Early Support for Infants & Toddlers

ESIT Family Cost Participation (FCP) Decision Process

Child has been determined eligible for ESIT and will receive services subject to Family Cost Participation

- **Child is enrolled in Apple Health/Medicaid and has no private health care coverage**
  - Family has been notified of intent to bill Apple Health/Medicaid and has **given permission** for release of personally identifiable information for billing purposes
  - Meets FCP Requirement

- **Child is enrolled in Apple Health/Medicaid and has private health care coverage**
  - Family has been notified of intent to bill Apple Health/Medicaid and has **given permission** for access to public and private coverage and release of personally identifiable information for billing purposes
  - Meets FCP Requirement

- **Family is income eligible for Apple Health/Medicaid and declines to enroll**
  - The family above 200% of FPL is placed on Monthly Fee Schedule based on family size and annual adjusted income
  - Meets FCP Requirement

- **Family only has private health care coverage**
  - Family **has given permission** for access to private coverage and release of personally identifiable information for billing purposes
  - Meets FCP Requirement

- **Family does not have public or private health care coverage**
  - The family **has completed** the Income and Expense Verification form
  - Meets FCP Requirement

- **Family has been notified of intent to bill Apple Health and has not given permission for access to public and private coverage or release of personally identifiable information for billing purposes**
  - Family **has not given permission** for access to private health care coverage or release of personally identifiable information for billing purposes and has **declined to complete** Income and Expense Verification form
  - Meets FCP Requirement

- **Family above 200% of FPL is placed on Monthly Fee Schedule based on family size and annual adjusted income**
  - The family is placed on the Monthly Fee Schedule based on family size and annual adjusted income
  - Meets FCP Requirement

- **Family above 200% of FPL is placed on Monthly Fee Schedule based on family size and annual adjusted income**
  - The family is placed on the Monthly Fee Schedule at the highest level based on family size
  - Meets FCP Requirement

SOPAF FAMILY COST PARTICIPATION DECISION PROCESS CHART

(Version 4-24-13)