

POLICY ADVISORY-1

Federal Laws About Care Coordination

Money for care coordination

When Congress makes laws that authorize the federal government to help state and local agencies carry out a program, it also gives money to the federal agency and directs that the money be passed down to the state and local agencies.

Many professionals and other policymakers do not know that these funding streams exist. As parents, you can partner with others in your community to make sure that your state and local agencies use the funds that have been set aside for care coordination. You also can make sure that your state and local agencies have a plan for using the funds wisely.

Beach Center on Disability

Making a Sustainable Difference in Quality of Life



- The Deficit Reduction Act (2006) authorizes a state to use Medicaid funds for care coordination. The state must provide care coordination related to transportation and making and keeping appointments with health-care providers. The state may offer additional care coordination services. Among these are care coordination in connection with a child's "medical home." The state chooses which care coordination activities it needs and then reimburses the providers. [Click here](#) for excerpts.
- The Tax Relief and Health Care Act (2006) allows for federal funding of certain pilot projects, including a "medical home" and care coordination for individuals with complex medical conditions. [Click here](#) for excerpts.
- The Social Security Act authorizes pilot projects related to care coordination for children with special health care needs. Professionals sometimes refer to the law as "Section 501 Care Coordination." [Click here](#) for excerpts (<http://www.hrsa.gov/about/budgetjustification08/mchblockgrant.htm>).

Support to access care coordination

The Deficit Reduction Act also creates *Family-to-Family Health Information Centers*. These information centers are authorized by another law, embedded in the Deficit Reduction Act, namely, the Family Opportunities Act. These information centers can help you find care coordination within the "medical home." They also can help you advocate for care coordination for your own child or for other families in your community. The information centers will link you with other organizations within your state to create a powerful collaboration to improve care coordination. [Click here](#) for excerpts.

IDEA and care coordination

The Individuals with Disabilities Education Act (IDEA), Part C, requires early intervention agencies to develop a Individualized Family Support Plan (IFSP). The IFSP must list the early intervention services the child and family will receive. Among the service is "service coordination." 20 USC Sec. 1436(a)(4)(E)(vii). You may [read excerpts](#) about the requirements for service coordination at <http://www.nectac.org/topics/scoord/scoord.asp> or go to <http://www.nectac.org/idea/303regs.asap#scoord> for a definition of service coordination under the current Part C regulations.

In Vermont, C service coordinators work with each child's pediatrician and include the pediatrician as part of the Part C team. The state pays the coordinator from its Medicaid funds and by increasing its reimbursement rates for the pediatrician's time.

In many other states, early intervention agencies choose to coordinate only the services they provide. Because early intervention agencies need to use their funds in the most effective way, these agencies have decided that coordinating with non-Part C programs is simply beyond their capacity.

IDEA also provides that, after an infant/toddler leaves early intervention services and enters preschool or elementary school, she has a right to “related services” required for her to benefit from special education. Among the related services is school nurse services and school social work services. School nurse services means services in school provided by a qualified nurse; the law does not require the nurse to offer service coordination or care coordination, nor does it prohibit the nurse from doing so. Social work services include mobilizing school and community resources, which the law does not define. 20 USC Sec. 1402(26).

Agency policy

The policies of any agency of the federal government reflect the laws Congress has passed and how those laws have been interpreted by other agencies. You can use the policies in testifying, drafting legislation, and applying for funds from government-sponsored pilot projects, or even projects funded by private nonprofit organizations.

Healthy People 2010, for instance, favors the medical home and care coordination for children with special health care needs. It sets out six goals for these children. The Department of Health and Human Services, Division of Maternal and Child Health, and the Centers for Disease Control are lead agencies in implementing Healthy People 2010. The Division of Maternal and Child Health, in particular, has specific policies regarding care coordination and the medical home approach.

Action Steps

- Recognize that three federal laws (Deficit Reduction Act, Tax Relief and Health Care Act, and Social Security Act) authorize care coordination, and bring those laws to the attention of your state and local representatives and agency directors.
- Emphasize to decision-makers that the Individuals with Disabilities Education Act requires coordinated early intervention and use the Vermont approach as an example of good practice.
- Stress to decision-makers that Healthy People 2010 values care coordination as a way of improving health and reducing costs of health care.

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