

New York State Early Intervention Coordinating Council Minutes – March 23, 2021

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Agenda Item	Discussion	Action Items
	A motion was made by Kayleigh Zaloga and a second by Lynn Shea to approve the December 3, 2020 meeting minutes. Nineteen (19) members voted in favor, none opposed, and two (2) abstained. The minutes from the December 3, 2020, meeting passed.	
<p>New Business <i>Vice Chair Nominations</i></p> <p><i>Bureau Administrative Updates</i></p> <p><i>Early Intervention Program Regulations Update</i></p>	<p>Ms. Jones informed the Members because this meeting is being held virtually, Katie Reksc will email them directly asking them for their nominations for Vice Chair. All Members who receive a nomination will be contacted by the Department to determine their interest in accepting the nomination. The names of those who accept the nomination will be on the election ballot at the June meeting.</p> <p>Dr. Donohue provided the following Bureau Administrative updates:</p> <ul style="list-style-type: none"> • A brief overview of administrative changes in the proposed budget <ul style="list-style-type: none"> a) Teletherapy – the proposal is to make the rates consistent with facility-based rates, which takes out the transportation component b) Extended services, both individual and group, and the billing construct – the goal and intent of these proposals is to ensure that infants and toddlers with developmental delays or disabilities receive the attention and the therapeutic benefit that they should be getting in connection with EI services provided in any setting, whether individual or group – to fulfill services recommended in the IFSP and also ensure alignment with current billing rules • Reviewed COVID-19 guidance related to quarantine that was issued on March 10, 2020 titled “Update to Interim Health Advisory, Revised Protocols for Personnel Health Care and Other Direct Care Settings to Return to Work following COVID-19 Exposure” • Health Homes serving children in EI is at status quo from the December 2020 meeting. Providers who wish to provide both health home care management and EI service coordination services may reach out to OHIP, Health Homes, or the EI Provider and Approval Unit • US Department of Special Education Programs (OSEP) five (5) year monitoring of states for both Part B (Preschool) and Part C (EI) programs is on pause until Fall 2021 <p>Mr. Held commented on the Article 7 bill and changes in regulation that could come from the legislature, or from the Department without approval from the legislature. Dr. Donohue clarified that the Department didn’t propose any Article 7 changes related to the proposals and that the proposals are administrative in nature.</p> <p>Ms. Shea inquired about the official protocol of guidance for the clinical review of the EICC before protocols go out - there are times when the protocols go out to the public that the EICC members do not have prior to their release. Dr. Donohue responded that there is an extensive review process and that some of the review for COVID-19 guidance goes through the executive deputy clearance process before being posted on the Department’s website, while guidance that is more administrative in nature might go to the division and center or division, center, and office for clearance. General program guidance wouldn’t all be seen by EICC members, so it is recommended that members sign up for the BEI listserv, because EICC meetings are quarterly and some items go through clearance between the meetings.</p> <p>Dr. Donohue reviewed the proposed amendments to the EI program regulations (see presentation). The concept approval document was reviewed at the December 16, 2020 meeting of the Department’s Regulatory Advisory Committee.</p> <p>Dr. Wu provided an update on COVID-19 EI service data, comparing the general services delivered to infants and toddlers with disabilities in the year 2019 to year 2020 (see presentation). In 2019: 14,982 rendering providers delivered 7,132,054</p>	

