

**New York State Early Intervention Coordinating Council  
Minutes – June 16, 2021**

Agenda Item	Discussion	Action Items																																																				
Welcome	The following members/designated representatives attended the meeting:																																																					
	<table><tr><td>x</td><td>Lynn Amell</td><td>x</td><td>Leah Esther Lax</td></tr><tr><td>x</td><td>Jessica Benton</td><td>x</td><td>Lidiya Lednyak</td></tr><tr><td></td><td>Marcelle Bichotte-Dunner</td><td>x</td><td>Melissa Puchalski</td></tr><tr><td>x</td><td>Heidi Bond</td><td>x</td><td>Linda Rennie</td></tr><tr><td>x</td><td>Donna Bradbury - late</td><td>x</td><td>Cheryl Schaefer Coppola</td></tr><tr><td>x</td><td>Brigitte Desport - late</td><td>x</td><td>Lynn Shea</td></tr><tr><td>x</td><td>Amy De Vito – late</td><td>x</td><td>Robin Stegman</td></tr><tr><td>x</td><td>Karen Edwards</td><td>x</td><td>Angella Timothy</td></tr><tr><td>x</td><td>Meghan Glass</td><td>x</td><td>Elina Tsenter</td></tr><tr><td>x</td><td>Steve Held</td><td>x</td><td>Antonia Weidner - late</td></tr><tr><td>x</td><td>Cheryl Hogan</td><td>x</td><td>Marina Yoegel</td></tr><tr><td>x</td><td>Talina Jones</td><td>x</td><td>Ka yleigh Za loga</td></tr><tr><td></td><td>Paola Jordan</td><td>x</td><td>Patricia Zuber-Wilson</td></tr></table>	x	Lynn Amell	x	Leah Esther Lax	x	Jessica Benton	x	Lidiya Lednyak		Marcelle Bichotte-Dunner	x	Melissa Puchalski	x	Heidi Bond	x	Linda Rennie	x	Donna Bradbury - late	x	Cheryl Schaefer Coppola	x	Brigitte Desport - late	x	Lynn Shea	x	Amy De Vito – late	x	Robin Stegman	x	Karen Edwards	x	Angella Timothy	x	Meghan Glass	x	Elina Tsenter	x	Steve Held	x	Antonia Weidner - late	x	Cheryl Hogan	x	Marina Yoegel	x	Talina Jones	x	Ka yleigh Za loga		Paola Jordan	x	Patricia Zuber-Wilson	
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	Department of Health staff present: Peter Baran, Constance Donohue, Ann-Margret Foley, Mike Iorio, Kelli Lyndaker, Kenneth Moehringer, Katherine Reksc, Jessica Simmons, Dawn Smith, and Yan Wu.																																																					
	All references to the <b>Department</b> refer to the New York State Department of Health, <b>BEI</b> to the Bureau of Early Intervention, and <b>EI</b> to the Early Intervention Program.																																																					
Welcome	Talina Jones, EICC Chair, called the meeting to order at 10:15 a.m. and thanked Council Members for attending the virtual Early Intervention Coordinating Council (EICC) meeting.	<ul style="list-style-type: none"><li>• The next full Council meeting is September 15, 2021</li><li>• The next Executive Committee meeting is July 22, 2021</li></ul>																																																				
	The next EICC full Council Meeting is Wednesday, September 15, 2021 from 10:15 a.m. to 3:00p.m. The next Executive Committee Meeting is Thursday, July 22, 2021.																																																					
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	Dr. Donohue welcomed the following new members to the Council: <ul style="list-style-type: none"><li>• Angella Timothy, Assistant Director, NYS DOH Center of Community Health - DOH Agency Designee</li><li>• Lynn Amell, Director, Little Lukes/Milestones - EI Provider Seat</li><li>• Lidiya Lednyak, Assistant Commissioner, BEI at NYC Department of Health and Mental Hygiene (NYC DOHMH) - Discretionary Seat</li></ul>																																																					
Approval of Minutes	Talina Jones informed the Council that that the minutes from the March 23, 2021 meeting and the April 27, 2021 Executive Committee meeting were emailed to them.																																																					
	A motion was made by Amy DeVito and a second by Steve Held to approve the March 23, 2021 meeting minutes. Nineteen (19) members voted in favor, none opposed, and two (2) abstained. The minutes from the March 23, 2021 meeting passed.																																																					

