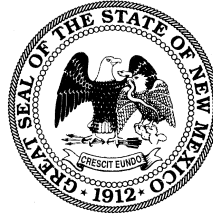


**State Of New Mexico**  
**EARLY CHILDHOOD EDUCATION AND CARE**  
**DEPARTMENT**

**Developmental Disabilities Supports Division Family Infant Toddler (FIT) Program**



**REQUEST FOR APPLICATION [RFA]**

**RFA Title: Call For Providers for Family Infant Toddler  
Early Intervention Services**

**RFA No. RFA FY2021-2**

**Submit all applications ELECTRONICALLY to:**  
**[eccd.rfa@state.nm.us](mailto:eccd.rfa@state.nm.us)**

**Issuance Date: March 24, 2021**  
**Application Due on April 27, 2021**



This **Request for Applications (RFA)** will be used to select organizations to receive a Provider Agreement (PA) for one fiscal year beginning July 1, 2021 (Fiscal Year 2022) through June 30, 2022 (Fiscal Year 2022). Any PA's awarded via this process are subject to available funding, contractor performance, and program priorities.

This RFA is being implemented in accordance with the Healthcare Exemption to the state procurement code, Section 13-1-98.1 (B) NMSA 1978.

The New Mexico Early Childhood Education and Care Department (ECECD), Family Infant Toddler (FIT) Program, is seeking responses from agencies and organizations wishing to provide early intervention services in the State of New Mexico within the following counties ONLY:

- Catron
- Colfax
- De Baca
- Eddy
- Grant
- Guadalupe
- Harding
- Hidalgo
- Lea
- Lincoln
- Los Alamos
- Luna
- McKinley
- Rio Arriba
- San Juan
- Sierra
- Socorro
- Taos
- Torrance
- Union.

Family Infant Toddler (FIT) Program services are provided to infants and toddlers, birth to age three, who have or are at risk for developmental delays and disabilities and their families. FIT Program services are provided to help promote the child's development and parental capacity and are provided in accordance with the Individuals with Disabilities Education Act (IDEA) Part C and state rules for FIT Programs. There are five service categories: **Child Find and Public Awareness; Comprehensive Multidisciplinary Evaluations; Family Service Coordination; Early Intervention; and Professional Development.**

The FIT Program utilizes a network of provider agencies statewide that ensures appropriate delivery of early intervention services as described by the Individuals with Disabilities Education Act (IDEA) Part C, NMAC 7.30.8, New Mexico Register Volume XXIII, Number 12, June 29,

2012 and FIT Program/Medicaid Early and Periodic Screening, Diagnostic and Treatment EPSDT services for Infants and Toddlers (birth to three) with or at risk of developmental delays and their families, ECECD Family Infant Toddler Program Service Definitions and Standards including any revisions that are subsequently made during the period of this provider agreement.

**Awarded Providers must comply with the ECECD Background Check policy:**

Agency contractors that have or could have primary custody of children for at least twenty hours per week are required under NMSA 1978, § 32A-15-1, *et seq.*; NMSA 1978 § 9-29-8(H); NMAC 8.8.3, *et seq.* and other applicable regulations to have background checks completed on all operators, employees, staff members, volunteers or student interns. All Information Technology (IT) contractors are also required to undergo a background check. The contractor must comply with the fingerprint based criminal background investigation process, as per current ECECD policy. The applicant for the background check is required to pay all related fees. National as well as state abuse and neglect background checks on required individuals will be conducted in accordance with NMAC 8.8.3 and all other applicable state and federal regulations and standards. An eligibility letter must be in the IT contractor, contractor operator, employee, staff member, volunteer or student intern's personnel file prior to that individual having access to data or having any direct contact with children participating in programs delivered by the Agency or any contractor with the Agency.

