

**DOCUMENTATION OF CHANGE IN FIRST STEPS SERVICES
DUE TO CHANGES IN COST PARTICIPATION PROGRAM**

Child's Name: _____ DOB: _____

Parent(s)' Name: _____ Address: _____

IFSP date: _____

County: _____

This change is resulting in: ☐ Family choosing to **reduce** current FS services due to CP
☐ Family choosing to **exit** FS services due to CP
☐ Family choosing **not to enter** FS due to CP
Opted out at ☐Referral ☐Intake ☐IFSP

Reason for change: ☐ Income falls between 251% - 350% of FPL and Family now has **co-pay for the first time** due to reduction of co-pay threshold

☐ **Co-pay raised** and family wishes to make change
_____ Old co-pay _____ New co-pay
_____ Old co-pay max _____ New co-pay max

Brief summary of discussion that resulted in this change: _____

Signature of Ongoing Service Coordinator / Intake Coordinator

Date

For families currently enrolled in First Steps services, a **transition meeting must still be held** / attempted and a complete **transition packet must be completed**. Ongoing Service Coordinators are to discuss this issue with families, send a 10-day Prior Written Notice and conduct the transition meeting. At the discretion of the family, services can be terminated immediately upon having this conversation with the family, but the transition meeting should still take place. Upon completion of the transition meeting, Ongoing Service Coordinators are to complete the file, including the file termination paperwork, and submit to the SPOE as soon as possible.

☐ Transition meeting completed

☐ Transition packet completed

Please fax / email this completed form to: Dawn Carlson, SPOE Supervisor

Place a copy of this form under the closure form and it will be included in the child's permanent record.