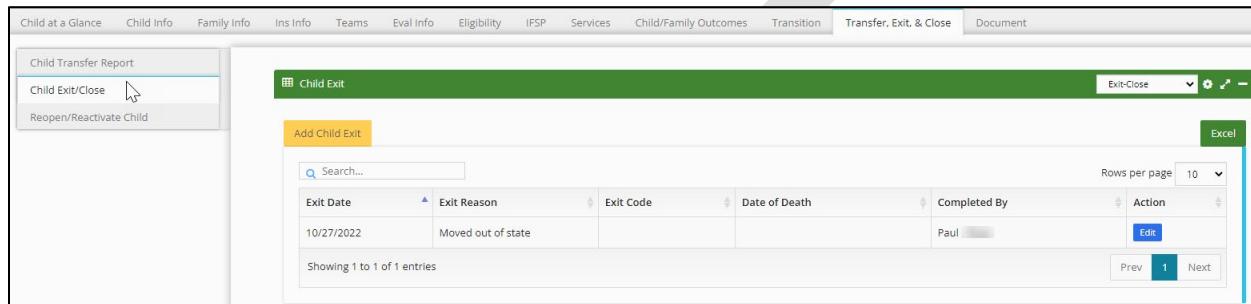
| FIELD | DESCRIPTION |
|-------------------------------|---|
| Transfer Accepted/Declined | <p>Use this drop-down and select the appropriate item ('Accepted' or 'Declined') from the list.</p> <p>(i) If "Accepted" is selected, the 'Transfer Accepted County' becomes enabled. Hence, the field is disabled if "Declined" is determined.</p> |
| Date Accepted/Declined | <p>Enter the accepted or declined date manually or use the calendar picker (invoked by clicking this field).</p> <p>(i) If "Accepted" is selected, the 'Transfer Accepted County' becomes enabled. Hence, the field is disabled if "Declined" is determined.</p> |
| Receiver Comments | If applicable, enter any relevant comments made by the receiver. |
| Transfer Accepted/Declined By | A read-only field displays the name of the person who Accepted or Declined the child's transfer. |
| Transfer Accepted County | If this field is enabled, search for the transfer accepted county by beginning to type (activates the type-ahead feature) and select the appropriate county from the list. |

| BUTTON | DESCRIPTION |
|--------|---|
| Submit | To save your entry, click this button. When clicked, the system keeps the information in the EI-HUB database, and the record updates the Child Transfer panel (grid/table). |

8.1.8.3 Child Exit/Close Grid/Table

 This Grid/Table provides an overview of the child's entry and exit from the Early Intervention Program (EIP). There are many circumstances for a child to exit leaving the Early Intervention Program, such as

- Completed the program,
- Exit early if left the state
- The service coordinator lost track of the family, etc.



| Exit Date | Exit Reason | Exit Code | Date of Death | Completed By | Action |
|------------|--------------------|-----------|---------------|--------------|--------|
| 10/27/2022 | Moved out of state | | | Paul | Edit |

 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| COLUMN | DESCRIPTION |
|----------------------|--|
| Exit Date | This column displays the child's exit date. |
| Exit Reason | This column displays the child's exit reason. |
| Date Of Death | If the child has died, this column displays the date the child passed. |
| Completed By | This column displays the EI-Hub username for making the entry. |

| BUTTON | DESCRIPTION |
|--|---|
| Add Child Exit  | Click this button to add a 'child exit' record for the child. The Child Exit tab/ Child Exit/Close panel appears (shown below). |
| Edit  | Click this button adjacent to the appropriate child exit record/row to edit the data and closure Amendment. When clicked, the Child Exit/Close tab/panel appears. |

8.1.8.3.1 Child Exit Tab / Child Exit/Close Panel

 'Exit' is when the child leaves either the early intervention program or the at-risk developmental surveillance program.

'Closed' is an automatic process that occurs within the system to allow sufficient time for any billing/service logging actions to occur. The case is closed after these time requirements have passed (typically, the child's age is approximately 5 yrs., 8 months).

A child can exit more than once. For example, if a child is exited from the Early Intervention Program, certain roles could still reopen that child's record using the Reopen/Reactivate Child panel if needed.



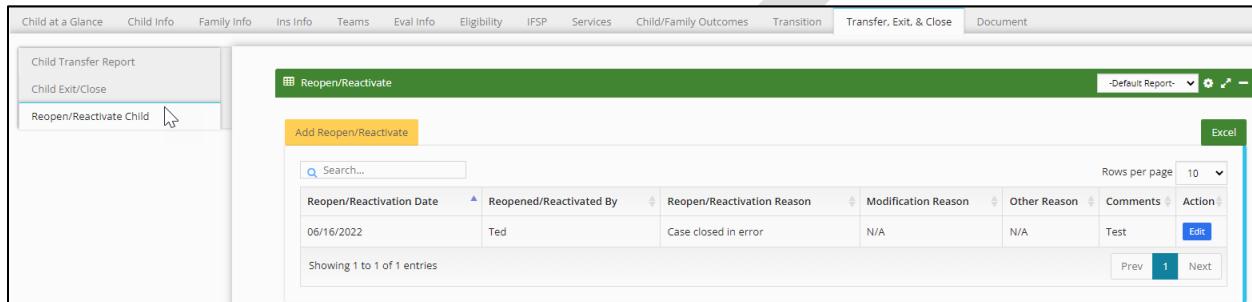
 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|--|--|
| *Exit Date | Manually enter the exit date or use the calendar picker (invoked by clicking this field). |
| *Exit Reason | Use this drop-down and select the appropriate exit reason for the child from the list. |
| Date Of Death | If the child has died, manually enter the deceased's date that the child passed or use the calendar picker (invoked by clicking this field) for the child. |
| Completed By | The system defaults and populates this field with the user's login name to access the EI-HUB Case Management Module. |
| *Was the child referred to At-Risk Developmental Surveillance? | Use this drop-down and select the appropriate answer ('Yes' or 'No'). |

| BUTTON | DESCRIPTION |
|--|--|
| Submit  | To save your entry, click this button. When clicked, the system keeps the information in the EI-HUB database, and the record updates the Child Exit/Close panel. |

8.1.8.4 Reopen/Reactivate Child Grid/Table

 This grid/table shows you a historical view of Reopen/Reactivate case by case.



| Reopen/Reactivation Date | Reopened/Reactivated By | Reopen/Reactivation Reason | Modification Reason | Other Reason | Comments | Action |
|--------------------------|-------------------------|----------------------------|---------------------|--------------|----------|----------------------|
| 06/16/2022 | Ted | Case closed in error | N/A | N/A | Test | Edit |

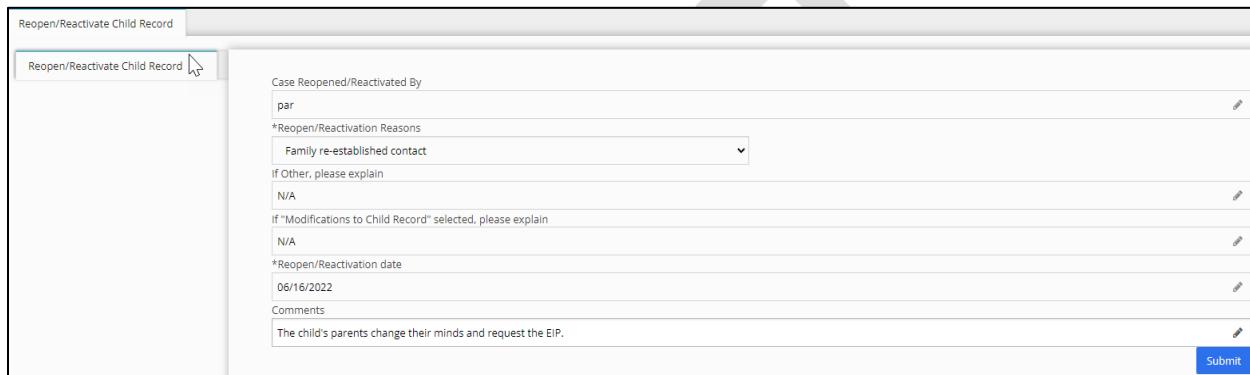
| COLUMN | DESCRIPTION |
|-------------------------------------|---|
| Reopen/Re-Activation date | This column displays the reopen/reactivated date for the child. |
| Reopened/Re-Activated By | This column displays the person's EI-Hub username reopening the case. |
| Reopen/Re-Activation Reasons | This column displays the reopened/reactivated reason for the child. |
| Modification Reason | This column displays the reason for reopening/reactivating the child's case. |
| Other Reason | If applicable, this column displays other reopened/reactivated reasons for the child. |
| Comments | If applicable, provide additional comments about the reopening/reactivating the child's case. |

| BUTTON | DESCRIPTION |
|---|--|
| Add Reopen/Reactivate  | Click this button to add 'Reopen/Reactivate' a child record. The Reopen/Reactivate Child Record tab/panel appears (shown below). |

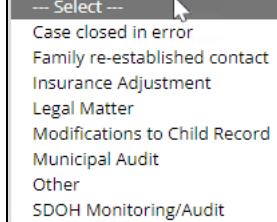
| BUTTON | DESCRIPTION |
|---|--|
| Edit  | Click this button adjacent to the appropriate record/row to edit a ‘Reopen/Reactivate’ child record. The Reopen/Reactivate Child Record tab/panel appears (shown below). |

8.1.8.4.1 Reopen/Reactivated Child Record Tab/Panel

 You can use this panel to reopen or reactivate a child’s case (e.g., the child’s case exited in error). The use of this panel is restricted to the following roles: EIO/DNY, MuniProgAllNY, and MuniDataEntryNY.