All providers must deliver the following services as defined in **Appendix C**, to eligible families and children birth to age three:

- 1) Child Find Public Awareness
- 2) Comprehensive Multidisciplinary Evaluations(CME)
- 3) Family Service Coordination
- 4) Early Intervention Services (as described by IDEA Part C and NMAC 7.30.8):
  - a. Assistive Technology services
  - b. Audiological Services
  - c. Developmental Instruction
  - d. Family Therapy Counseling and Training
  - e. Health Services
  - f. Nursing Services
  - g. Nutrition Services
  - h. Occupational Therapy Services
  - i. Physical Therapy Services
  - j. Psychological Services
  - k. Sign Language Services
  - l. Social Work Services
  - m. Speech Language Pathology Services
  - n. Transportation Services
  - o. Transition Services
  - p. Vision Services
- 5) Professional Development

## **APPLICATION SEQUENCE OF EVENTS**

ECECD will make every effort to adhere to the following schedule. Any Provider Agreement(s) resulting from this RFA will be finalized with the most advantageous Offeror(s) as per the schedule below or as soon thereafter as possible.

These dates are subject to change at the discretion of the relevant Agency Procurement office.

<b>Action</b>	<b>Responsible Party</b>	<b>Due Date</b>
Issuance of Application	<b>ECECD</b>	3/24/2021
Deadline to submit Questions	Applicant	4/6/2021 at 3:00 PM MDST/MST
Response to Written Questions	ECECD	4/13/2021
<b>Submission of Application</b>	<b>Applicant</b>	<b>4/27/2021 at 1:00 P.M. MDST/MST</b>
Application Evaluation	ECECD	4/28/2021 – 6/1/2021
Preliminary Awards	ECECD	6/1/2021 – 6/30/2021
Finalize Agreements	ECECD	July 1, 2021

## **QUESTIONS**

Questions about this RFA shall be submitted via email to the RFA Administrator, Leah Davidson at: [LeahC.Davidson@state.nm.us](mailto:LeahC.Davidson@state.nm.us) no later than the date indicated in the Sequence of Events. Written responses to written questions will be posted on the ECECD website at <https://www.nmececd.org/> for the benefit of all applicants on the date indicated in the Sequence of Events.

## **APPLICATION SUBMISSION AND DUE DATE**

Organizations proposing to provide services as part of the FIT Program Provider Network must submit a complete application for this RFA **no later than 1:00 PM MDST/MST on the date as indicated in the sequence of events.**

Only electronic submissions of applications will be accepted. Responses should be provided in PDF Format. Application submissions will be electronically dated and time stamped.

Applications must be electronically submitted and emailed to the following email address:

[ececd.rfa@state.nm.us](mailto:ececd.rfa@state.nm.us)

Enter in the Subject Line of the email: “<**Applicant Name**> - **FIT PROGRAM CALL FOR PROVIDERS, RFA FY2021-2**”

All submissions will be acknowledged via email with 24-hours of receipt.

**Late and Incomplete submissions will not be accepted.**

**APPLICATION FORMAT AND RESPONSE**

Applications that do not adhere to the requirements and response format below may be rejected.

- Applicants shall submit only one (1) electronic application.
- Coversheet **must** have the signature of the person authorized to obligate the program.
- Applications must be typewritten on standard 8½ x 11 inch, unruled paper and submitted electronically.
- Type face must be easily readable font such as Ariel, Courier or Times New Roman, type size must be 12-point and single spaced.
- Narrative Response is limited to a 12-page limitation. The Coversheet, Appendix A, is not part of the page limitation.

Applicants shall organize their application as outlined below. Points will be awarded based on the thoroughness and clarity of each response. Each Application must provide a narrative response to the following RFA specifications B-C.

**A. Coversheet – Complete and sign the Coversheet, Appendix A**

Using a narrative format, please provide the following information:

**B. Organizational Capacity**

**1. Background and Experience:**

- a) List the offeror's mission and values and describe how they are suited to the services/projects proposed.
- b) Provide a summary of the offeror's experience with similar services/projects of those being proposed.
- c) Describe previous monitoring results and/or performance measure results.
- d) Describe the offerors ability to meet the cultural and linguistic needs of the community it proposes to serve.