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<p><i>COVID-19 Data Update</i></p> <p><i>Open Discussion</i></p>	<p>services to 59,346 children. In 2020: 13,751 rendering service providers provided 5,339,317 services to 52,477 children. There was a 25% reduction in volume of services during the pandemic, and the number of services per child was reduced by 15% in calendar year 2020 compared with calendar year 2019.</p> <p>Open discussion topics included: the Facebook Group for families; teletherapy, particularly teletherapy rates being adjusted to facility-based rates and how teletherapy would be incorporated into the EIP after the pandemic; and behavioral and mental health supports that could be provided to families by NYS agencies/health and wellness initiatives, how to communicate that information with parents, and how to get it to the Service Coordinators. In addition, there was conversation about the type of language used to get the message of assistance to the public, being mindful of diversity and equity within communities.</p> <p>The Office of Mental Health is in receipt of a grant from FEMA for two (2) primary activities: 1) emotional support line to provide crisis counseling over the phone or redirecting people to particular services and supports and 2) crisis counselors that work in a focused way in 12 identified counties where COVID has had the most impact.</p>	
<p>Report of Task Force Activities</p> <p><i>Provider Workforce Capacity Task Force including Competency- Based Training and Telehealth Update</i></p>	<p>Linda Rennie, EICC Provider Member, EIO Nassau County, and Marina Yoegel, EICC County Member, EIO Westchester County, provided an update on the Provider Workforce Capacity Task Force activities (see presentation). Ms. Rennie reviewed the original task force proposed charter and the two (2) recommendations of the Task Force from the first year. There was an update to the recommendations which established two subgroups: Telehealth and Training related to competency areas for early intervention (EI) professionals. The Department assisted the Task Force with some rewording of the recommendation to address the underserved areas and equity, so it now reads “targeted restructure of cost neutral reform to address equity and capacity in underserved areas.”</p> <p>Telehealth – A family and a provider survey have been developed to gather input about their experiences with telehealth. The Task Force requests the EICC review both surveys and provide feedback. With EICC agreement, the Task Force requests that the Council vote to recommend these surveys be sent out to EI families and providers. The Department will analyze the survey results and share those results with the Task Force and Council.</p> <p>Competencies – Five (5) competencies were developed specific to the NYS EIP. The Task Force recommended augmenting fieldwork placements/clinical practicums in home and community settings to ensure that EI workforce is prepared through training and experience to provide quality EI services. The competencies are evidence-based and reflect the recommendations from national professional associations across disciplines. They are in line with applicable federal and state laws regulating therapists and teachers in their work with toddlers and their families and toddlers with developmental delays and disabilities and their parents and caregivers. The competency areas bring multicultural and linguistic factors to the forefront to address the diversity of the NYS communities. The competencies were reviewed.</p> <p>The Task Force will continue with monthly calls, alternating months to continue their work on Telehealth and Competencies and will discuss targeted restructure-cost neutral reform.</p> <p>There were discussions about targeted restructure-cost neutral reform, evidence-based versus best practices, and the final version of the competency document. Karen Edwards commented that the competency document, as written, doesn’t contain measurable competencies that could be used to provide continuing education and to inform graduate education programs around what NYS EI would like to see them include in their curriculum. Another version may be necessary to write the competencies in the traditional standard form of illustrating desired, measurable outcomes in terms of knowledge and skills, or a companion document may be needed to address this.</p>	<ul style="list-style-type: none"> • Task Force update will be given at the June 16, 2021 meeting • EICC to review & provide feedback on telehealth surveys, which will then be distributed to EI families and providers • The Department will analyze the data from the returned surveys and prepare to report findings at the June 16, 2021 meeting • More clarification about the Competencies will be provided at the June 16, 2021 meeting