 An asterisk (*) adjacent to a field name/label means it is a required field you must populate.

| FIELD | DESCRIPTION |
|-------------------------------|---|
| Case Reopened/Re-Activated By | Enter the person’s EI-Hub username reopening the case.  The system defaults to the username logged into the EI-Hub system unless you edit an existing record. |
| *Reopen/Re-Activation Reasons | Use this drop-down and select the appropriate reason (e.g., case closed in error, etc.) from the list.  |

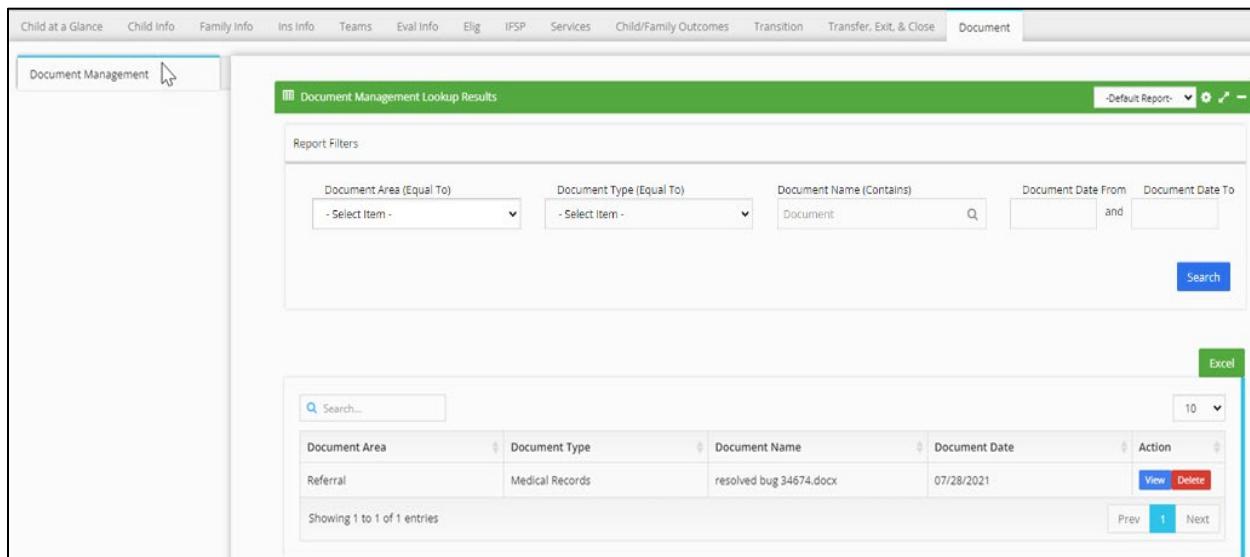
| FIELD | DESCRIPTION |
|---|--|
| If Other, please explain | If "Other" is chosen in the Reopen/Reactivation Reasons above, provide a brief explanation for the Reopen/Re-Activation. |
| If "Modifications to Child Record" selected, please explain | If a case record modification is required, enter a brief explanation. |
| *Reopen/Re-Activation date | Manually enter the reopen/re-activation date or use the calendar picker (invoked by clicking this field) for the case. |
| Comments | If applicable, provide additional comments about the Reopen/Re-Activation of the child's case. |

| BUTTON | DESCRIPTION |
|---|---|
| Submit <input type="button" value="Submit"/> | After filling out the Reopen/Reactivate Child Record Panel. When clicked, the system runs a validation (e.g., required fields populated), keeping the information in the EI-HUB database. |

8.1.9 Document Tab

8.1.9.1 Document Management Grid/Table

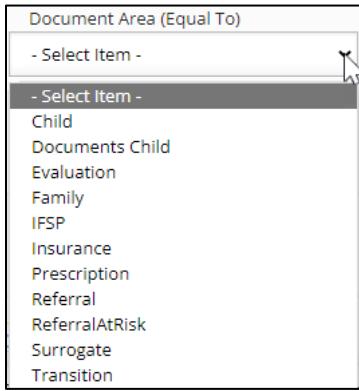
 There are different locations throughout the EI-Hub where you can upload documents. Using this grid/table, you can see a list of all documents here.

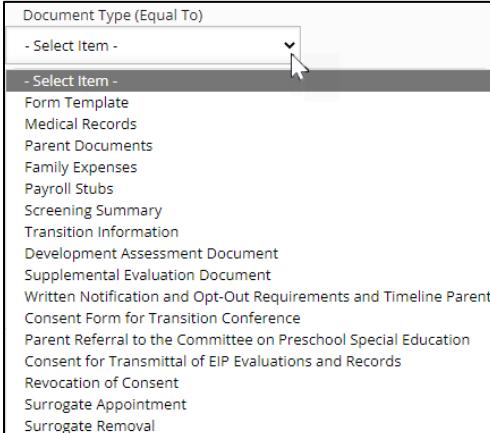


The screenshot shows the 'Document Management' section of the EI-Hub. At the top, there's a navigation bar with tabs like 'Child at a Glance', 'Child Info', 'Family Info', etc., followed by a 'Document' tab. Below the navigation is a search bar labeled 'Document Management'. Underneath is a 'Report Filters' section with dropdowns for 'Document Area (Equal To)' and 'Document Type (Equal To)', and fields for 'Document Name (Contains)' and 'Document Date From/To'. A 'Search' button is also present. The main area displays a table titled 'Document Management Lookup Results' with columns: Document Area, Document Type, Document Name, Document Date, and Action. One entry is shown: Referral, Medical Records, resolved bug 34674.docx, 07/28/2021, with 'View' and 'Delete' buttons. An 'Excel' export button is in the top right of the table area.

Document Management Lookup Report Filters

 Use the Report Filters section to narrow your search.

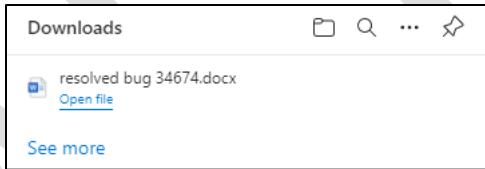
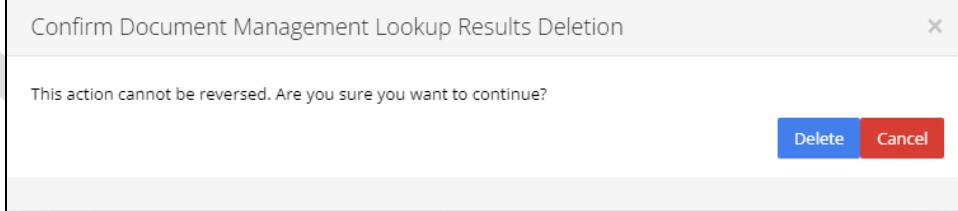
| FIELD | DESCRIPTION |
|--------------------------|---|
| Document Area (Equal To) | Use this drop-down and select the appropriate document area (e.g., Child or Family) or the child from the list.  |

| FIELD | DESCRIPTION |
|---------------------------------|---|
| Document Type (Equal To) | Use this drop-down and select the appropriate document type (e.g., Medical Records) or the child from the list.  |
| Document Name (Contains) | To search for a document name, begin to type a name for a document. If a document name is found, the type-ahead feature activates. Next, select the appropriate document name from the list. |
| Document Date From | Manually enter or click this field (invoke the calendar picker) and select the 'from' date (textbox) for the document date. |
| Document Date To | Manually enter or click this field (invoke the calendar picker) and select the 'to' date (textbox) and the to-date for the document date. |

| BUTTON | DESCRIPTION |
|--|---|
| Search  | To search on your report filter's selection, click this button. |

Document Management Lookup Results

| FIELD | DESCRIPTION |
|---|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

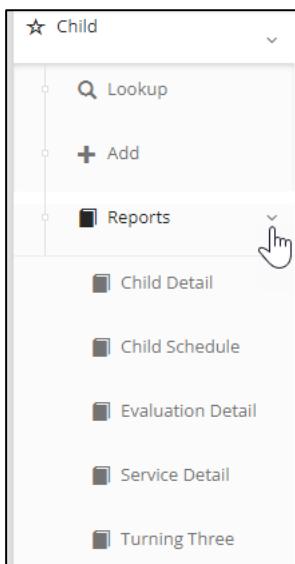
| BUTTON | DESCRIPTION |
|--|---|
| Excel  | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet.</p> <p>(i) Leaving all the Report Filters fields blank will show "all" results.</p> <p>(i) The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system.</p> |
| View  | <p>To view an existing document for a child, select/click this button adjacent to the appropriate record/row. When clicked, the system downloads the document file and prompts you with a 'Downloads' message box (MS Edge browser example below). You can click the Open file hyperlink or access this file in your 'Downloads' folder on your Windows OS.</p>  |
| Delete  | <p>A Superuser can delete an existing document for a child; select/click this button adjacent to the appropriate record/row. When clicked, the system prompts a confirmation message pad popup (shown below); click the Delete button to proceed or click the Cancel button to retract.</p>  <p>(i) Document Management is a shared process and impacts the Child, Therapist, and Provider functional areas.</p> |

| COLUMN | DESCRIPTION |
|---------------------------|--|
| Document Area | This column displays the document type/area name (e.g., Referral). |
| Document Type Name | This column displays the document type name. |

| COLUMN | DESCRIPTION |
|----------------------|--|
| Document Name | This column displays the document name. |
| Document Date | This column displays the document date. |
| Action | This column displays (if applicable) corresponding action buttons (e.g., Add, Edit, Delete, etc.). |

8.1.10 Reports

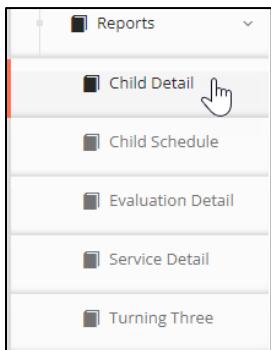
 The Reports section is a tool allowing for many individual reports for you to create to aid you in accomplishing many different goals. In addition, any report created can be exported to Excel for further manipulation and printing if necessary.



8.1.10.1 Child Detail Report Grid/Table



The Child Detail Report focuses on information reportable at a child-specific level. This report is considered a canned report in which users can see their children based on the access. For example, the service coordinator will only view their children. The county will only see children assigned to their county. The state user reports will include all children.



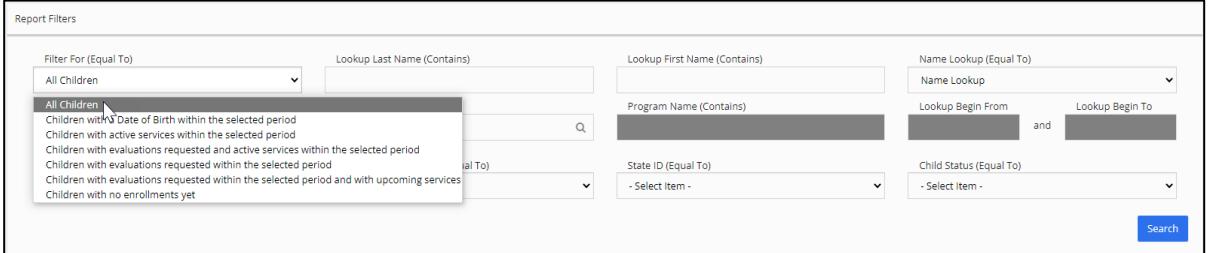
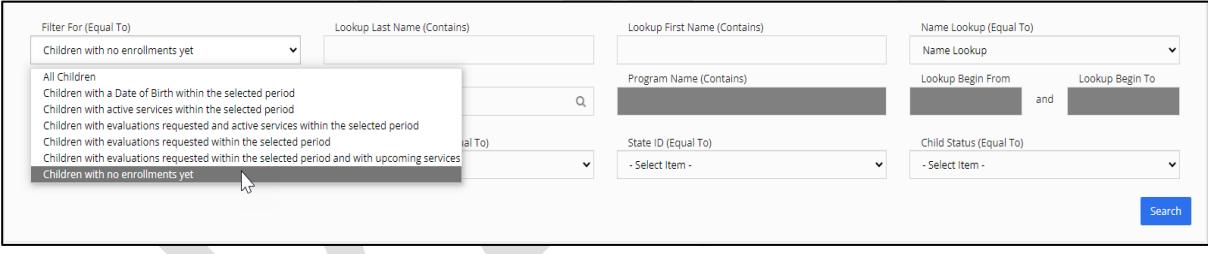
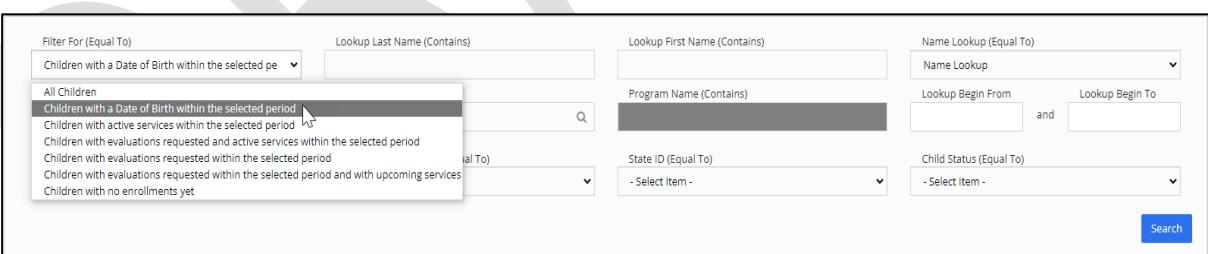
Child Detail Report Panel and Results Grid/Table