**2. Organizational Structure and Plan of Operation**

- a) Provide the name, title and qualifications/educational level, licensure and/or work experience of key personnel who will work on the services being proposed (resumes do not need to be submitted). Documents need to be kept on file and are subject to inspection;
- b) Provide an organizational chart of the proposed structure that demonstrates

- how the proposed service/project will fit into the agency's structure;
- c) Describe the management structure of the organization, including chain of supervision;
  - d) Describe how consumer (including families served) are included in the organizational planning;
  - e) Provide a statement regarding the use of subcontractors for each service proposed and the percentage of work estimated to be subcontracted;
  - f) Describe the structure of policies and procedures of the Applicant and how personnel, including any subcontractors are trained on these;
  - g) Describe the structure of training and other professional development for personnel, subcontractors (if applicable);
  - h) Provide a description of the system for quality assurance, include policies, procedures, reporting, and personnel responsible.

## **C. Description of Service Delivery**

### **1. Child Find Public Awareness:**

- a) Describe how public awareness materials will be distributed to community sites that are frequented by families and/or providers that serve families of young children.
- b) Describe how outreach activities will be conducted to primary referral resources (health care, early care and learning centers, social service providers, etc.) regarding making referrals to the FIT Early Intervention Program.
- c) Describe how child find events will be held, including developmental screenings in the community, including coordination with other agencies.
- d) Describe how a child find plan will be developed that will meet the needs of the communities proposed to be served.

### **2. Comprehensive Multidisciplinary Evaluations (CME):**

- a) Describe the planning process used to conduct an initial comprehensive multidisciplinary evaluation, including who will participate in the evaluation, where it will occur, and how it will occur within 45 days of the referral.
- b) Describe how comprehensive multidisciplinary evaluations of children referred will be conducted to assess the child's developmental levels in each of the 5 developmental domains: cognitive, physical/motor, communication, social/emotional, and adaptive behavior and their functional skills across routines within the developmental domains.
- c) Describe how other information regarding the child's health, birth history, medical history, and typical daily routines, including strengths and challenges, will be gathered and incorporated into the

comprehensive multidisciplinary evaluation (CME).

- d) Describe how the CME reports will be generated, and how they are that made accessible to the family.
- e) Describe how eligibility for the FIT Program will be determined and documented.

### **3. Early Intervention Services:**

- a) Describe the qualifications of early intervention personnel and whether they are staff, contractors, or entities with whom your agency has an agreement in the list of disciplines listed in NMAC 7.30.8.12 Service Delivery Early intervention services (4): Assistive technology services; Audiological services; Developmental instruction; Family therapy, counseling and training; Family service coordination; Health services; Medical services; Nursing services; Nutrition services; Occupational therapy services; Physical therapy services; Psychological services; Sign language and cued language services; Social work services; Speech and language pathology services; Transportation services; Vision services
- b) Describe how early intervention personnel will work as a transdisciplinary team to address the outcomes and strategies on the Individualized Family Service Plan (IFSP).
- c) Describe how early intervention services will utilize natural learning opportunities and incorporate the family's/child's daily routines, activities, and settings to promote the child's development and promote the parent/caregiver's ability to carry out these interventions.
- d) Describe how early intervention services will be provided within inclusive early care and learning settings (Child Care, Early Head Start, etc.) as applicable to promote the child's development.
- e) Describe the process of early intervention service provision when there are uniquely identified needs of children and families and how they will be met, including: vision and hearing loss; autism; infants; children that experience trauma (abuse and neglect, domestic violence) or other family factors (e.g. substance abuse, homelessness etc.).
- f) Describe how early intervention providers will use coaching within the Family Guided Routines-Based Intervention (FGRBI) framework to help families help their children reach their IFSP outcomes. Describe on-site and off-site training and technical assistance opportunities that are regularly offered. Please include mandatory and non-mandatory professional development experiences in FGRBI.
- g) Describe how early intervention services will promote the healthy social and emotional development of children served.

- h) Describe how early intervention services will collaborate with other agencies (Child Protective Services, Home Visiting Providers, Medical Providers, Early Childhood and Care Providers, etc.) to meet the needs of children and families served.
- i) Describe how the offeror will work to obtain all the services listed on the IFSP if they are not available within the agency.
- j) Describe how early intervention services will be documented and billed.

