

Reporting *Early On*® Services in the Michigan Student Data System (MSDS)

The Michigan Student Data System (MSDS) *Early On* Services component and the Timely Start of Service characteristic in the *Early On* component gather service delivery data including length, frequency, and timeliness of all services provided for children with an Individualized Family Service Plan (IFSP). This includes all children with an active IFSP in *Early On*, and children who have exited during the current MSDS submission period, whether eligible for Michigan Mandatory Special Education (MMSE) or not. It includes services provided for children with any IFSP, whether an initial, an annual, or a periodic review.

Reporting in MSDS

Data in MSDS are divided into components (data groupings), each with its own characteristics (data fields). The *Early On* Services component has three characteristics: Service Code, Length in Minutes, and Frequency of Service. Documentation, including the MSDS Collection Details Manual and the Matrix and Schema documents, for the new *Early On* Services component and the *Early On* component are provided on the [MSDS General Collection page of the Center for Educational Performance and Information \(CEPI\) website](https://www.michigan.gov/cepi/0,4546,7-113-986_50502_53580---,00.html) (https://www.michigan.gov/cepi/0,4546,7-113-986_50502_53580---,00.html).

Services

Services must be reported for all children participating in *Early On* who were active with an IFSP at any point during the MSDS collection period, whether they were active the entire collection period, entered part way through, or exited part way through. MSDS business rules require at least one service code be submitted; however, data for a maximum of five services can be reported. The submitted service codes must include services on any IFSP (initial, annual, or periodic review) that was active at any point during the collection period. Services reported must include both Part C Only and Part C with MMSE services, except when the Result of Initial IFSP characteristic in the Initial IFSP component is code 04 (Eligible for Both Part C and Special Ed – Part C services declined).

The services reported must be services that are on the child's IFSP with one exception. Because service coordination, evaluation, and assessment are required components of Part C services, all children participating in *Early On* receive service coordination, evaluation (unless eligible under established conditions), and assessment. Having an IFSP means that service coordination, evaluation, and assessment are being provided and should therefore be reported in MSDS whether explicitly listed as a service on the IFSP or not. Service coordination, evaluation, and assessment will all be captured with one service code (code 818) in MSDS. Providers must meet the requirements within the [Early On Personnel Standards](https://www.michigan.gov/documents/mde/2-4-15_FINAL_Personnel_Document_for_posting_480825_7.pdf) (https://www.michigan.gov/documents/mde/2-4-15_FINAL_Personnel_Document_for_posting_480825_7.pdf) for the activity they are performing whether delivering service, providing service coordination, or conducting evaluation or assessment.

Length in Minutes and Frequency of Service

The data reported to MSDS are the aggregated totals for Length in Minutes and Frequency of Service for each service type being reported during the MSDS reporting period. Length in Minutes and Frequency of Service data must each be reported in whole numbers.

Within the MSDS, the only way to record Length in Minutes and Frequency of Service data is connected to the "800" service codes in the Service Code characteristic of the *Early On* Services component. Local data systems that track MMSE services using the Program Service Code or Support Services characteristics within the Special Education component will need to crosswalk these codes with the Service Code characteristics within the *Early On* Services component. In addition, all services must be reported in the *Early On* Services component. For example, what may previously have been tracked only as code 370-PT will also need to be reported as code 808-PT in the *Early On* Services component where it will be connected to the Length in Minutes and Frequency of Service data.

Timeliness of Services

The reporting requirements are unchanged for the Timely Start of Service field in the *Early On* component. The coded value should reflect all new services on any IFSP (initial, annual, or periodic review) and initiated or due to be initiated during the current MSDS collection period.