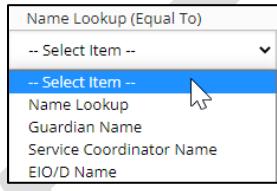
The screenshot shows the 'Child Detail Results' panel. It includes a 'Report Filters' section with dropdown menus for 'Filter For (Equal To)', 'El Child ID (Contains)', 'County (Equal To)', 'Lookup Last Name (Contains)', 'Company (Contains)', 'County of Residence ID (Equal To)', 'Program Name (Contains)', 'State ID (Equal To)', and 'Child Status (Equal To)'. Below the filters is a 'Search' button. The main area displays a grid of child records with columns for 'Child Last Name', 'Child First Name', 'DOB', 'Address', 'Guardian Address', 'Coordinator Address', 'City', 'Guardian City', 'Coordinator City', 'State', 'Guardian State', 'Coordinator State', 'Zip', 'Guardian Zip', 'Coordinator Zip', 'Guardian Salutation', 'Guardian Last Name', 'Guardian First Name', and 'Guardian Phone'. Two rows of data are visible: one for 'aaeAbba' and 'abfbbeebeTbT'.

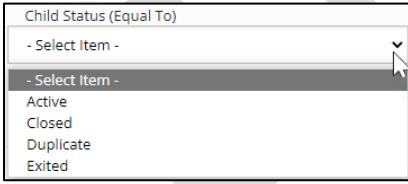
| Child Last Name | Child First Name | DOB | Address | Guardian Address | Coordinator Address | City | Guardian City | Coordinator City | State | Guardian State | Coordinator State | Zip | Guardian Zip | Coordinator Zip | Guardian Salutation | Guardian Last Name | Guardian First Name | Guardian Phone |
|-----------------|------------------|------------|---------------|--|---------------------|----------|---------------|------------------|-------|----------------|-------------------|------------|--------------|-----------------|---------------------|--------------------|---------------------|----------------|
| aaeAbba | HzbchFOfdfr | 05/01/2021 | 151 W 34TH ST | 151 W 34TH ST NEW YORK NY 10001-2101 | | NEW YORK | NEW YORK | | NY | NY | | 10001-2101 | 10001-2101 | | | lastname | testmother | |
| abfbbeebeTbT | VadAa | 06/01/2021 | 151 W 34TH ST | 2369 2ND AVE NEW YORK NY 10035-3108 | | NEW YORK | NEW YORK | | NY | NY | | 10001-2101 | 10035-3108 | | | lastname | testmother | |

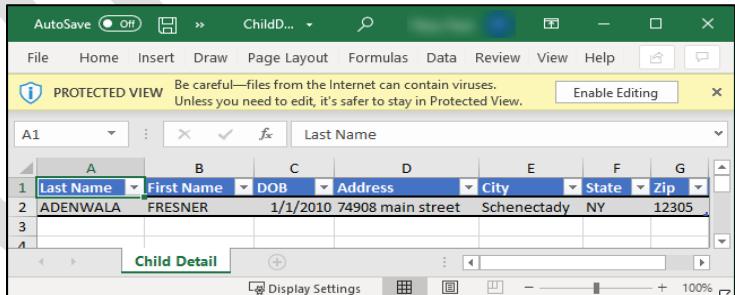
| FIELD | DESCRIPTION |
|--|--|
| -Default Report- <input checked="" type="checkbox"/> | <p>The “Default Report” is the system’s canned report. If your agency created a custom report for you to use, select/click the drop-down and select the appropriate report item from the list.</p> <p> Depending on the chosen custom report, the presentation will look different based on the design; hence, different results will transpire.</p> |

Gray/Disabled Report Filters

| FIELD | DESCRIPTION |
|---|--|
| Program Name (Contains) Lookup Begin From & Lookup Begin To | <p>The number of gray/disabled fields will vary dependent on the number of filters you choose.</p> <p>i The gray/disabled fields ('Program Name,' 'Lookup Begin From' and 'Lookup Begin To') are enabled based on your "Filter For (Equal To)" search parameters as follows:</p> <p style="text-align: center;">Three (3) Gray/Disabled Fields</p>  <p style="text-align: center;">One (1) Gray/Disabled Fields</p>  <p style="text-align: center;">All Fields Enabled</p>  |

| FIELD | DESCRIPTION |
|-------------------------------------|---|
| Lookup Last Name (Contains) | Enter the last name of the child for your keyword search. |
| Lookup First Name (Contains) | Enter the first name of the child for your keyword search. |
| Name Lookup (Equals To) | Select this drop-down field and select the appropriate item from the list.  |
| EI Child ID (Contains) | Enter the early intervention (EI) child identification for your keyword search. |
| Company (Contains) | Enter the company name or begin typing (type-ahead) and select it from the drop-down list (example below) for your keyword search.  |
| Program Name (Contains) | Enter the program name for your keyword search. (i) Please refer to the "Program Name Filter, Lookup Begin From & Begin To" section (above) to reference when this field is enabled. |
| Lookup Begin From | To narrow your search, manually enter the 'from' date or use the calendar picker (invoked by clicking this field). (i) Please refer to the "Program Name Filter, Lookup Begin From & Begin To" section (above) to reference when this field is enabled. |
| Lookup Begin To | To narrow your search, manually enter the 'to' date or use the calendar picker (invoked by clicking this field). (i) Please refer to the "Program Name Filter, Lookup Begin From & Begin To" section (above) to reference when this field is enabled. |

| FIELD | DESCRIPTION |
|-----------------------------------|--|
| County (Equal To) | Use this drop-down menu and select the appropriate county from the list. |
| County of Residence ID (Equal To) | Use this drop-down menu to search for a county (e.g., Albany) of residence and select the appropriate county from the list. |
| State ID (Equal To) | Use this drop-down menu and select the appropriate state abbreviation (e.g., NY) from the list. |
| Child Status (Equal To) | Use this drop-down and select the appropriate status (e.g., Active) from the list.  |

| BUTTON | DESCRIPTION |
|--|--|
| Excel  | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet. An example of the Message popup from the MS Edge browser (shown below):</p>  <p>To see your results in excel, click Open (example below).</p>  <p>ⓘ Leaving all the Report Filters fields blank will show "all" results.</p> <p>ⓘ The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system.</p> |

| BUTTON | DESCRIPTION |
|---|--|
| Search  Search | <p>Based on your criteria entered in the Report Filters fields above, click this button for the system to generate your results (example below).</p> <p> Leaving all the Report Filters fields blank will show "all" results.</p> |

Results Grid/Table

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |



Screenshot example below for 'Filter For' = All Children' and 'Child Status' = Closed.

| Report Grid Example | | | | | | | | | | | | | | | | | | | Rows per page | 10 | ▼ |
|---------------------|-----------------|------------------|------------|---------------------|---|---------------------|----------|---------------|------------------|-------|----------------|-------------------|------------|--------------|-----------------|---------------------|--------------------|---------------------|---------------|----|---|
| Child ID | Child Last Name | Child First Name | DOB | Address | Guardian Address | Coordinator Address | City | Guardian City | Coordinator City | State | Guardian State | Coordinator State | Zip | Guardian Zip | Coordinator Zip | Guardian Salutation | Guardian Last Name | Guardian First Name | Gua Pho | | |
| 64 | Best | George | 11/09/2020 | 23 NEW SCOTLAND AVE | 23 NEW SCOTLAND AVE ALBANY NY 12208-3528 | | ALBANY | ALBANY | | NY | NY | | 12208-3528 | 12208-3528 | | | Best | Vivienne | (518 163) | | |
| 1428 | bfbcTcPT | abUdLfdAKL | 11/01/2021 | 151 W 34TH ST | 151 W 34TH ST NEW YORK NY 10001-2101 | 409 NEW KARNER RD | NEW YORK | NEW YORK | ALBANY | NY | NY | NY | 10001-2101 | 10001-2101 | 12205-3855 | | lastname | testmother | (254 253) | | |



See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| COLUMN | DESCRIPTION |
|-------------------------|--|
| Child ID | This column displays the child's early intervention identification number. |
| Child Last Name | This column displays the last name of the child. |
| Child First Name | This column displays the first name of the child |
| DOB | This column displays the date of birth (DOB) of the child. |
| Address | This column displays the home address where the child resides. |

| COLUMN | DESCRIPTION |
|----------------------------|---|
| Guardian Address | This column displays the child's guardian's address. |
| Coordinator Address | This field is not applicable. |
| City | This column displays the city where the child resides. |
| Guardian City | This column displays the city where the child's guardian resides. |
| Coordinator City | This column displays the city where the child's coordinator resides. |
| State | This column displays the state where the child resides. |
| Guardian State | This column displays the state where the child's guardian resides. |
| Coordinator State | This column displays the state where the child's coordinator resides. |
| Zip | This column displays the zip code where the child resides. |
| Guardian Zip | This column displays the zip code where the child's guardian resides. |
| Coordinator Zip | This column displays the zip code where the child's coordinator resides. |
| Guardian Salutation | This column displays the child's guardian's salutation ("Dr.," "Mr.," "Ms.," "Mrs.," and "Miss"). |
| Guardian Last Name | This column displays the child's guardian's last name. |
| Guardian First Name | This column displays the child's guardian's first name. |
| Guardian Phone | This column displays the child's guardian's phone number. |
| Discharge Date | This column displays the child's discharge date from the birthing hospital. |
| Discharge Reason | This column displays the child's discharge reason from the birthing hospital. |