#### **4. Family Service Coordination:**

- a) Describe the model of family service coordination (FSC) that will be provided (i.e. dual role (DS and FSC); dedicated; interim; mix of models etc.).
- b) Describe how FSCs will use coaching within an FGRBI framework to interact with the families they serve.
- c) Describe training procedures for FSC's for compliance with FSC role in
- d) NMAC and the Standards
- e) Describe the average caseload for family service coordinators (if more than
- f) one model is used - indicate the case load size for each model) and how determination of caseload size will be made.
- g) Describe how FSC's gain knowledge of community resources to make referrals and meet the needs of families.
- h) Describe the role of the FSC's in coordinating the intake, evaluation, and eligibility determination when a child and family are referred to the FIT Program.
- i) Describe how FSC's inform parents/guardians of their rights and procedural
- j) safeguards within the FIT Program.
- k) Describe how FSC's will assist families in accessing training, leadership opportunities, and connection with other parents/guardians.
- l) Describe the role of the FSC's in preparing for and facilitating the Individualized Family Service Plan (IFSP) meeting.
- m) Describe the role of the FSC's in ensuring that families receive services on their
- n) IFSP.
- o) Describe how FSC's will address the family outcomes on the IFSP, including
- p) helping them access other services and supports.
- q) Describe the role of the FSC in the coordination of child's transition from the FIT
- r) Program once they reach the age of three.

#### **5. Professional Development**

- a) Describe how a professional development plan for the agency will be developed to address the needs of all personnel (both new and established) and how the ongoing training of staff will be conducted.



- b) Describe how new personnel (including independent contractors) are trained and mentored to address their identified competency needs.
- c) Describe how early intervention personnel including independent contractors are informed of the FIT philosophy, IDEA Part C, ECECD FIT Service Definitions and Standards, and current early intervention practices being utilized in New Mexico.
- d) Describe how and by whom personnel (including independent contractors) receive reflective supervision and support. Provide a resume in Section D, Supporting Documentation, of the person responsible for Reflective Supervision.
- e) Describe the training and other personnel development opportunities made available to personnel (including independent contractors).

#### **D. Supporting Documentation**

- a) Provide a Resume for the person responsible for Reflective Supervision. *Failure to provide the required Resume will result in disqualification of the Application from further consideration.*
- b) Campaign Contribution Form, Appendix B, completed and signed. *Failure to disclose contributions will result in an automatic disqualification of your application from further consideration.*
- c) Describe the Offeror's financial status, including the results of any recent audits, and ability to meet expenditures, including payroll of proposed staff, of up to eight weeks awaiting reimbursement (financial documents are not required to be submitted with the proposal but may be requested later).
- d) Provide a copy of your New Mexico Taxation and Revenue Tax ID Certificate [CRS]. If you are not currently registered forms can be downloaded at: <http://www.tax.newmexico.gov/Businesses/forms-publications.aspx>
- e) Provide Proof of insurance(s):  
As part of a provider agreement with the Early Childhood Education and Care Department, Family Support and Early Intervention Division, you are required to carry two types of insurance coverage:
  1. Professional/General/Auto Liability (1,050,000.00 minimum)
  2. Surety Bond (no employees) OR Dishonesty Bond (employees) each requires 25% of contract amount (\$1OK minimum)

## **APPLICATION SCORE SUMMARY**

<b>RFA CRITERIA</b>	<b>POINT</b>
Cover sheets A	No point value
<b>Response Narrative</b>	---
<b>Organizational Capacity</b>	
1. Background and Experience	15
2. Organizational Structure and Plan of Operation	20
<b>Description of Service Delivery</b>	
1. Child Find Public Awareness	15
2. Comprehensive Multidisciplinary Evaluation	20
3. Early Intervention Services	25
4. Family Service Coordination	25
5. Professional Development	20
<b>Supporting Documentation</b>	No Point Value
<b>Total Points Available</b>	<b>140</b>