Calculating Minutes and Frequency

MSDS is a record specific to an individual child reflecting the child and family's participation in educational programs and services. The Frequency of Service and Length in Minutes data must be calculated and reported reflecting the elapsed time the child/family spent receiving service, regardless of how many providers were engaged in the service delivery event. In the case of teaming time or service coordination, the elapsed time spent specific to the individual child is reported whether or not the child/family was present during the service delivery event. One service delivery event may be counted toward the Frequency of Service delivery of more than one service type if each service is listed on the child's IFSP and each service is provided by a provider with the required qualifications. The total minutes of service reported from one service delivery event may not be more than the elapsed time of the event for any individual child; however, if more than one child is served, the total elapsed time may be reported for each child. Following are a few examples:

- 1) For the "simple" event of one provider providing one service to one child/family, the data to record for that one event are clear: the Length in Minutes is how long the service delivery event lasted; the Frequency of Service is one, and the service code is for the provided service as listed on the child's IFSP.
- 2) In the case where one provider delivers multiple services to one child, one service delivery event will be recorded for each service type, and the total minutes of the service delivery event will be divided between the service codes. For example, if family training and speech service are both listed on the child's IFSP and provided by one provider to the child/family in a one-hour visit, the sum of the minutes for the 802-FTC code and the 814-SLP code will equal 60. For one provider to deliver more than one service type, the provider must meet qualifications of each service

type. To see more about required provider qualifications, see the [Early On Personnel Standards](https://www.michigan.gov/documents/mde/2-4-15_FINAL_Personnel_Document_for_posting_480825_7.pdf) (https://www.michigan.gov/documents/mde/2-4-15_FINAL_Personnel_Document_for_posting_480825_7.pdf).

- 3) In the case where a co-visit by two providers delivers multiple services to one child which are each listed on the child's IFSP, one service delivery event will be recorded for each service provided. The minutes to be reported will be a split of the time elapsed during the service delivery event. The total time reported across all services provided during the service delivery event may not be greater than the total elapsed time. For example, a PT and an SLP conduct a joint visit providing 45 minutes of PT and SLP services concurrently. The PT, who is the service coordinator, then provides 15 minutes of service coordination. In this example, record the Frequency of Service as one for PT, one for SLP, and one for service coordination. The Length in Minutes for the 808-PT and 814-SLP will be a split of the 45 minutes and the Length in Minutes for 818-Service Coordination will be 15 minutes.

Time spent on service coordination should be separated from other service delivery time and reported as service coordination to the extent possible and reasonable. For example, a 30 second suggestion of a resource mentioned in the course of service delivery need not be separated from the service delivery time for reporting. A half-hour spent specifically on a periodic review should, however, be separated from service delivery time and reported as service coordination time. When multiple service coordination activities are conducted within one service delivery event, the service delivery event should be reported as one for service coordination for Frequency of Service and reported as the accumulated time for all the service coordination activities for the Length in Minutes.

The tables in the appendix provide guidelines on recording Length in Minutes and Frequency of Service for a variety of provider/child/service combinations. Scenarios are categorized in the tables as follows:

- Table 1 provides sample scenarios and guidance involving one service provider.
- Table 2 provides sample scenarios and guidance involving more than one provider.
- Table 3 provides sample scenarios and guidance for reporting on teaming time.
- Table 4 provides sample scenarios and guidance for reporting on services coordination, evaluations, and assessments.

For most scenarios, a service delivery event and number of minutes will both be reported. For a few scenarios, minutes may be reported without reporting a service delivery event for Frequency of Service because the minutes related to the scenario described are considered additional minutes related to a service delivery event already reported under another scenario although separated in time. This would be the case for prep time or follow-up time related to a specific delivery of service coordination.

Not all the scenarios listed are expected to take place in every local service area. The scenarios listed are intended to reflect the variety of potential service delivery methods used across the state and provide guidance on reporting for each of those service delivery methods. Conversely, the appendix may not include all possible scenarios. No matter the scenario, reporting should align with the principles provided in this guidance document.