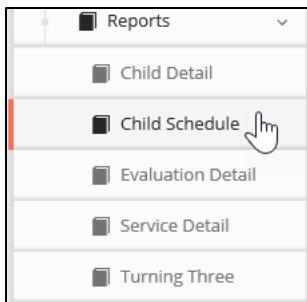
| COLUMN | DESCRIPTION |
|------------------------------------|--|
| EIOD First Name | This column displays the child's Early Intervention Official Designee's (EIO/D) last name. |
| EIOD Last Name | This column displays the child's EIO/D's first name. |
| EIP Number | This column displays the child's Early Intervention Program (EIP) Number. |
| Student ID Number | This column displays the equivalent Child ID number. |
| Eligibility Status | This column displays the child's eligibility status. |
| Gender | This column displays the child's gender. |
| Medicaid Number | This column displays the child's Medicaid number. |
| Coordinator Last Name | This field is not applicable |
| Coordinator First Name | This field is not applicable |
| Current IFSP Start Date | This column displays the current IFSP start date for the child. |
| Date Of Initial Services | This column displays the date of the initial services that started for the child. |
| ICD10 Code List | This column displays the affiliated ICD10 codes for the services provided for the child. |
| Service List | This column displays the list of services provided for the child. |
| Primary Therapists Assigned | This column displays the list of therapists assigned to the child. |
| Medical Alert Count | If applicable, this column displays the medical alert count, a system that provides emergency monitoring in and out of the child's home. |
| Last Enrollment End Date | This column displays the child's last enrollment date. |

| COLUMN | DESCRIPTION |
|----------------------------------|--|
| Last Activity Log Effective Date | This column displays the last activity log effective date for the child. |
| Last Activity Log Date | This column displays the last date of an activity log for the child. |
| Referral Date | This column displays the child's referral date. |
| Child Age | This column displays the child's age. |
| Primary Language | This column displays the child's primary language. |
| County Of Residence | This column displays the child's county of residence. |
| Current IFSP End Date | This column displays the child's current IFSP end date. |
| Current IFSP Status | This column displays the child's current IFSP status. |
| Current IFSP Type | This column displays the child's current IFSP type. |

8.1.10.2 Child Schedule Report Grid/Table

 Home / [Child Reports](#) / [Child Schedule](#)

 The Child Schedule Report focuses on information reportable at a schedule-specific level. For example, you could use reports from the Child Schedule screen to find a list of children who receive services on a particular day of the week or look at the schedules for children receiving services from a specific location. Also, a therapist can print the Child's Schedule information from a therapist's perspective.



Child Schedule Report Filters Panel and Results Grid/Table

Child Schedule

-Default Report:

Report Filters

| | | | |
|---------------------------------|-------------------------------|--|---|
| Child Last Name (Contains) | Child First Name (Contains) | Service From Date (Greater Than or Equal To) | Service To Date (Less Than or Equal To) |
| Allman | | | |
| Location Description (Contains) | Office Description (Contains) | Therapist Last Name (Contains) | Therapist First Name (Contains) |
| | | | |

Rows per page: 10

| Available | Day Of The Week | Duration | From Date | To Date | Start Time | Text | Child Last Name | Child First Name | Authorization Information | Service From Date | Service To Date | Location Description | Therapist Last Name | Therapist First Name |
|----------------------------|-----------------|----------|-----------|---------|------------|------|-----------------|------------------|---------------------------|-------------------|-----------------|----------------------|---------------------|----------------------|
| No data available in table | | | | | | | | | | | | | | |

Showing 0 to 0 of 0 entries

| FIELD | DESCRIPTION |
|---|--|
| -Default Report- <input type="button" value="▼"/> | <p>The “Default Report” is the system’s canned report. If your agency created a custom report for you to use, select/click the drop-down and select the appropriate report item from the list.</p> <p>(i) Depending on the chosen custom report, the presentation will look different based on the design; hence, different results will transpire.</p> |

Report Filters Group

| FIELD | DESCRIPTION |
|-----------------------------|--|
| Child Last Name (Contains) | Enter the last name of the child for your keyword search. |
| Child First Name (Contains) | Enter the first name of the child for your keyword search. |

| FIELD | DESCRIPTION |
|---|---|
| Service From Date (Greater Than or Equal To) | Enter or click this field (invoke the calendar picker) and select the service date. |
| Service To Date (Less Than or Equal To) | Enter or click this field (invoke the calendar picker) and select the service date. |
| Location Description (Contains) | Enter the location (e.g., home or school) the therapist visits the child. |
| Office Description (Contains) | Enter the office description where the therapist works. |
| Therapist Last Name (Contains) | Enter the last name of the child's therapist for your keyword search. |
| Therapist First Name (Contains) | Enter the first name of the child's therapist for your keyword search. |

| BUTTON | DESCRIPTION |
|--|---|
| Excel  | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet. An example of the Message popup from the MS Edge browser (shown below):</p>  <p>To see your results in excel, click Open.</p> <p>i Leaving all the Report Filters fields blank will show "all" results.</p> <p>i The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the El-Hub system.</p> |
| Filter  | <p>Based on your criteria entered in the Report Filters fields above, click this button for the system to generate your results (example below).</p> <p>i Leaving all the Report Filters fields blank will show "all" results.</p> |

Results Grid/Table

| Search... | | | | | | | | | | | | | | | 10 | | |
|-----------|-----------------|----------|------------|------------|------------|---------------|-----------------|------------------|---------------------------|-------------------|-----------------|----------------------|---------------------|----------------------|---------------|--|--|
| Available | Day Of The Week | Duration | From Date | To Date | Start Time | Text | Child Last Name | Child First Name | Authorization Information | Service From Date | Service To Date | Location Description | Therapist Last Name | Therapist First Name | | | |
| False | Friday | 30 | 06/03/2019 | 12/03/2019 | 540 | | Weis | Chris | | 06/03/2019 | 12/03/2019 | | WEBB | GAVIN MATHEW | | | |
| False | Monday | 30 | 06/03/2019 | 12/03/2019 | 540 | | Weis | Chris | | 06/03/2019 | 12/03/2019 | | WEBB | GAVIN MATHEW | | | |
| False | Tuesday | 30 | 06/03/2019 | 12/03/2019 | 540 | | Weis | Chris | | 06/03/2019 | 12/03/2019 | | WEBB | GAVIN MATHEW | | | |
| False | Wednesday | 30 | 06/03/2019 | 12/03/2019 | 540 | | Weis | Chris | | 06/03/2019 | 12/03/2019 | | WEBB | GAVIN MATHEW | | | |
| False | Tuesday | 1 | | | 1 | Test Schedule | CATALAN | JEAN PAUL | | | 07/11/2018 | 10/11/2018 | HOME/SCHOOL | CULLER | VICTOR MANUEL | | |

Showing 1 to 5 of 5 entries

Prev 1 Next

 See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|---------------------------|---|
| Available | This column displays True or False if the child's service is available. |
| Day Of The Week | This column displays the day of the week when the child's therapist visits. |
| Duration | This column displays the duration (e.g., 30 minutes) of the child's therapist visit to occur. |
| From Date | This column displays the date when the scheduled therapist session for the child starts. |
| To Date | This column displays the date when the scheduled therapist session for the child ends. |
| Start Time | This column displays the time when the scheduled therapist sessions for the child. |
| Text | This column displays any notes about the child's scheduled sessions. |
| Child Last Name | This column displays the last name of the child. |
| Child First Name | This column displays the first name of the child |
| Authorization Information | This column displays any authorization info concerning the child's scheduled sessions. |

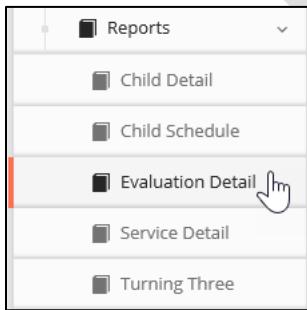
| COLUMN | DESCRIPTION |
|-----------------------------|---|
| Service From Date | This column displays the date when the child's scheduled service(s) begins. |
| Service To Date | This column displays the date when the child's scheduled service(s) ends. |
| Location Description | This column displays the therapist's location to meet (e.g., home or school) the child. |
| Therapist Last Name | This column displays the last name of the child's therapist for your keyword search. |
| Therapist First Name | This column displays the first name of the child's therapist for your keyword search. |

8.1.10.3 Evaluation Detail Report Grid/Table

 [Home](#) / [Child Reports](#) / [Evaluation Detail](#)

 The Enrollment Evaluation Detail Report focuses on information reportable at an evaluation enrollment-specific level. For example, finding a list of requested evaluations or viewing evaluations performed during a specified period would be an excellent use of this grid/table.

Enrollment is the same as a service authorization (SA); you can run a report for all SAs for all evaluations.



Evaluation Detail Report Filters Panel and Results Grid/Table

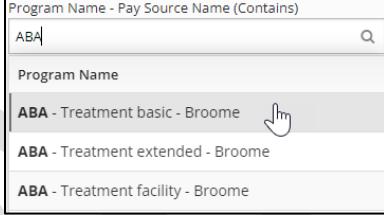
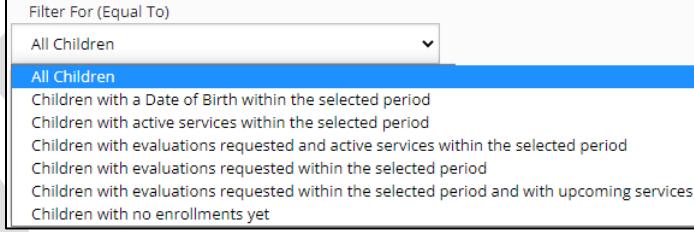
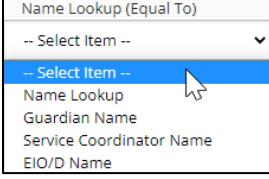
The screenshot displays the 'Evaluation Detail Results' interface. At the top, there's a 'Report Filters' section with several input fields and dropdown menus for filtering data. Below this is a large table grid showing evaluation details. The grid has columns for various demographic and administrative fields. A green 'Excel' button is located in the top right corner of the grid area. The bottom of the grid shows pagination information.