**Appendix A – Coversheet A**

<b>ECECD Request for Application, RFA #: RFA FY2021-2</b> <b>RFA Title: Call for Providers</b> <b>Cover Sheet A - Applicant Information</b>	
Name of Program:	Fed EIN# N.M. CRS #:
Mailing address:  Physical address:	** State Vendor #:
Contact Name: Title: Email address:	Telephone number:
<b>List the county / counties you intend to serve:</b>	
<p>**If you are <b>not</b> registered as a Vendor to do business with the State of New Mexico, please contact Michelle Montoya at <a href="mailto:michellee.montoya@state.nm.us">michellee.montoya@state.nm.us</a> or at (505) 660-9273 to get registered.</p>	
<b>Signature of Applicant:</b> I hereby certify that I am authorized to sign this application, that all information contained in this application contains no willful misrepresentation and that the information is true and complete to the best of my knowledge.	
Authorized Signature: _____ Date: _____	
Name (print): _____ Title: _____	
<b>The information on this form <u>must</u> be filled out, including digital signature.</b>	

## **Appendix B – Campaign Contribution Form**

Pursuant to NMSA 1978, § 13-1-191.1 (2006), any person seeking to enter into a contract with any state agency or local public body for professional services, a design and build project delivery system, or the design and installation of measures the primary purpose of which is to conserve natural resources must file this form with that state agency or local public body. This form must be filed even if the contract qualifies as a small purchase or a sole source contract. The prospective contractor must disclose whether they, a family member or a representative of the prospective contractor has made a campaign contribution to an applicable public official of the state or a local public body during the two years prior to the date on which the contractor submits a proposal or, in the case of a sole source or small purchase contract, the two years prior to the date the contractor signs the contract, if the aggregate total of contributions given by the prospective contractor, a family member or a representative of the prospective contractor to the public official exceeds two hundred and fifty dollars (\$250) over the two year period.

Furthermore, the state agency or local public body shall void an executed contract or cancel a solicitation or proposed award for a proposed contract if: 1) a prospective contractor, a family member of the prospective contractor, or a representative of the prospective contractor gives a campaign contribution or other thing of value to an applicable public official or the applicable public official's employees during the pendency of the procurement process or 2) a prospective contractor fails to submit a fully completed disclosure statement pursuant to the law.

THIS FORM MUST BE FILED BY ANY PROSPECTIVE CONTRACTOR WHETHER OR NOT THEY, THEIR FAMILY MEMBER, OR THEIR REPRESENTATIVE HAS MADE ANY CONTRIBUTIONS SUBJECT TO DISCLOSURE.

The following definitions apply:

“Applicable public official” means a person elected to an office or a person appointed to complete a term of an elected office, who has the authority to award or influence the award of the contract for which the prospective contractor is submitting a competitive sealed proposal or who has the authority to negotiate a sole source or small purchase contract that may be awarded without submission of a sealed competitive proposal.

“Campaign Contribution” means a gift, subscription, loan, advance or deposit of money or other thing of value, including the estimated value of an in-kind contribution, that is made to or received by an applicable public official or any person authorized to raise, collect or expend contributions on that official's behalf for the purpose of electing the official to either statewide or local office. “Campaign Contribution” includes the payment of a debt incurred in an election campaign, but does not include the value of services provided without compensation or unreimbursed travel or other personal expenses of individuals who volunteer a portion or all of their time on behalf of a candidate or political committee, nor does it include the administrative or solicitation expenses of a political committee that are paid by an organization that sponsors the committee.

“Family member” means spouse, father, mother, child, father-in-law, mother-in-law, daughter-in-law or son-in-law.

“Pendency of the procurement process” means the time period commencing with the public notice of the request for proposals and ending with the award of the contract or the cancellation of the request for proposals.

“Person” means any corporation, partnership, individual, joint venture, association or any other private legal entity.

“Prospective contractor” means a person who is subject to the competitive sealed proposal process set forth in the Procurement Code or is not required to submit a competitive sealed proposal because that person qualifies for a sole source or a small purchase contract.



Appendix C  
Scope of Work

**Family Infant Toddler (FIT) Program Provider Scope of Work FY22**

**Project Purpose:** The purpose of this agreement is to deliver early intervention services in accordance with the Individuals with Disabilities Education Act (IDEA) Part C to children and families in New Mexico.