Appendix

Scenarios and Reporting Guidelines

Table 1: Early On Service Frequency and Minutes – Service Delivery Scenarios with One Provider*

Scenario	Frequency of Service	Length in Minutes
One provider providing one type of service with one child/family.	Report one service delivery.	Report the number of minutes service was provided.
One provider providing two or more types of service with one child/family.	Report one service delivery for each service.	Split the elapsed time between the services provided. Total may not exceed the elapsed time.
One provider providing one type of service with a group of children/families OR with two or more children in one family simultaneously.	For each child, report one service delivery.	For each child, report the number of minutes service was provided, which may not exceed the elapsed time. The elapsed time may be reported for each child.
One provider providing two or more types of service with a group of children/families OR with two or more children in one family simultaneously.	For each child, report one service delivery for each service.	For each child, split the elapsed time between the services provided. The elapsed time may be reported for each child. For each child, the total may not exceed the elapsed time.

Table 2: Early On Service Frequency and Minutes - Service Delivery Scenarios with Multiple Providers*

Scenario	Frequency of Service	Length in Minutes
Joint visit by two or more providers jointly providing one type of service with one child/family.	Report one service delivery.	Report the total elapsed number of minutes service was provided.
Joint visit by two or more providers providing two or more types of service with one child/family.	Report one service delivery for each service.	Split the elapsed time between the services provided. Total may not exceed the elapsed time.
Joint visit by two or more providers providing one service type with two or more children in one family simultaneously OR multiple providers providing one type of service with a group of children/families.	For each child, report one service delivery.	For each child, report the number of minutes service was provided, which may not exceed the elapsed time. The elapsed time may be reported for each child.

Scenario	Frequency of Service	Length in Minutes
Joint visit by two or more providers providing two or more types of service with two or more children in one family simultaneously OR multiple providers providing two or more types of service with a group of children/families.	For each child, report one service delivery for each service.	For each child, split the elapsed time between the services provided. The elapsed time may be reported for each child. For each child, the total may not exceed the elapsed time.

Table 3: Early On Service Frequency and Minutes – Teaming Time

Scenario	Frequency of Service	Length in Minutes
Teaming time – general discussions.	Not reported in <i>Early On Services</i> component.	Not reported in <i>Early On Services</i> component.
Teaming time – time discussing the services for a specific child/family that are listed on that child’s IFSP.	For each child, report one service delivery for each service listed on the child’s IFSP that is discussed or one delivery of service coordination.	For each child, report the number of minutes each service listed on the child’s IFSP was discussed or report the minutes during which a specific child’s services were discussed as service coordination for that child.

Table 4: Early On Service Frequency and Minutes – Service Coordination, Evaluation, or Assessment*

Scenario	Frequency of Service	Length in Minutes
Service coordination activities** conducted before or after initial IFSP is signed by parent for a child whose referral results in an IFSP, whether conducted through in person, virtual, electronic communications, phone conversations, etc.	Report one delivery of service coordination (code 818).	Report the total number of minutes provider spent on the service coordination activity.
Prep and follow-up paperwork time spent by the service provider related to service coordination related to a specific child.	Not reported in <i>Early On Services</i> component as a separate instance of service coordination – this should be considered part of the instance of service coordination for which it is prep or follow up.	Report the total number of minutes provider spent on the service coordination activity. These minutes are considered part of the instance of service coordination for which they are prep or follow up.