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<p><b>New Business</b> <i>Vice Chair Nominations</i></p> <p><i>2021-2022 Executive Committee</i></p> <p><i>Task Forces</i></p> <p><i>Bureau Administrative Updates</i></p> <p><i>Early Intervention Program Regulations Update</i></p> <p><i>COVID-19 Update</i></p> <p><i>EI Service Coordination Tool Kit</i></p> <p><i>Procurements</i></p>	<p>Nominations for Vice Chair of the EICC were made at the March meeting. Two (2) members who were nominated accepted their nominations: Steve Held and Leah Ester Lax. Katie Reks emailed ballots to members who participated in the virtual meeting and tallied results. Steve Held was elected Vice-Chair and he accepted the position.</p> <p>Talina Jones informed the Council that the Executive Committee is reviewed and appointed each year in June by the Department and the EICC Chair. The committee consists of two parents, two providers, two state agency representatives, two municipal representatives, and the EICC Chair and Vice Chair. An email will be sent to the Council members in the next few days to poll members on their interest in serving on the committee for next year. The main function of the executive committee is to set the agenda for full Council meetings. Four, one-hour meetings are held; each of these meetings is approximately eight weeks prior the full Council meeting. The members who volunteer to be on the committee will be approved by the EICC Chair and the Department.</p> <p>Talina Jones asked the Council if members had any suggestions for a new task force or if they wanted to continue with their current task forces, work groups, and committees. Once the Social-Emotional Work Group finishes their work, that Work Group will be discontinued. The Provider Workforce Capacity Task Force including Competency- Based Training and Telehealth Update will continue in the 2021/2022 year and Steve Held proposed establishing a new Task Force on the rate setting methodology for EI reimbursement rates.</p> <p>A motion was made by Steve Held and a second by Leah Esther Lax to establish a new task force on rate setting methodology beginning after the final submission of the Social-Emotional Work Group. Twenty-one (21) members voted in favor, none opposed, and two (2) abstained. The motion to create a new task force on rate setting methodology passed.</p> <p>The Department will email Council members to poll them about their interest in serving on the new task force.</p> <p>Dr. Donohue provided the following Bureau Administrative updates:</p> <ol style="list-style-type: none"> <li>1) Reviewed modifications to proposed EI regulations post-budget – The Department modified language related to group EI Services related to consecutive (back-to-back) group services and group size. Group EI services will be defined as from 2 to 8 children. BEI removed the proposed requirement that only 4 of the children in the group could have a 1:1 aide. Instead, the proposed regulations state that “use of 1:1 aides should be based on clinical appropriateness.”</li> <li>2) COVID-19 Guidance on Mask Use issued May 19, 2021 via EI listservs – EI providers must continue to follow existing Department guidance, which requires mask wearing when delivering in-person EI services. For the purposes of providing EI services, mask wearing continues to be required regardless of vaccination status or location of the service (e.g., outdoors). Refer to the DOH website and list serv announcements for Guidance Documents that have been issued regarding delivery of EI services via telehealth during the declared State of Emergency for COVID-19. As a reminder, it is important to sign up for the EI listserv to obtain updated guidance and other EI announcements.</li> <li>3) Updates to EI Service Coordination Tool Kit following collaboration with OPWDD – Changes in the tool kit include: 1) Updating terminology 2) OPWDD has a new email address that can be used to send a secure email to notify OPWDD of a potentially eligible child and 3) FAQs in the tool kit were updated to clarify information as needed. The changes are under final review by OPWDD and DOH and then will be updated in the tool kit.</li> <li>4) New Monitoring Contract with Keystone Peer Review Organization, Inc. (KEPRO) was approved by the Office of the State Comptroller (OSC) on May 28, 2021, for EI monitoring and quality improvement services for the period</li> </ol>	<ul style="list-style-type: none"> <li>• The Department will email Council members to poll them on their interest in serving on Executive Committee for the next year</li> <li>• The Social-Emotional Work Group will be discontinued once they finish their work</li> <li>• A new task force on rate setting methodology will be created after the Social-Emotional Work Group submits its final product</li> <li>• The Department will email Council members to poll them about their interest in serving on the new task force</li> <li>• Bureau Administrative updates will be provided at the September 2021 meeting</li> </ul>