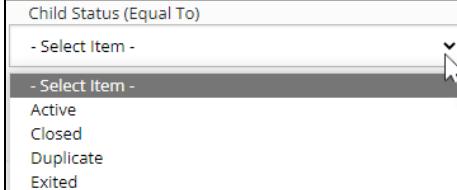
| FIELD | DESCRIPTION |
|--------------------|--|
| -Default Report- ▾ | <p>The “Default Report” is the system’s canned report. If your agency created a custom report for you to use, select/click the drop-down and select the appropriate report item from the list.</p> <p>i Depending on the chosen custom report, the presentation will look different based on the design; hence, different results will transpire.</p> |

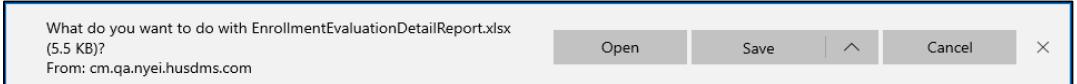
Gray/Disabled Report Filters

| FIELD | DESCRIPTION |
|---|---|
| Lookup Begin From & Lookup Begin To | <p>The functionality for the two gray/disabled fields works as follows.</p> <p>i The gray/disabled fields ('Lookup Begin From' and 'Lookup Begin To') are enabled based on your "Filter For (Equal To)" search parameters as follows:</p> <p style="text-align: center;">Two (2) Gray/Disabled Fields</p> |

| FIELD | DESCRIPTION |
|--|--|
| | <p>Report Filters</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Lookup First Name (Contains)</p> <input type="text"/> </div> <div style="width: 45%;"> <p>Lookup Last Name (Contains)</p> <input type="text"/> </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Program Name - Pay Source Name (Contains)</p> <input type="text" value="Program"/> 🔍 </div> <div style="width: 45%;"> <p>Filter For (Equal To)</p> <div style="border: 1px solid #ccc; padding: 2px; width: fit-content;"> All Children </div> </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Lookup Begin From</p> <input type="text"/> </div> <div style="width: 45%;"> <p>Lookup Begin To</p> <input type="text"/> </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>State ID (Equal To)</p> <div style="border: 1px solid #ccc; padding: 2px; width: fit-content;"> - Select Item - </div> </div> <div style="width: 45%;"> <p>Child Status (Equal To)</p> <div style="border: 1px solid #ccc; padding: 2px; width: fit-content;"> - Select Item - </div> </div> </div> |
| | <p>Report Filters</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Lookup First Name (Contains)</p> <input type="text"/> </div> <div style="width: 45%;"> <p>Lookup Last Name (Contains)</p> <input type="text"/> </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Program Name - Pay Source Name (Contains)</p> <input type="text" value="Program"/> 🔍 </div> <div style="width: 45%;"> <p>Filter For (Equal To)</p> <div style="border: 1px solid #ccc; padding: 2px; width: fit-content;"> Children with no enrollments yet </div> </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Lookup Begin From</p> <input type="text"/> </div> <div style="width: 45%;"> <p>Lookup Begin To</p> <input type="text"/> </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>State ID (Equal To)</p> <div style="border: 1px solid #ccc; padding: 2px; width: fit-content;"> - Select Item - </div> </div> <div style="width: 45%;"> <p>Child Status (Equal To)</p> <div style="border: 1px solid #ccc; padding: 2px; width: fit-content;"> - Select Item - </div> </div> </div> |
| Two (2) Fields Enabled | |
| <p>i The following items selected from the Filter For (Equal To) list enable the Lookup 'Begin From' and 'Begin To' fields:</p> <div style="border: 1px solid #ccc; padding: 5px; background-color: #f9f9f9;"> Children with a Date of Birth within the selected period Children with active services within the selected period Children with evaluations requested and active services within the selected period Children with evaluations requested within the selected period Children with evaluations requested within the selected period and with upcoming services Children with no enrollments yet </div> | |
| | <p>Report Filters</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Lookup First Name (Contains)</p> <input type="text"/> </div> <div style="width: 45%;"> <p>Lookup Last Name (Contains)</p> <input type="text"/> </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Program Name - Pay Source Name (Contains)</p> <input type="text" value="Program"/> 🔍 </div> <div style="width: 45%;"> <p>Filter For (Equal To)</p> <div style="border: 1px solid #ccc; padding: 2px; width: fit-content;"> Children with a Date of Birth within the selected pe </div> </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%; border: 2px solid red; padding: 2px;"> <p>Lookup Begin From</p> <input type="text"/> </div> <div style="width: 45%; border: 2px solid red; padding: 2px;"> <p>Lookup Begin To</p> <input type="text"/> </div> </div> |

| FIELD | DESCRIPTION |
|--|---|
| Lookup First Name (Contains) | Enter the first name of the child for your keyword search. |
| Lookup Last Name (Contains) | Enter the last name of the child for your keyword search. |
| Office (Contains) | Enter the name of the office or location where the enrollment evaluation occurs. |
| Pay Source ID (Equal To) | Use this drop-down and select the appropriate pay source/county from the list. |
| Program Name - Pay Source Name (Contains) | Enter the program name or begin typing (type-ahead) and select the program and county from the drop-down list (example below) for your keyword search.  |
| Filter For (Equal To) | Select/click this drop-down and select the appropriate item (example below) from the list.  |
| Name Lookup (Equals To) | Select/click this drop-down field and select the appropriate item from the list.  |

| FIELD | DESCRIPTION |
|-----------------------------------|---|
| Company (Contains) | Enter the company name or begin typing (type-ahead) and select it from the drop-down list (example below) for your keyword search.  |
| Lookup Begin From | To narrow your search, manually enter the 'from' date or use the calendar picker (invoked by clicking this field). (i) Please refer to the "Program Name Filter, Lookup Begin From & Begin To" section (above) to reference when this field is enabled. |
| Lookup Begin To | To narrow your search, manually enter the 'to' date or use the calendar picker (invoked by clicking this field). (i) Please refer to the "Program Name Filter, Lookup Begin From & Begin To" section (above) to reference when this field is enabled. |
| County (Equal To) | Use this drop-down menu and select the appropriate county from the list. |
| County of Residence ID (Equal To) | Use this drop-down menu to search for a county (e.g., Albany) of residence and select the appropriate county from the list. |
| State ID (Equal To) | Use this drop-down menu and select the appropriate state abbreviation (e.g., NY) from the list. |
| Child Status (Equal To) | Use this drop-down and select the appropriate status (e.g., Active) from the list.  |
| EI Child ID (Contains) | Enter the early intervention (EI) child identification for your keyword search. |

| BUTTON | DESCRIPTION |
|--|---|
| Excel  | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet. An example of the Message popup from the MS Edge browser (shown below):</p>  <p>To see your results in excel, click Open.</p> <p>i Leaving all the Report Filters fields blank will show "all" results.</p> <p>i The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the El-Hub system.</p> |
| Search  | <p>Based on your criteria entered in the Report Filters fields above, click this button for the system to generate your results (example below).</p> <p>i Leaving all the Report Filters fields blank will show "all" results.</p> |

Results Grid/Table

i To view all columns, use the horizontal scroll bar on the bottom of your screen and scroll to the right.

| Results Grid/Table | | | | | | | | | | | | | | | | | | | Rows per page | 10 | ▼ |
|--------------------|-------------------|---------------------------|-----------|--------------|----------------|---------------------|------------|-------------|------------|---------------------|------------------------|-----------------------|-------------------|-------------|--------------------|----------------|----------------|------------|-----------------|---------------|---|
| Amount Billed | Attendance Posted | Authorization Information | Bilingual | Billing Rate | BOE Student ID | Child Address | Child City | Child State | Child Zip | Coordinator Company | Coordinator First Name | Coordinator Last Name | Current IFSP Date | Date Billed | Date Of Evaluation | Discharge Code | Discharge Date | DOB | EIOD First Name | EIC Last Name | |
| | | | False | 376.0000 | | 151 W 34TH ST | NEW YORK | NY | 10001-2101 | | | | | | | | | 10/01/2021 | | | |
| | A9071597 | | False | 178.0000 | | 23 NEW SCOTLAND AVE | ALBANY | NY | 12208-3528 | | | | | | | | | 07/11/2021 | | | |
| | A9071597 | | False | 178.0000 | | 23 NEW SCOTLAND AVE | ALBANY | NY | 12208-3528 | | | | | | | | | 07/11/2021 | | | |

i See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|---|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|----------------------------------|--|
| Amount Billed | This column displays the amount billed for the evaluation provided. |
| Attendance Posted | This column displays the attendance date posted. |
| Authorization Information | This column displays information for the authorization. |
| Bilingual | This column displays if the evaluator is bilingual ('True' or 'False'). |
| Billing Rate | This column displays the billing for the evaluation provided. |
| BOE Student ID | This column displays the child's Board of Education (BOE) student identification number. |
| Child Address | This column displays the child's address. |
| Child City | This column displays the child's city. |
| Child State | This column displays the child's state. |
| Child Zip | This column displays the child's zip code. |
| Coordinator Company | This column displays the coordinator's company name. |
| Coordinator First Name | This column displays the coordinator's first name. |
| Coordinator Last Name | This column displays the coordinator's last name. |
| Current IFSP Date | This column displays the current IFSP date. |
| Date Billed | This column displays the date billed for the child's evaluation. |
| Date Of Evaluation | This column displays the date of the child's evaluation. |
| Discharge Code | This column displays the discharge code. |
| Discharge Date | This column displays the child's discharge date |
| DOB | This column displays the child's date of birth (DOB). |
| EIOD First Name | This column displays the Early Intervention Official Designee (EIOD) first name. |

| COLUMN | DESCRIPTION |
|----------------------------------|---|
| EIOD Last Name | This column displays the last name of the Early Intervention Official Designee (EIOD). |
| EIP Number | This column displays the child's early intervention program (EIP) number. |
| Eligible For Services | This column displays if the child is eligible for services ('True' or 'False'). |
| Enrollment Rate | This column displays the child's enrollment rate. |
| Eval Created Date | This column displays the date created for the child's evaluation. |
| Eval End Time | This column displays the end date for the child's evaluation. |
| Eval Paid Date | This column displays the date paid for the child's evaluation. |
| Eval Resolution Code | This column displays the evaluation resolution code used for the child. |
| Eval Resolution Code Description | This column displays the evaluation resolution code description. |
| Eval Start Time | This column displays the evaluation start time for the child's evaluation. |
| Eval Submitted Date | This column displays the evaluation date submitted for the child's evaluation. |
| Lookup First Name | This column displays the child's first name. |
| Middle Initial | This column displays the child's middle initial. |
| Lookup Last Name | This column displays the child's last name. |
| Location Description | This column displays the location where the child's evaluation took place. |
| Meeting Date | This column displays the meeting date for the child's evaluation. |
| Meeting Payment Amount | This column displays the meeting payment amount. |
| Meeting Time | This column displays the meeting time for the child's evaluation. |
| Notes | If applicable, this column displays relevant notes about the child's enrollment evaluation. |

| COLUMN | DESCRIPTION |
|---------------------------------------|---|
| NYEIS Reference Number | This column displays the NYEIS (predecessor system) enrollment evaluation reference number. |
| Office | This column displays the name of the billing office. |
| Outreach Code | This column displays the outreach code, if applicable, for the child. |
| Outreach Description | This column displays the outreach description, if applicable, for the child. |
| Pay Source Code | This column displays the pay source code used for the child's evaluation. |
| Pay Source ID | This column displays the pay source identification number used for the child's evaluation. |
| Program Name – Pay Source Name | This column displays the program name/pay source name. |
| Pay Source Program Code | This column displays the pay source program code used for the child's evaluation. |
| Phone Number | This column displays the billing office phone number. |
| Primary Language | This column displays the primary language used during the child's evaluation. |
| Primary Secondary Service | This column displays the primary-secondary services for the child (if applicable). |
| Program Name | This column displays the program name. |
| Recruiter First Name | This column displays the recruiter's first name. |
| Recruiter Last Name | This column displays the recruiter's last name. |
| Referring Physician First Name | This column displays the referring physician's first name. |
| Referring Physician Last Name | This column displays the referring physician's last name. |
| Request Received Date | This column displays the referring request received to date. |