**SPECIFIC REQUIREMENTS**

**Contractor shall comply with the ECECD Background Check provision in accordance with Article XXI of this Agreement.**

**FIT Site Visitation**

1. Allow the DEPARTMENT to conduct site visits to any service location when appropriate. The DEPARTMENT may elect not to provide advance notice of the site visit to the PROVIDER.
2. Provide information and access to copies of records promptly upon request by the DEPARTMENT.
3. Provide training to staff regarding the Child Protective Services (CPS) for identifying and reporting suspected client abuse, neglect or exploitation.
4. Develop and implement policies and procedures that require any employee or subcontractor knowing about or having a reasonable suspicion of client abuse, neglect or exploitation immediately to the CPS, and as appropriate and to the DEPARTMENT's Incident Management Bureau.
5. If the PROVIDER is a care provider as defined in the Caregivers Criminal History Screening Act, NMSA 1978, Section 29-17-4, the PROVIDER shall comply with the requirements of the Act and the Caregivers Criminal History Screening Requirements, 7.1.9 NMAC.

**Medicaid Requirement:** All services provided to Medicaid eligible children shall be billed to the New Mexico Human Services Department, Medical Assistance Division, not through this Provider Agreement.

**Licensure**

The Provider agrees to retain professional licensure, accreditation, credentialing or continuing education required to perform the scope of services provided for the Department. The Provider agrees to make evidence of licensure or other regulatory requirements for the scope of services available to the Department if requested in writing.

## **Location of Service**

These FIT Program services and activities will be provided to all identified eligible children and families in the following geographic area(s):

**Insert county/counties**

## **Performance Measures**

Through satisfactory completion of the Scope of Work set forth below and submission of acceptable Deliverables, the Provider will assist the Department to meet its mandate. Specific performance measures identified for the Family Infant Toddler Program and reported to the US Office of Special Education Programs are as follows:

1. Percent of families who report an increase in capacity to address their child's developmental needs as an outcome of receiving early intervention services.
2. Percent of infants and toddlers in the Family Infant Toddler Program who make progress in their development.

## **Objective**

All infants and toddlers with or at risk for developmental delay, and their families, shall receive quality early intervention supports and services that are accessible to all groups and communities throughout New Mexico; are respectful of individual family choices, priorities and cultural diversity; and are family-centered, by working in partnership with families within their everyday routines, activities and places.

## **SCOPE OF WORK**

Under the direction of the Early Childhood Education and Care Department Cabinet Secretary or designee, the Contractor will provide early intervention services within their specified county(s) including, early intervention direct services, early intervention service coordination, comprehensive multidisciplinary evaluations (CMEs), child find and outreach activities, and support all providers with professional development and regular administrative and reflective supervision.

## **Comprehensive Multidisciplinary Evaluations (CME) and Individualized Family Service Plan (IFSP) Development:**

- a) Conduct a CME for each child referred to evaluate the child's level of development in the following developmental domains: cognitive, physical/motor, communication, social/emotional, and adaptive behavior and their functional skills across routines within the developmental domains.
- b) Incorporate the child's health, birth history, medical history, and typical daily routines, including strengths and challenges into the CME.
- c) Generate a CME report and make accessible to the family. Through the CME process, determine and document the child's eligibility for the FIT program.
- d) Develop an IFSP for each child and family including the following IFSP team

members: Family Service Coordinator, Family, at least one member of the CME team, the planned service provider if available. which can be found here: <http://www.cdd.unm.edu/early-childhood-programs/early-childhood-learning-network/family-infant-toddler-program-training/pdfs/fit-fy21-service-definitions-standards.pdf>

- e) Submit monthly requests for reimbursement through the FIT-KIDS (Key information Data System) to the Department for completed Comprehensive Multidisciplinary Evaluations (CME) using the rate as published in the Family Support and Early Intervention Division, FIT Program - Service Definitions and Standards.
- f) Submit a monthly invoice for reimbursement based on actual number of children/families served who received a Comprehensive Multidisciplinary Evaluations (CME) that month, as documented through FIT-KIDS, using the rate per child/family as published in the Family Support and Early Intervention Division, Family Infant Toddler Program - Service Definitions and Standards.
- g) Submit detailed data on the Comprehensive Multidisciplinary Evaluations (CME) provided to children / families through the FIT-KIDS (Key Information Data System) to the Department.