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<p><i>Health Homes</i></p> <p><i>Medically Fragile Children</i></p> <p><i>Open Discussion</i></p>	<p>April 1, 2021 to March 31, 2026. The existing protocols that are in place will be used to start with and as the need arises changes will be made to them.</p> <p>5) Request for Proposals #20054 for an EI Fiscal Auditor was issued on June 8, 2021 and is listed on the Department's website. The anticipated contract start date is July 1, 2022.</p> <p>6) Health Homes serving children in EI is still at status quo with no changes in provider enrollment. Providers who wish to provide both Health Home care management and EI service coordination services may reach out to OHIP or the EIP Provider Approval Unit to indicate their interest and receive information and/or an application.</p> <p>7) Medically fragile children – A public comment made at the EICC meeting on March 23, 2021, concerned the need for flexibility and service planning and service delivery for young children who have complex medical needs. The individualized family service plan (IFSP), which is specific to the child and family, sets forth the plan for EI services to be delivered to a child and family during the six-month IFSP period. Specificity within the IFSP is essential to ensure that the family and service providers understand how EI services will be delivered. Additionally, the IFSP process includes opportunities to review the plan at six-month intervals, or more frequently if necessary, and to modify the plan in circumstances where the child and/or family's needs change.</p> <p>Steve Held and Talina Jones honored Constance Donohue for her leadership, service, and advocacy for children and families in the EIP. Dr. Donohue is retiring in August 2021.</p>	
<p><i>Resources for families: Office of Mental Health (OMH)</i></p> <p><i>Office of Addiction Services and Supports (OASAS)</i></p>	<p>Donna Bradbury, EICC OMH Designee, presented on the Office of Mental Health resources for families (see presentation). She is the Director of the new OMH Office for Prevention and Health Initiatives. The Institute of Medicine (IOM) framework on prevention is an excellent resource. OMH has been instrumental in advancing training in the DC: 0-5™ Training and Prevention, which classifies mental health and developmental disorders of infancy and early childhood. The prevention that OMH provides is based in two normative settings, either in schools or in primary care.</p> <p>Prevention through primary care includes OMH Healthy Steps and Project Teach. OMH has many initiatives that are based in schools. Primary and Secondary Prevention in Schools includes restorative practice, mental health education, school-based satellite clinics, promise zones strategy, and suicide prevention trainings.</p> <p>With the stress around COVID and students returning to school and teachers being challenged to manage multiple demands, schools are using the Restorative Practice mechanism, which promotes equity through inclusion of all students. Child and Family Treatment and Support Services (CFTSS) is an array of services designed to be more preventive, to help with early identification, and to help with EI. The System of Care (SOC) Key Partners, Trauma-Informed Care and Trauma-Informed Network were reviewed. OMH received a grant to address the impact of COVID and Project Hope was highlighted.</p> <p>Patricia Zuber-Wilson, EICC OASAS Designee, presented on the Office of Addiction Services and Supports (OASAS) resources for families (see presentation). An overview of the programs that OASAS provides and the links to obtain that information were presented. OASAS' primary mission is leading a comprehensive system of prevention, treatment, and recovery services. The Triple P and Parenting Inside Out programs were highlighted.</p> <p>Leah Ester Lax thanked both presenters for their presentations. She inquired what types of resources are available in different languages. Patricia Zuber-Wilson responded that all the State agencies have the translator capability and translation services available. Donna Bradbury offered to provide additional information regarding OASAS' programs that address certain populations and certain cultures to the Department.</p>	

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	Steve Held conveyed his appreciation to the presenters for their presentations and expressed support for them returning for a broader discussion about the needs in EI and families with children with a disability under the age of five (5) years. He also conveyed concern about the limited capacity of EI service providers to provide mental health services to young children with disabilities and their families.	