| COLUMN | DESCRIPTION |
|--------------------------------------|---|
| Resulting Service Date | This column displays the resulting service date. |
| Resulting Services | This column displays the resulting services. |
| Service Type Code | This column displays the service type code. |
| STAC Received Date | This column displays the 'System to Track and Account for Children (STAC)' received date. |
| Student ID Number | This column displays the equivalent Child ID number. |
| Supplemental | This column displays if an additional supplemental or core evaluation of the child is necessary. |
| Therapist Active | This column displays the therapist's activity (True or False). |
| Therapist Billing Rate | This column displays the therapist's billing rate (e.g., per hour/session). |
| Therapist Billing Rate Source | This column displays the therapist's billing rate source. |
| Therapist Confirmed | This column displays the therapist's confirmation ('True' or 'False'). |
| Therapist Confirmed Date | This column displays the therapist's confirmed date. |
| Therapist First Name | This column displays the therapist's first name. |
| Therapist Flat Or Prorate | This column displays the therapist's billing type, 'Flat' (flat fee) or 'Prorate' (prorated fee). |
| Therapist Last Name | This column displays the therapist's last name. |
| Therapist Paid Date | This column displays the date the therapist was paid. |
| Type Code | This column displays the type of code used. |
| Voucher Number | This column displays the voucher/waiver number. |

| COLUMN | DESCRIPTION |
|-------------|--|
| El Child ID | This column displays the child's early intervention identification number. |
| Sex | This column displays the child's sex (gender). |

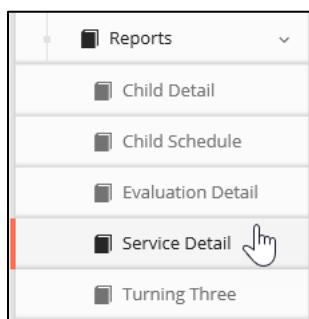
DRAFT

8.1.10.4 Service Detail Report Grid/Table



The Service Detail Report focuses on information reportable at a service enrollment-specific level. For example, you could create a report to view a list of children with details of the services they are receiving or gather counts of how many services are performed with a given service type during a specific period.

This report is like the Enrollment Evaluation Detail Report; however, the Enrollment Service Detail Report is for the general services; services authorization through the IFSP.



Enrollment Service Report Filters Panel and Results Grid/Table

The screenshot shows the 'Enrollment Service Detail Results' report interface. At the top, there is a 'Report Filters' panel containing various search and filter fields:

- Filter For (Equal To): All Children
- Lookup Last Name (Contains): Company
- Lookup First Name (Contains): Program Name Filter (Contains)
- Name Lookup (Equal To): Name Lookup
- Lookup Begin From: State ID (Equal To)
- Lookup Begin To: Child Status (Equal To)
- County (Equal To): - Select Item -
- County of Residence ID (Equal To): - Select Item -

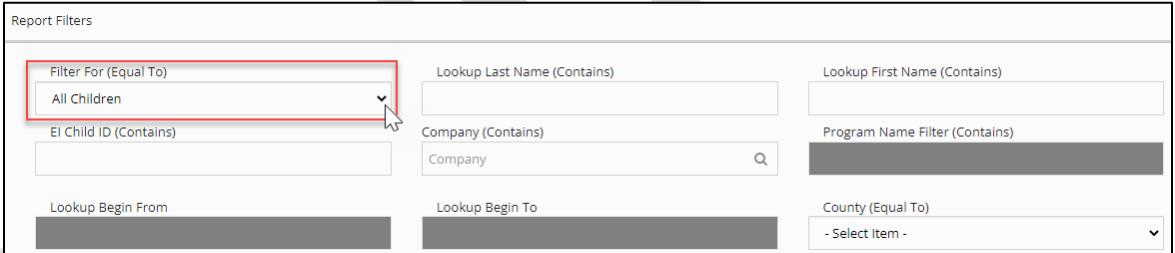
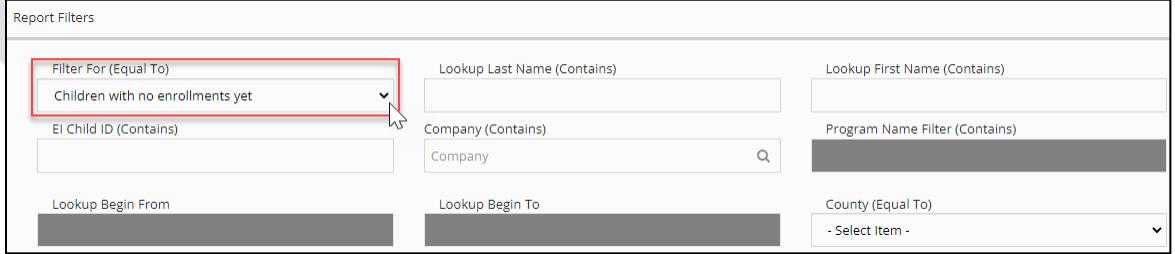
Below the filters is a 'Search' button. The main area displays a grid of results with the following columns:

| Eligibility Status | Last Name | First Name | DOB | Child ID | Child Address | Child City | Child State | Child Zip | Child Sex | Last Physical Exam Date | Child Discharge Code | Child Discharge Date | Catchment Code | Child Discharge Notes | Next Review Date | Current IFSP Date | Initial Service Date | Initial Eval Date | Student ID Number | BOE Student ID | Medicaid Number | EIP Number | Ethnicity | Other |
|----------------------------|-----------|------------|-----|----------|---------------|------------|-------------|-----------|-----------|-------------------------|----------------------|----------------------|----------------|-----------------------|------------------|-------------------|----------------------|-------------------|-------------------|----------------|-----------------|------------|-----------|-------|
| No data available in table | | | | | | | | | | | | | | | | | | | | | | | | |

At the bottom, it says 'Showing 0 to 0 of 0 entries'. There are 'Prev' and 'Next' buttons, and an 'Excel' export button.

| FIELD | DESCRIPTION |
|------------------|--|
| -Default Report- | <p>The “Default Report” is the system’s canned report. If your agency created a custom report for you to use, select/click the drop-down and select the appropriate report item from the list.</p> <p>i Depending on the chosen custom report, the presentation will look different based on the design; hence, different results will transpire.</p> |

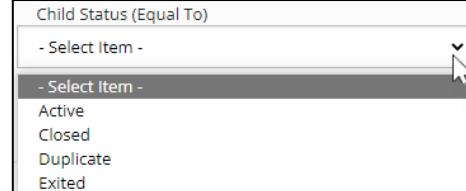
Gray/Disabled Report Filters

| FIELD | DESCRIPTION |
|--|---|
| Program Name Filter (Contains), Lookup Begin From & Lookup Begin To | <p>The functionality for the two gray/disabled fields works as follows.</p> <p>i The gray/disabled fields ('Program Name,' 'Lookup Begin From' and 'Lookup Begin To') are enabled based on your “Filter For (Equal To)” search parameters as follows:</p> <p style="text-align: center;">Three (3) Gray/Disabled Fields</p>  <p style="text-align: center;">One (1) Gray/Disabled Fields</p>  |

| FIELD | DESCRIPTION |
|-------|---|
| | <p style="text-align: center;">All Fields Enabled</p> <div style="border: 1px solid #ccc; padding: 10px;"> <p>Report Filters</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <div style="border: 1px solid red; padding: 2px;">Filter For (Equal To)</div> <ul style="list-style-type: none"> Children with active services within the selected period Children with evaluations requested and active services within the selected period Children with evaluations requested within the selected period Children with evaluations requested within the selected period and with upcoming services </div> <div style="width: 45%;"> <div style="border: 1px solid #ccc; padding: 2px;">Lookup Last Name (Contains)</div> <input type="text"/> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 30%;"> <div style="border: 1px solid #ccc; padding: 2px;">Company (Contains)</div> <input type="text"/> </div> <div style="width: 30%;"> <div style="border: 1px solid #ccc; padding: 2px;">Program Name Filter (Contains)</div> <input type="text"/> </div> <div style="width: 30%;"> <div style="border: 1px solid #ccc; padding: 2px;">County (Equal To)</div> <input type="text"/> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 30%;"> <div style="border: 1px solid #ccc; padding: 2px;">Company</div> <input type="text"/> </div> <div style="width: 30%;"> <div style="border: 1px solid #ccc; padding: 2px;">Program Name</div> <input type="text"/> </div> <div style="width: 30%;"> <div style="border: 1px solid #ccc; padding: 2px;">County</div> <input type="text"/> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 30%;"> <div style="border: 1px solid #ccc; padding: 2px;">Lookup Begin From</div> <input type="text"/> </div> <div style="width: 30%;"> <div style="border: 1px solid #ccc; padding: 2px;">Lookup Begin To</div> <input type="text"/> </div> <div style="width: 30%;"> <div style="border: 1px solid #ccc; padding: 2px;">County</div> <input type="text"/> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 30%;"> <div style="border: 1px solid #ccc; padding: 2px;">- Select Item -</div> <input type="button" value="Select Item"/> </div> <div style="width: 30%;"> <div style="border: 1px solid #ccc; padding: 2px;">- Select Item -</div> <input type="button" value="Select Item"/> </div> <div style="width: 30%;"> <div style="border: 1px solid #ccc; padding: 2px;">- Select Item -</div> <input type="button" value="Select Item"/> </div> </div> </div> |

