

## CFC Fax Cover Sheet for Insurance Benefits Verification Request/Update

Completion of this form allows the CFC to obtain information regarding a consenting family's private insurance. This will help determine proper authorizations to appropriate providers are created. A CFC can submit the request as necessary based on the following guidelines:

- **Initial Benefits Verification Request** – when a child initially enters EI and has never had a benefits verification done before AND either has no current IFSP or an active initial IFSP that has just began. Requires Sections 1, 2 are completed. If necessary, Section 4 may be completed.
- **Change/Update** – when a family experiences a change in coverage. This could be no insurance to having insurance or changing plans (even within the same company – maybe at an annual renewal). Required Sections 1, 3 are completed. If necessary, Section 2 and/or 4 may be completed.
- **Annual Renewal** – when a family has been in Early Intervention and an annual renewal of the Benefits Verification must be completed. These cannot be submitted more than 30 days from the end of the existing IFSP. If a request is submitted earlier than 30 days from the IFSP end date in the system, the CFC must indicate in Section 2 (Annual Meeting Date) on the CFC Fax Cover Sheet the date of the annual. Required Sections 1, 2 are completed. If necessary, Section 4 may be completed.

Submit the completed request, along with required documents, to the CBO in the following method:

### **Benefits Verification:**

The Benefits Verification request may be submitted:

- Via Fax as one submission (form and all required documents) **OR**
- Electronically through the secure CBO WebMail system as one submission (form and all documents in one attachment like a pdf).

### **Waivers:**

To request a waiver:

- Submit the Pre-Billing Waiver Request form as a Word document and send via secure CBO WebMail. A separate form must be used per discipline (if multiple requests are necessary).
- Submit the CFC Fax Cover Sheet for Insurance Benefits Verification Requests/Updates, indicating the appropriate waiver requested, and other supporting documentation
  - via Fax the same day as the WebMail of the Pre-Billing Waiver Request form(s) **OR**
  - a second attachment scanned into one document such as a pdf and sent via secure CBO WebMail.

### **Instructions for CFC Fax Cover Sheet for Insurance Benefits Verification Requests/Updates:**

Complete All of Section 1 for each submission.

- Complete all areas.
- Do not create authorizations for direct services subject to insurance billing before the benefits verification process is completed.

Complete Section 2 for indicating the type(s) of EI Services the BV should be requested for.

- Only indicate those services necessary.
- This section should be used for Initial, Annual BVs in addition to when there is a Change/Update to private health insurance such as new health plan coverage within same company or entirely new health plan company.

Complete Section 3 for any Changes/Updates to benefits during a current IFSP period.

- If new/different insurance is indicated, be sure to follow the instructions in Section 2 to indicate all the services and all the information about the new/different insurance plan.

Complete Section 4 if a Waiver/Exemption is needed.

- Be sure to submit one Pre-Billing Waiver Request (as a Word document) form per discipline.
- You should only submit one CFC Fax Cover Sheet for Insurance Benefits Verification Request/Update and supporting documentation (notes, etc...) per request.