#### **Delivery of Early Intervention Services:**

- a) Provide Early Intervention services in accordance with 7.30.8 NMAC requirements for Family Infant Toddler Early Intervention services regulations and Family Support and Early Intervention Division, Family Infant Toddler Program Service Definitions and Standards within the service area listed above.
- b) Deliver Early Intervention services in accordance with each child's Individualized Family Service Plan (IFSP). All Early Intervention direct service providers must be listed in NMAC 7.30.8.12 as a qualified early intervention professional.
- c) Service providers may be employees or contractors of the Contractor, refer to NMAC 7.30.8.12 for reference here for a list of approved services: **Service Delivery Early intervention services (4): Assistive technology services; Audiological services; Developmental instruction; Family therapy, counseling and training; Family service coordination; Health services; Medical services; Nursing services; Nutrition services; Occupational therapy services; Physical therapy services; Psychological services; Sign language and cued language services; Social work services; Speech and language pathology services; Transportation services; Vision services**
- d) Submit detailed data of the amount of time provided on early intervention to children / families through the FIT-KIDS (Key Information Data System) to the Department.
- e) Submit a monthly invoice for reimbursement based on actual number of children/families served who received early intervention services that month, as documented through FIT-KIDS, using the rates as published in the Family Support and Early Intervention



Division, FIT Program Service Definitions and Standards.

- f) Submit performance reporting that addresses activities completed under this scope of work in accordance with the timelines established by the FIT Program.
- g) Develop a quality assurance plan that includes, but is not limited to, developing an ongoing monitoring process which provides for the evaluation of quality, effectiveness of the services provided and the family's satisfaction with the service.
- h) Early intervention personnel early intervention personnel must work as a transdisciplinary team to address the outcomes and strategies on the Individualized Family Service Plan (IFSP).
- i) Early intervention service providers must utilize natural learning opportunities and incorporate the family's/child's daily routines, activities, and settings to promote the child's development and promote the parent/caregiver's ability to carry out these interventions.
- j) Early intervention service providers must provide services within inclusive early care and learning settings when necessary including child care, Early Head Start, etc.
- k) Early intervention providers must have the skills necessary to address the unique needs of each child including but not limited to, vision and hearing loss; autism; infants; children that experience trauma (abuse and neglect, domestic violence) or other family factors (e.g. substance abuse, homelessness etc.).
- l) Early intervention providers must use coaching within the Family Guided Routines-Based Intervention (FGRBI) framework to help families help their children reach their IFSP outcomes.
- m) Early intervention services must promote the healthy social and emotional development of children served.
- n) Early intervention provider agencies must collaborate with other agencies (Child Protective Services, Home Visiting Providers, Medical Providers, Early Childhood and Care Providers, etc.) to meet the needs of children and families served.
- o) All early intervention service must be documented and billed according to the rate structure listed in the budget table in Attachment 2 – Budget.

### **Family Service Coordination:**

- a) Provide Service Coordination in accordance with 7.30.8 NMAC Requirements for Family Infant Toddler Early Intervention Services regulations and Family Support and Early Intervention Division, Family Infant Toddler Program Service Definitions and Standards.
- b) Submit detailed data of the amount of time provided on service coordination to children / families through the FIT-KIDS (Key Information Data System) to the Department.
- c) Submit a monthly invoice for reimbursement based on actual number of children/families served who received at least one hour of service coordination that month, as documented

through FIT-KIDS, using the monthly rate as published in the Family Support and Early Intervention Division, FIT Program Service Definitions and Standards.