Report Filters Group

| FIELD | DESCRIPTION |
|-------------------------------------|--|
| Filter For (Equal To) | <p>Select/click this drop-down and select the appropriate item (example below) from the list.</p> <div style="border: 1px solid #ccc; padding: 10px; width: fit-content;"> <p>Filter For (Equal To)</p> <div style="border: 1px solid #ccc; padding: 2px; width: fit-content;"> All Children </div> <p style="background-color: #0070C0; color: white; padding: 2px 10px; margin-top: 2px;">All Children</p> <p>Children with a Date of Birth within the selected period Children with active services within the selected period Children with evaluations requested and active services within the selected period Children with evaluations requested within the selected period Children with evaluations requested within the selected period and with upcoming services Children with no enrollments yet</p> </div> |
| Lookup Last Name (Contains) | <p>Enter the last name of the child for your keyword search.</p> |
| Lookup First Name (Contains) | <p>Enter the first name of the child for your keyword search.</p> |
| Name Lookup (Equals To) | <p>Select this drop-down field and select the appropriate item from the list.</p> <div style="border: 1px solid #ccc; padding: 10px; width: fit-content;"> <div style="border: 1px solid #ccc; padding: 2px; width: fit-content;"> Name Lookup (Equal To) </div> <div style="border: 1px solid #ccc; padding: 2px; width: fit-content;"> -- Select Item -- </div> <p style="background-color: #0070C0; color: white; padding: 2px 10px; margin-top: 2px;">-- Select Item --</p> <p>Name Lookup Guardian Name Service Coordinator Name EIO/D Name</p> </div> |
| EI Child ID (Contains) | <p>Enter the early intervention (EI) child identification for your keyword search.</p> |

| FIELD | DESCRIPTION |
|--|---|
| Company (Contains) | Enter the company name or begin typing (type-ahead) and select it from the drop-down list (example below) for your keyword search.  |
| Program Name Filter (Contains) | Enter the program name for your keyword search. <i>(i)</i>Please refer to the "Program Name Filter, Lookup Begin From & Begin To" section (above) to reference when this field is enabled. |
| Lookup Begin From | To narrow your search, manually enter the 'from' date or use the calendar picker (invoked by clicking this field). <i>(i)</i>Please refer to the "Program Name Filter, Lookup Begin From & Begin To" section (above) to reference when this field is enabled. |
| Lookup Begin To | To narrow your search, manually enter the 'to' date or use the calendar picker (invoked by clicking this field). <i>(i)</i>Please refer to the "Program Name Filter, Lookup Begin From & Begin To" section (above) to reference when this field is enabled. |
| County (Equal To) | Use this drop-down menu and select the appropriate county from the list. |
| County of Residence ID (Equal To) | Use this drop-down menu to search for a county (e.g., Albany) of residence and select the appropriate county from the list. |
| State ID (Equal To) | Use this drop-down menu and select the appropriate state abbreviation (e.g., NY) from the list. |
| Child Status (Equal To) | Use this drop-down and select the appropriate status (e.g., Active) from the list.  |

| BUTTON | DESCRIPTION |
|--|---|
| Excel  | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet. An example of the Message popup from the MS Edge browser (shown below):</p>  <p>To see your results in excel, click Open.</p> <p>i Leaving all the Report Filters fields blank will show "all" results.</p> <p>i The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the EI-Hub system.</p> |
| Search  | <p>Based on your criteria entered in the Report Filters fields above, click this button for the system to generate your results (example below).</p> |

Results Grid/Table

i To view all columns, use the horizontal scroll bar on the bottom of your screen and scroll to the right.

| Results Grid/Table | | | | | | | | | | | | | | | | | | | | Rows per page | 10 |
|--------------------|-----------|------------|------------|----------|---------------|------------|-------------|------------|-----------|-------------------------|----------------------|----------------------|----------------|-----------------------|------------------|-------------------|----------------------|-------------------|-------------------|----------------|-----------------|
| Eligibility Status | Last Name | First Name | DOB | Child ID | Child Address | Child City | Child State | Child Zip | Child Sex | Last Physical Exam Date | Child Discharge Code | Child Discharge Date | Catchment Code | Child Discharge Notes | Next Review Date | Current IFSP Date | Initial Service Date | Initial Eval Date | Student ID Number | BOE Student ID | Medicaid Number |
| Zabars | Annie | | 07/15/2021 | 847 | 254 W 29TH ST | NEW YORK | NY | 10001-5290 | Female | | | | | | | | | | | | |
| Zabars | Annie | | 07/15/2021 | 847 | 254 W 29TH ST | NEW YORK | NY | 10001-5290 | Female | | | | | | | | | | | | |

i See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|---|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|--------------------------------|--|
| Eligibility Status | This column displays the eligibility status of the child. |
| Last Name | This column displays the child's first name |
| First Name | This column displays the child's last name. |
| DOB | This column displays the child's date of birth (DOB). |
| Child ID | This column displays the child's early intervention identification number. |
| Child Address | This column displays the child's address. |
| Child City | This column displays the child's city. |
| Child State | This column displays the child's state. |
| Child Zip | This column displays the child's zip code. |
| Child Sex | This column displays the child's sex (gender). |
| Last Physical Exam Date | This column displays the child's last physical exam |
| Child Discharge Code | This column displays the child's discharge code. |
| Child Discharge Date | This column displays the child's discharge date |
| Catchment Code | This column displays the catchment code. |
| Child Discharge Notes | This column displays the child's discharge notes (if applicable). |
| Next Review Date | This column displays the child's next review date (if applicable). |
| Current IFSP Date | This column displays the child's current IFSP date. |
| Initial Service Date | This column displays the child's initial service date. |
| Initial Eval Date | This column displays the child's initial evaluation date. |
| Student ID Number | This column displays the equivalent Child ID number. |
| BOE Student ID | This column displays the Board of Education (BOE) student identification number. |

| COLUMN | DESCRIPTION |
|--|--|
| Medicaid Number | This column displays the child's Medicaid number. |
| EIP Number | This column displays the child's early intervention program (EIP) number. |
| Ethnicity | This column displays the child's ethnicity. |
| Outreach Description | This column displays the outreach description, if applicable, for the child. |
| Company Name | This column displays the coordinator's company name. |
| Enrollment Coordinator First Name | This column displays the enrollment coordinator's first name. |
| Enrollment Coordinator Last Name | This column displays the enrollment coordinator's last name. |
| Enrollment Coordinator Company | This column displays the enrollment coordinator's company name. |
| Enrollment Coordinator Address | This column displays the enrollment coordinator's address. |
| Enrollment Coordinator City | This column displays the enrollment coordinator's city. |
| Enrollment Coordinator State | This column displays the enrollment coordinator's state. |
| Enrollment Coordinator Zip | This column displays the enrollment coordinator's zip code. |
| Enrollment Coordinator Phone | This column displays the enrollment coordinator's phone number. |
| Child Coordinator First Name | This column displays the child's coordinator's first name. |
| Child Coordinator Last Name | This column displays the child's coordinator's last name. |
| Child Coordinator Company | This column displays the child's coordinator's company name. |

| COLUMN | DESCRIPTION |
|---------------------------------------|---|
| Child Coordinator Address | This column displays the child's coordinator's address. |
| Child Coordinator City | This column displays the child's coordinator's city. |
| Child Coordinator State | This column displays the child's coordinator's state. |
| Child Coordinator Zip | This column displays the child's coordinator's zip code. |
| Child Coordinator Phone | This column displays the child's coordinator's phone number. |
| EIOD | This column displays the child's Early Intervention Official Designee (EIOD) name. |
| County Name | This column displays the child's county name. |
| District Name | This column displays the child's district name. |
| Referring Physician Last Name | This column displays the referring physician's last name. |
| Referring Physician First Name | This column displays the referring physician's first name. |
| Referring Doctor NPI | This column displays the child's doctor's 10-position all-numeric National Provider Identifier. |
| Session Duration Minutes | This column displays the child's session duration in minutes. |
| Total Sessions Scheduled | This column displays the child's total sessions scheduled. |
| Authorization Information | This column displays the authorization information. |
| From Date | This column displays the child's session 'from' date. |
| To Date | This column displays the child's session 'to' date. |
| Session Frequency | This column displays the session frequency (time spent) for the service provided for the child. |

| COLUMN | DESCRIPTION |
|--|---|
| Frequency Units | This column displays the number of units used to provide the child's service. |
| Service Type Code | This column displays the service type code. |
| Enrollment Status | This column displays the child's enrollment status. |
| Prescription Received Date | This column displays the child's prescription received to date. |
| Notes | This column displays any relevant notes about the child. |
| Request Received Date | This column displays the requested enrollment date entered. |
| Therapist Confirmed | This column displays the therapist's confirmation ('True' or 'False'). |
| Discharge Date | This column displays the child's discharge date. |
| IEP Received Date | This column displays the child's Individual Education Plan (IEP) date received. |
| Enrollment Therapist Billing Rate | This column displays the therapist's billing rate (e.g., per hour/session). |
| Therapist Billing Rate Source | This column displays the therapist's billing rate source. |
| Description | This column displays the therapist's billing description. |
| Enrollment Rate | This column displays the child's enrollment date. |
| Enrollment ID | This column displays the child's enrollment ID. |
| Session Approved | This column displays the child's session approved. |
| Review Notes Received Date | This column displays the review notes/received dates |
| Office Code | This column displays the office code. |
| Meeting Date | This column displays the meeting date for the child. |
| Meeting Time | This column displays the meeting time for the child |
| Never Serviced | This column displays (if applicable) never serviced for the child. |

| COLUMN | DESCRIPTION |
|--------------------------------------|---|
| Enrollment Discharge Reason | This column displays (if applicable) the enrollment discharge for the child. |
| Outreach Code | This column displays (if applicable) the outreach code for the child. |
| Default CPT Code | This column displays (if applicable) the outreach code for the child. |
| Referred By Code | This column displays the referred code for the child. |
| Referral Info | This column displays the referral information for the child. |
| Last Exported To Enter Claims | This column displays the last exported to enter claims. |
| Face To Face | This column displays if the service provided was face-to-face with the child. |
| Makeup Frequency Unit | This column displays (if applicable) the makeup visits frequency unit for the child. |
| Co Visit Frequency Unit | This column displays (if applicable) the co-visit frequency unit for the child. |
| Guardian ID | This column displays the guardian's identification number. |
| Guardian First Name | This column displays the guardian's first name. |
| Guardian Last Name | This column displays the guardian's last name. |
| Location Description | This column displays the location's description of where the service was provided for the child. |
| Location Address | This column displays the location address where the service was provided for the child. |
| Location Address 2 | This column displays the location's address 2 (if applicable) where the service was provided for the child. |
| Location City | This column displays the city's name where the service was provided for the child. |
| Location State | This column displays the state's name where the service was provided for the child. |
| Location Zip | This column displays the location's zip code where the service was provided for the child. |
| Location Service Setting | This column displays the location's service setting provided service provided for the child. |

| COLUMN | DESCRIPTION |
|--|--|
| Location Phone | This column displays the location's phone number. |
| Location Contact First Name | This column displays the location contact of the person's first name. |
| Location Contact Last Name | This column displays the location contact of the person's last name. |
| Location Close Time | This column displays the location's close time. |
| Alternate Location Description | This column displays the alternate location's description of the service provided for the child. |
| Alternate Location Address | This column displays the alternation location's address for the service. |
| Alternate Location Address 2 | This column displays the service's alternate location's address 2 (if applicable). |
| Alternate Location City | This column displays the alternate service location's city name. |
| Alternate Location State | This column displays the alternate service location's state name. |
| Alternate Location Zip | This column displays the alternate service location's zip code. |
| Alternate Location Service Setting | This column displays the alternate location's service setting. |
| Alternate Location Phone | This column displays the alternate location's phone where for the service. |
| Alternate Location Contact First Name | This column displays the alternate location contact of the person's first name. |
| Alternate Location Contact Last Name | This column displays the alternate location contact of the person's last name. |
| Individual or Group | This column displays individual or group settings for the child. |
| Office Description | This column displays the office description. |

| COLUMN | DESCRIPTION |
|------------------------------------|--|
| Office Phone | This column displays the office phone number. |
| Office Contact | This column displays the office contact person. |
| Office Address | This column displays the office address. |
| Office City | This column displays the name of the city where the office resides. |
| Office State | This column displays the name of the state where the office resides. |
| Office Zip | This column displays the zip code where the office resides. |
| Pay Source Program Code | This column displays the pay source program code. |
| Flat or ProRate | This column displays if the service is billed flat or prorated |
| Pay Source Code | This column displays the pay source code. |
| Program Name | This column displays the program name. |
| Enrollment Type | This column displays the enrollment type. |
| Clinical Supervisor Name | This column displays the clinical supervisor's name. |
| Clinical Supervisor Title | This column displays the clinical supervisor's title. |
| Clinical Supervisor License | This column displays the clinical supervisor's license number. |
| Clinical Supervisor NPI | This column displays the clinical supervisor's NPI number. |
| Clinical Supervisor Phone | This column displays the clinical supervisor's phone number. |
| Clinical Supervisor Email | This column displays the clinical supervisor's email number |
| Therapist Last Name | This column displays the therapist's last name. |
| Therapist First Name | This column displays the therapist's first name. |