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	<p>A motion was made by Steve Held and a second by Donna Bradbury for the Task Force survey created to be sent out to the provider and parent and caregiver families regarding their telehealth experience. Eighteen (18) members voted in favor, none opposed, and two (2) abstained. The motion passed and the surveys will be distributed.</p> <p>A motion was made Steve Held and a second by Cheryl Hogan to accept these competency areas as a foundation through which to view evidence-based best practices in early intervention, and look at creating a future companion document more focused on training for higher educational institutions. Fourteen (14) members voted in favor, three (3) opposed, and four (4) abstained. The motion passed. More clarification will be provided at the June meeting.</p>	
Lunch Break	<i>12:54 p.m. to 1:20 p.m.</i>	
<p>Report of Additional Department Activities</p> <p><i>NYActs Project – Learn the Signs, Act Early</i></p> <p><i>State Systemic Improvement Plan (SSIP) Update</i></p> <p><i>EHDI Update</i></p> <p><i>EI-Hub Update</i></p> <p><i>PCG (State Fiscal Agent) (SFA) Update</i></p>	<p>Melissa Passarelli, Director of Programs at Docs for Tots, and the New York State Act Early Ambassador, presented on the NYActs project, Learn the Signs, Act Early (LTSAE) (see presentation). Ms. Passarelli provided a campaign overview, how it could be potentially used with EI, the role of an Act Early Ambassador, and an update on the program.</p> <p>The goal of the campaign is to help parents and other care providers learn the signs of typical development and then act early on concerns if they're not seeing that typical development happening – which could include talking to their doctor, asking for a developmental screen, or connecting with early intervention. For more information and to access free materials and trainings visit cdc.gov/actearly.</p> <p>Jessica Simmons, Training, Technical Assistance, and SSIP/Outcomes Unit, provided an update on the SSIP (see presentation). This year's SSIP work to improve family outcomes focused on the development of 30 trainings for providers and parents. All training will be provided on the Department's webpage in Spring 2021. The Department will submit its annual report to OSEP on April 1, 2021. Proceeding forward, the SSIP will focus on implementing strategies to increase the number and quality of family-directed assessments completed in the program and to increase the percentage of positive responses from families collected annually using the family outcomes survey. A new EI Facebook group for families was successfully launched this month. Also, a new family electronic listserv was created as another way for the Department to connect with EI families. Also, a postcard to promote the Facebook group and listserv for families was developed and is currently being printed. There was a brief discussion about what a good target response rate would be for the family-directed assessment.</p> <p>Rubab Zahra-Hassan, Program Coordinator, Early Hearing Detection Intervention, EHDI, provided an overview and an update on the EHDI program. She reviewed the program goals, outlined what the EHDI process looks like and what guidance and technical assistance the program provides to the different providers throughout the process, and explained program activities. There were discussions about cochlear implants and the national EHDI guidelines.</p> <p>Jim Bryant, Project Manager, NYSTEC, Rob Lillpopp and Ryan White, PCG, provided an update on the EI-Hub (see presentation). Mr. Bryant encouraged stakeholders to submit any questions to eiHub@health.ny.gov. The Go Live date has been delayed from May 2021 to a later date. NYEIS timelines and the decommissioning date of September 1, 2021, are under review as new project timelines are being developed.</p> <p>Rob Lillpopp provided an update from PCG (see presentation). PCG is still working with Billing Providers to enroll Commercial Payers to receive Remittance data via HIPAA compliant 835 files. Mr. Lillpopp reminded providers to sign up for 835 files.</p>	<ul style="list-style-type: none"> • Update on the EI Hub will be given at the June 16, 2021 meeting • PCG Update will be given at the June 16, 2021 meeting

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<i>Fiscal Agent Payment Data Update</i>	Ken Moehringer, Fiscal Planning and Policy Unit Manager did not present due to time constraints. Mr. Moehringer will provide a Fiscal Agent Payment Data update at the June 16, 2021 meeting.	<ul style="list-style-type: none"> • Fiscal Agent Payment Data Update will be given at the June 16, 2021 meeting
Public Comment	Public comments were submitted prior to the meeting and read aloud. Due to time constraints, the public comments were read after the EI-Hub Update. One comment was received from Bob Trapani, Occupational Therapist, and owner of Thrive by 5, regarding the frequency of service being provided to children in EI, particularly to medically fragile children (MFC).	<ul style="list-style-type: none"> • BEI to review data on medically fragile children (MFC) in the EIP per year
Future Agenda Items	<p>Agenda items suggested by EICC members for future EICC meetings include:</p> <ul style="list-style-type: none"> • OASAS and OMH presentation providing materials/resources/supports for families in recovery or with mental health issues (during COVID-19 and beyond) • Telehealth & the teletherapy survey – further discussion on how teletherapy will be added to the EIP as a permanent option for delivery of EI services and related matters • Provider types in the Medicaid State Plan and whether the new mental health QP can do evaluations. • Changing the EICC meeting schedule so the EICC could comment on Article VII/budget bills • Budget proposals • COVID-19 • Medically Fragile Children • Health Homes • Family directed assessments 	
Adjournment	The meeting was adjourned by Talina Jones at 3:16 p.m.	