- d) Submit performance reporting that addresses activities completed under this scope of work in accordance with the timelines established by the FIT Program.
- e) All early intervention providing agencies must deliver Family Service Coordination (FSC) in one or more of the following models: dual role; dedicated; interim.
- f) All FSCs must use coaching within an FGRBI framework to interact with all families served.
- g) All FSCs must completed the FIT FSC Training within one year of hire.
- h) All early intervention providing agencies must submit a plan of the FSC model that will be used and a strategy for hire and staff retention within six months of this agreement being fully executed.
- i) All FSCs must possess knowledge of community resources and be able to provide these resources to families served within the FGRBI model of service delivery.
- j) FSCs must coordinate the intake, evaluation, and eligibility determination when a child and family are referred to the FIT Program.
- k) FSCs are responsible for informing families of their rights and all procedural safeguards within the FIT system at the beginning of each step of the early intervention process, including any change to the IFSP or transition plan.
- l) All FSCs must assist families in accessing training, leadership opportunities, and connection with other parents/guardians.
- m) All FSCs must prepare for and facilitate the IFSP meeting.
- n) All FSCs are responsible for location of all IFSP services and monitoring of the services with the family as the services are delivered.
- o) FSCs must address the family outcomes on the IFSP, including helping them access other services and supports.
- p) All FSCs are responsible for coordinating the transition from Part C services to other services in the community as the child approaches their third birthday.

## **Professional Development**

- a) A professional development plan must be developed for the agency must be developed to address the needs of all personnel (both new and established) to address how the ongoing training of staff will be conducted.
- b) All early intervention personnel, including contractors, must be informed of the FIT philosophy, IDEA Part C, ECECD FIT Service Definitions and Standards, and current early intervention practices being utilized in New Mexico.
- c) All personnel (including independent contractors) must receive reflective supervision and support.
- d) Submit monthly invoices for reimbursement to the Department based on cost

reimbursement i.e. expenditures for staff development activities. Maintain receipts and accounting of all staff development activities completed under this scope for audit purposes.

### **Child Find and Public Awareness**

- a) Provide Child Find and Public Awareness activities in accordance with 7.30.8 NMAC Family Infant Toddler Early Intervention Services regulations and Family Support and Early Intervention Division Service Definitions and Standards. As outlined in 7.30.8 NMAC, Child Find and Public Awareness activities are intended to:
  1. Locate, identify, and refer children with or at risk of having a developmental delay or developmental disabilities to ensure that their health problems are diagnosed and treated early, before they become more costly to address.
  2. Shall inform parents, medical personnel, local education agencies and the general public of the availability and benefits of early intervention services and how to obtain them.
- b) Conduct Presumptive Eligibility activities or other activities which assist individual children or their families in becoming eligible for the Medicaid Program or maintaining eligibility for the Medicaid program.
- c) Submit a Child Find and Public Awareness plan in the format provided. The plan must be approved by the Family Infant Toddler Program prior to reimbursement being made.
- d) Submit monthly invoices for reimbursement to the Department based on cost reimbursement i.e. expenditures for child find activities.
- e) Maintain receipts and accounting of all activities completed under this scope for audit purposes.
- f) Submit a quarterly report that details specific activities completed under this scope of work in the format provided.

### **Attachment 2 - Budget**

This agreement is based on a fee-for-service rate structure. Part C of IDEA/FIT Program is the payor of last resort. The following two funding sources must be billed prior to billing the FIT program. Families shall not be billed for any FIT services in New Mexico.

- Medicaid
- Private Insurance

### **COMPENSATION**

For services satisfactorily performed pursuant to the Attachment 1 - Scope of Work the PROVIDER shall be paid by the DEPARTMENT in accordance with rates published in the Family Support and Early Intervention Division, Family Infant Toddler Program / Medicaid Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Service Definitions and Standards as periodically updated and amended. These standards can be located at the following link: <http://www.cdd.unm.edu/early-childhood-programs/early-childhood-learning-network/family-infant-toddler-program-training/pdfs/fit-fy21-service-definitions-standards.pdf>

The PROVIDER shall input monthly billing information into the FIT-KIDS (Key Information Data System) reflecting the total allowable costs incurred during the preceding month. Source documentation substantiating the signed invoice or claim shall be made available to the DEPARTMENT without notice in accordance with Article VIII, Maintenance of Records, of this Agreement for inspection.