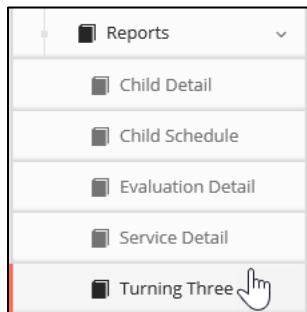
| COLUMN | DESCRIPTION |
|---------------------------------|--|
| Therapist Staff ID | This column displays the therapist's staff identification number. |
| Therapist NPI | This column displays the therapist's NPI number. |
| Therapist License Number | This column displays the therapist's license number. |
| Therapist Email | This column displays the therapist's email address. |
| Therapist Active | This column displays if the therapist is active ('True' or 'False'). |
| Therapist Title | This column displays the therapist's title. |
| Weekly Session Minutes | This column displays the therapist's weekly session minutes. |
| Weekly Session Hours | This column displays the therapist's weekly session hours. |
| Has Referring Doctor | This column displays the child was referred by a doctor ('Yes' or 'No'). |
| Phone Number | This column displays the therapist's phone number. |
| Therapist Billing Rate | This column displays the therapist's billing rate. |
| Frequency | This column displays the therapist's session frequency. |
| Bilingual | This column displays if the therapist speaks bilingual ('Yes' or 'No'). |
| Include Coordination | This column displays the session, including coordination ('Yes' or 'No'). |
| Waivers | This column displays waivers ('Yes' or 'No'). |
| Child Age | This column displays the child's age. |
| Goals Entered | This column displays the child's goals that were entered ('Yes' or 'No'). |
| Makeups Per Freq Unit | This column displays if there were makeups per frequency unit for the child's session. |
| CoVisits Per Freq Unit | This column displays co-visits per frequency unit for the child's session. |
| Uses Company NPI | This column displays the company's NPI number. |

| COLUMN | DESCRIPTION |
|-------------------|--|
| Service Type ID | This column displays the service type identification number. |
| Company ID | This column displays the company's identification number. |
| Program ID | This column displays the program identification number. |
| Include From Date | This column displays the session, including the 'from' date. |
| Include To Date | This column displays the session, including the 'to' date. |
| EI Child ID | This column displays the child's Early Intervention Identification number. |

8.1.10.5 Turning Three Report Grid/Table

 Home / [Child Reports](#) / LEA Turning Three Report

 This report captures all the children within nine (9) months of their 3rd birthday. It helps you to identify what children need to start the transition process. The report results give you a listing of those children in that window.



LEA Turning Three Report Filters Panel and Results Grid/Table

 To view all columns, use the horizontal scroll bar on the bottom of your screen and scroll to the right.

| LEA Turning Three Report | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---------------|------------|------------|---------|---------------------------|--|--|--|--|--------------|--------|----|-------|--|-------------|--|--|-----|--------|-------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Report Filters | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Period From Date (Equal To) | | | | | Period To Date (Equal To) | | | | | Report Data | | | | | | | | | | | | | | | | | | | | | | | | |
| 10/01/2022 | | | | | 12/20/2022 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="button" value="Excel"/> <input type="button" value="Filter"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="text" value="Search..."/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Child's First Name Child's Last Name Birth Date 3rd Birthday Primary Language Primary Contact Phone Number Primary Contact First Name Primary Contact Last Name Primary Contact Address Primary Contact City Primary Contact State Primary Contact ZIP Code POE Office Period From Date Period To Date School District ID EI Child ID Child Status Child Address Child Age Child City Se: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Prudencia | PCG-Galbreath | 04/12/2019 | 04/12/2022 | Amharic | | | | | | | | | | | Greene | | | 28 | Active | 151 W 34TH ST | | | | | | | | | | | | | | |
| Pia | PCG-Galbreath | 04/15/2019 | 04/15/2022 | Spanish | | | | | | | | | | | Schenectady | | | 35 | Active | 151 W 34TH ST | | | | | | | | | | | | | | |
| Victor | Mandela | 05/17/2019 | 05/17/2022 | English | | | | | | Academy Park | Albany | NY | 12207 | | | | | 285 | Active | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | 3 years 7 months 3 days | | | | | | | | | | | | | | |

| FIELD | DESCRIPTION |
|--------------------|--|
| -Default Report- ▾ | <p>The “Default Report” is the system’s canned report. If your agency created a custom report for you to use, select/click the drop-down and select the appropriate report item from the list.</p> <p>(i) Depending on the chosen custom report, the presentation will look different based on the design; hence, different results will transpire.</p> |

Report Filters Group

| FIELD | DESCRIPTION |
|-----------------------------|--|
| Period From Date (Equal To) | To narrow your search, manually enter the beginning period date or use the calendar picker (invoked by clicking this field). |
| Period To Date (Equal To) | To narrow your search, manually enter the ending period date or use the calendar picker (invoked by clicking this field). |

(i) The following ‘from’ and ‘to’ date fields are required; if left blank, the system prompts you a message pad (shown below):



| BUTTON | DESCRIPTION |
|--|---|
| Excel  | <p>Click this button to export your results (based on the criteria you entered) in an MS Excel spreadsheet. An example of the Message popup from the MS Edge browser (shown below):</p>  <p>To see your results in excel, click Open.</p> <p>i Leaving all the Report Filters fields blank will show "all" results.</p> <p>i The Excel export option is helpful if you have a lot of data to examine; this function helps perform data analysis tasks outside the El-Hub system.</p> |
| Filter  | <p>Based on your criteria entered in the Report Filters fields above, click this button for the system to generate your results (example below).</p> <p>i Leaving all the Report Filters fields blank will show "all" results.</p> |

Results Grid/Table

| Search... | | | | | | | | | | | | | | | | | 10 |
|--------------------|-------------------|------------|--------------|------------------|------------------------------|----------------------------|---------------------------|-------------------------|----------------------|-----------------------|--------------------------|-------------|------------------|----------------|--------------------|--|----|
| Child's First Name | Child's Last Name | Birth Date | 3rd Birthday | Primary Language | Primary Contact Phone Number | Primary Contact First Name | Primary Contact Last Name | Primary Contact Address | Primary Contact City | Primary Contact State | Primary Contact ZIP Code | POE Office | Period From Date | Period To Date | School District ID | | |
| First129411 | Last129411 | 03/10/2016 | 03/10/2019 | | | | | | | | | Suffolk | | | | | |
| First129415 | Last129415 | 03/09/2016 | 03/09/2019 | | | | | | | | | Wayne | | | | | |
| First129426 | Last129426 | 03/12/2016 | 03/12/2019 | | | | | | | | | Chenango | | | | | |
| First129454 | Last129454 | 03/19/2016 | 03/19/2019 | | | | | | | | | Delaware | | | | | |
| First129456 | Last129456 | 03/17/2016 | 03/17/2019 | | | | | | | | | Madison | | | | | |
| First129461 | Last129461 | 03/20/2016 | 03/20/2019 | | | | | | | | | Orange | | | | | |
| First129463 | Last129463 | 04/08/2016 | 04/08/2019 | | | | | | | | | Montgomery | | | | | |
| First129465 | Last129465 | 03/13/2016 | 03/13/2019 | | | | | | | | | Schoharie | | | | | |
| First129472 | Last129472 | 03/12/2016 | 03/12/2019 | | | | | | | | | Cattaraugus | | | | | |

Showing 1 to 20 of 1,655 entries

Prev 1 2 3 4 5 ... 83 Next

i See "ASCENDING / DESCENDING CONTROLLER" for column sorting listed in the CM Unit 5 User Guide section [Home Tab Controllers](#); selecting/clicking the 'Home Tab Controllers' hyperlink downloads the Unit 5 User Guide.

| FIELD | DESCRIPTION |
|--|--|
|  Search | To search the results grid/table for a specific record, enter a keyword into this field. |

| COLUMN | DESCRIPTION |
|-------------------------------------|--|
| Child's First Name | This column displays the first name of the child. |
| Child's Last Name | This column displays the last name of the child. |
| Birth Date | This column displays the birth date of the child. |
| 3rd Birthday | This column displays the child's third (3rd) birthday date. |
| Primary Language | This column displays the primary language the child speaks fluently. |
| Primary Contact Phone Number | This column displays the child's primary contact phone number (e.g., parent or guardian). |
| Primary Contact First Name | This column displays the child's primary contact's first name (e.g., parent or guardian). |
| Primary Contact Last Name | This column displays the child's primary contact's last name (e.g., parent or guardian). |
| Primary Contact City | This column displays the child's primary contact city name (e.g., parent or guardian). |
| Primary Contact State | This column displays the child's primary contact state name (e.g., parent or guardian). |
| Primary Contact Zip Code | This column displays the child's primary contact zip code (e.g., parent or guardian). |
| POE Office | <p>This column displays the child's POE county name (e.g., parent or guardian).</p> <p>(i) The point of entry office (POE) is responsible for receiving all referrals to the EI program, determining eligibility through evaluations and assessments, and coordinating the development of the initial Individualized Family Service Plan.</p> |
| Period From Date | This column displays the audit period 'from' date. |
| Period To Date | This column displays the audit period 'to' date. |
| School District ID | This column displays the school district identification number. |
| EI Child ID | This column displays the child's Early Intervention identification number. |
| Child Status | This column displays the child's status (Active or Inactive). |
| Child Address | This column displays the child's home address. |

| COLUMN | DESCRIPTION |
|-------------------------------|---|
| Child Age | This column displays the child's age. |
| Child City | This column displays the name of the city where the child resides. |
| Sex | This column displays the child's sex (gender). |
| Coordinator First Name | This column displays the child's coordinator's first name. |
| Coordinator Last Name | This column displays the child's coordinator's last name. |
| Coordinator Company | This column displays the child's coordinator's company name. |
| Coordinator Phone | This column displays the service coordinator's phone number. |
| Guardian Salutation | This column displays the child's guardian's salutation ("Dr.," "Mr.," "Ms.," "Mrs.," and "Miss"). |

-- END OF DOCUMENT --