<b>Lunch Break</b>	<i>12:15 p.m. to 12:45 p.m.</i>	
<b>Report of Task Force Activities</b> <i>Provider Workforce Capacity Task Force including Competency-Based Training and Telehealth Update</i>            <i>Social-Emotional Workgroup Update</i>          <b>Report of Additional Department Activities</b> <i>State Systemic Improvement Plan (SSIP) Update/</i>	<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, the two (2) recommendations of the Task Force from the first year, and the two (2) subgroups of Telehealth and Competency-Based Training.</p> <p>Telehealth – Two (2) separate surveys were developed to gather input about experiences of EI stakeholders with telehealth: a family/caregiver survey and a provider survey. Both surveys are currently in DOH approval process before being sent out. The Task Force recommends that in anticipation of the survey results, the telehealth subgroup begin working on a guidance document for telehealth.</p> <p>Competency-Based Training - The five (5) competencies were recapped, and the work accomplished was reviewed. On May 14, 2021, NYC and Westchester convened a joint Zoom meeting with their academic partners to initiate discussion on the development of the companion document to be drafted for review by August 2021.</p> <p>The Task Force's next steps will be to continue with monthly calls, alternating months to continue their work on Telehealth and the Competencies; develop a guidance document based upon the feedback from the Telehealth surveys; NYC and Westchester will continue work with their academic partners to develop a draft Companion document to be shared at an upcoming EICC meeting; pursue an initiative to reach out to academic partners across the state; and will discuss targeted restructure-cost neutral reform; and identify zip codes within counties that are underserved.</p> <p>The statewide initiative with academic partners is to develop a model to be replicated across learning institutions' graduate programs, to implement competencies that support work in the EIP for their students. Dr. Donohue commented that it would be helpful to learn about the types of academic programs at other institutions in other parts of the state. Robin Stegman suggested that courses on counselling should be considered as a requirement in a graduate program. Further discussion ensued about the need for in-service training and technology.</p> <p>Rochelle Macer provided an update on the Social-Emotional Workgroup. The priority projects were reviewed. The desk guides/aids and informational documents were reviewed. BEI will add regulation citations to the documents. All documents are in or nearing final drafts and will be submitted as a package to DOH in August 2021. DOH will review, edit, release electronically, and post them on DOH BEI Webpage in the Social-Emotional Tab. Final suggestions and considerations to the EICC were reviewed. Leah Ester Lax acknowledged Rochelle Macer for her leadership of the Work Group. Dr. Donohue added the Department's appreciation of the Work Group's efforts. Talina Jones included her thanks.</p> <p>Jessica Simmons, Training, Technical Assistance, and SSIP/Outcomes Unit, and Angela Furci, Family Initiative Coordinator, provided an update on the SSIP (see presentations).</p> <p>BEI Family Initiatives: The Early Help Makes a Difference brochure for families is being updated and a Family-Directed Assessment brochure is being developed. The remaining training videos developed have been approved for posting. The EIP program was recently featured in an e-learning video for childcare providers in NYS. Learn the Signs, Act Early Campaign</p>	<ul style="list-style-type: none"> <li>• Task Force update will be given at the September 15, 2021 meeting</li> <li>• Task Force update will submit all documents to DOH for review, edit, and release</li> </ul>

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<i>Bureau Family Initiatives Update</i>	information was posted on the BEI webpage, EI Families website, and EI Facebook post. A lunch and Learn Training for EI providers will be held on June 29, 2021. The webinar will be recorded for those not able to attend.	