Scenario	Frequency of Service	Length in Minutes
Initial evaluation or initial assessment time.	Report one delivery of evaluation or assessment (code 818).	Report the total number of minutes provider spent on the evaluation or assessment.
Evaluations conducted after initial IFSP is signed by parent.	Report as one service delivery of evaluation (code 818).	Report the number of minutes spent on the evaluation.
On-going assessment after initial IFSP is signed by parent.	May be embedded in reporting of other service delivery OR be reported as one service delivery of assessment (code 818) for each time provider meets with parent for purpose of on-going assessment.	Report the number of minutes reflecting the total elapsed minutes spent on on-going assessment separate from service time.
Initial IFSP meeting, periodic review or annual IFSP meeting time (may include meeting to develop the transition plan and/or transition conference).	Report each as one service delivery of service coordination (code 818).	Report the number of minutes reflecting the duration of the meeting.
Transition conference when held separate from an IFSP meeting, including if held as a separate event immediately following an initial IFSP meeting.	Report as one service delivery of service coordination (code 818).	Report the number of minutes reflecting the duration of the meeting.
Meeting with <i>Early On</i> provider(s) and parent present to conduct a REED at transition from Part C to Part B.	Report as one service delivery of service coordination (code 818).	Report the number of minutes reflecting the duration of the meeting.
Initial IEP at transition from Part C to Part B if <i>Early On</i> provider(s) participate directly in the IEP meeting.	Report as one service delivery of service coordination (code 818).	Report the number of minutes reflecting the duration of the meeting.
Cancelled service delivery events and no shows.	Not reported in <i>Early On</i> Services component.	Not reported in <i>Early On</i> Services component.
Prep and follow-up paperwork time spent by the service provider related to service provision other than service coordination.	Not reported in <i>Early On</i> Services component.	Not reported in <i>Early On</i> Services component.

*Providers must meet the requirements within the [Early On Personnel Standards](https://www.michigan.gov/documents/mde/2-4-15_FINAL_Personnel_Document_for_posting_480825_7.pdf) (https://www.michigan.gov/documents/mde/2-4-15_FINAL_Personnel_Document_for_posting_480825_7.pdf) for the activity they are

performing whether delivering service, providing service coordination, or conducting evaluation or assessment.

**Service coordination activities may include any of the activities reflected in the following IDEA Part C regulation:

§ 303.34 Service coordination services (case management).

(a) General.

(1) As used in this part, service coordination services mean services provided by a service coordinator to assist and enable an infant or toddler with a disability and the child's family to receive the services and rights, including procedural safeguards, required under this part.

(2) Each infant or toddler with a disability and the child's family must be provided with one service coordinator who is responsible for—

(i) Coordinating all services required under this part across agency lines; and

(ii) Serving as the single point of contact for carrying out the activities described in paragraphs (a)(3) and (b) of this section.

(3) Service coordination is an active, ongoing process that involves—

(i) Assisting parents of infants and toddlers with disabilities in gaining access to, and coordinating the provision of, the early intervention services required under this part; and

(ii) Coordinating the other services identified in the IFSP under § 303.344(e) that are needed by, or are being provided to, the infant or toddler with a disability and that child's family.

(b) Specific service coordination services. Service coordination services include—

(1) Assisting parents of infants and toddlers with disabilities in obtaining access to needed early intervention services and other services identified in the IFSP, including making referrals to providers for needed services and scheduling appointments for infants and toddlers with disabilities and their families;

(2) Coordinating the provision of early intervention services and other services (such as educational, social, and medical services that are not provided for diagnostic or evaluative purposes) that the child needs or is being provided;

(3) Coordinating evaluations and assessments;

(4) Facilitating and participating in the development, review, and evaluation of IFSPs;

- (5) Conducting referral and other activities to assist families in identifying available EIS providers;
- (6) Coordinating, facilitating, and monitoring the delivery of services required under this part to ensure that the services are provided in a timely manner;
- (7) Conducting follow-up activities to determine that appropriate part C services are being provided;
- (8) Informing families of their rights and procedural safeguards, as set forth in subpart E of this part and related resources;
- (9) Coordinating the funding sources for services required under this part; and
- (10) Facilitating the development of a transition plan to preschool, school, or, if appropriate, to other services.

(c) Use of the term service coordination or service coordination services. The lead agency's or an EIS provider's use of the term service coordination or service coordination services does not preclude characterization of the services as case management or any other service that is covered by another payor of last resort (including Title XIX of the Social Security Act—Medicaid), for purposes of claims in compliance with the requirements of §§ 303.501 through 303.521 (Payor of last resort provisions). (Authority: 20 U.S.C. 1432(4), 1435(a)(4), 1436(d)(7), 1440)