<i>EI-Hub Update</i>	<p>Early Intervention Partners Training Project: This is a free training for parents and caregivers of infants and toddlers with disabilities that are currently receiving EI services in NYS, as well as parent members of the LEICC. It provides information, resources and skill building activities that are designed to increase parent advocacy and leadership skills. Public outreach of the availability of the training and feedback from participants was discussed.</p> <p>Jim Bryant, Project Manager, NYSTEC, Rob Lillpopp, Project Manager, PCG, and Ryan White, OCM Manager, PCG, provided an update on the EI-Hub (see presentation). Mr. Bryant encouraged stakeholders to go to the website for more information at <a href="https://www.health.ny.gov/eihub">https://www.health.ny.gov/eihub</a>. The EI Hub Club newsletter issue #16 was just released. PCG launched the learning management solution, LMS. NYEIS will move to read-only status approximately two (2) weeks prior to EI-Hub “Go-Live.” NYEIS will likely be retired approximately two (2) to three (3) months after becoming read-only. Regarding record retention, per DOH guidance, all client data should be stored in a separate secured location outside of NYEIS. The Go-Live date has been moved to Spring 2022.</p> <p>Steve Held expressed concern about the providers being able to get in the sandbox and get acclimated to the EI-Hub solution. Jim Bryant responded that the roll out of the EI-Hub has taken longer, but some components and modules have been released. Rob Lillpopp commented that there will still be a dequate time for stakeholders to train in the EI-Hub before “Go Live.” Dr. Donohue added that the Department remains committed to having the provider community engaged in testing of the EI-Hub, including testing various components of the system as well as end-to-end testing. An EI-Hub Landing Page Demo video was presented.</p> <p>Zane Wyrick presented on the EI Transportation Rate Study/Survey. The counties are being asked to complete the survey and submit it back to PCG by July 4, 2021. The timeline of the survey was reviewed. The final rate recommendations will be presented to BEI in August 2021. The preview of the survey was provided.</p>	<ul style="list-style-type: none"> <li>• Update on the EI-Hub will be given at the September 15, 2021 meeting</li> </ul>
<i>PCG (State Fiscal Agent) (SFA) Update</i>	<p>Rob Lillpopp provided an update from PCG (see presentation). Commercial Insurance Denial reasons have not changed. Authorizations are still the number one reason for denial. The trend of the denials is decreasing. The Medicaid Code 35 process, the Medicaid Sweep process, and the Remittance Entry Process were explained. The Extraordinary Circumstance (EC) data was reviewed.</p> <p>Steve Held inquired about consumer insurance billing and the Covered Lives Bill. Constance Donohue replied that the Covered Lives Bill has passed both Houses of the Legislature and is being reviewed by the Department. Kayleigh Zaloga elaborated on the Bill.</p> <p>A motion was made by Steve Held, and a second by Marina Yoegel, that the EICC recommend that the Governor approve S5560/A5339, which is the Covered Lives Legislation. Sixteen (16) members voted in favor, none opposed, and six (6) abstained. The motion passed.</p>	<ul style="list-style-type: none"> <li>• PCG Update will be given at the September 15, 2021 meeting</li> </ul>
<i>Fiscal Agent Payment Data Update</i>	Ken Moehringer, Fiscal Planning and Policy Unit Manager presented on the fiscal agent payment (see presentation). He reviewed the fiscal update for this quarter with regard to child enrollment, provider capacity, timeliness of payments, and insurance and Medicaid reimbursement. There is a 15 % reduction in capacity in rendering providers in Quarter 1 2021 compared to Quarter 1 2020, due primarily to less services being provided. 97% of the claims are paid in full for Quarter 1	<ul style="list-style-type: none"> <li>• Fiscal Agent Payment Data Update will be given at the</li> </ul>

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	2021. 90% of the claims were submitted timely in Quarter 1 2021. Commercial reimbursement is about 19% less than it was a year ago, but the rate of payment has increased. There are fewer claims being sent to Medicaid for reimbursement.	September 15, 2021 meeting
<b>Public Comment</b>	Two public comments were submitted prior to the meeting and read aloud. The first comment was from Meg O’Leary, a Public Health Planner, regarding inadequate childcare options. The second comment was from Bob Trapani, Occupational Therapist and Thrive by 5 Program Director, regarding EI services and teletherapy rates. Talina Jones recommended that the ECAC be informed about the public comment concerning childcare.	
<b>Future Agenda Items</b>	<p>Agenda items suggested by EICC members for future EICC meetings include:</p> <ul style="list-style-type: none"> <li>• Telehealth &amp; 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</li> <li>• Changing the EICC meeting schedule so the EICC could comment on Article VII/budget bills</li> <li>• COVID-19</li> <li>• Health Homes</li> <li>• Provider types in the Medicaid State Plan and whether the new mental health QP can do evaluations.</li> <li>• Family directed assessments</li> </ul>	
<b>Adjournment</b>	The meeting was adjourned by Talina Jones at 3:04 p.m.	