

**New York State Early Intervention Coordinating Council
Minutes – June 16, 2022**

Agenda Item	Discussion				Action Items	
Welcome	The following members/designated representatives attended the meeting:					
	-	Lynn Amell	X	Lidiya Lednyak		
	X	Jessica Benton	X	Melissa Groth		
	-	Marcelle Bichotte-Dunner	-	Cheryl Schaefer Coppola		
	X	Heidi Bond	X	Lynn Shea - late		
	X	Donna Bradbury	-	Robin Stegman		
	X	Brigitte Desport - MARO	X	Angella Timothy		
	X	Amy De Vito	X	Elina Tsenter		
	X	Raymond Bowman	-	Antonia Weidner		
	X	Steve Held	X	Marina Yoegel		
	-	Cheryl Hogan	-	Kayleigh Zaloga		
	-	Talina Jones	-	Patricia Zuber-Wilson		
	X	Leah Esther Lax - MARO				
	Department of Health staff present: Zahra Alaali, Mary Amendola, Peter Baran, Kelli Lyndaker, Kenneth Moehringer, Ray Pierce, Jennifer Sandshaw, Kirsten Siegenthaler, Jessica Simmons, Dawn Smith, and Yan Wu.					
All references to the Department refer to the New York State Department of Health, BEI to the Bureau of Early Intervention, and EI to the Early Intervention Program.						
Welcome	Steve Held, EICC Vice Chair, called the meeting to order at 10:23 a.m. and thanked Council Members for attending the Early Intervention Coordinating Council (EICC) meeting.				The next full Council meeting will be September 15, 2022	
	Approval of Minutes	The next EICC full Council Meeting will be Thursday, September 15, 2022, from 10:15 a.m. to 3:00p.m. The next Executive Committee Meeting will be Tuesday, July 26, 2022.				
		Steve Held informed the Council that that the minutes from the March 3, 2022, meeting and the January 26, 2022, Executive Committee meeting were emailed to them.				
		A motion was made by Marina Yoegel and a second by Lidiya Lednyak to approve the March 3, 2022, meeting minutes. Thirteen (13) members voted in-favor, none opposed, and none abstained. The minutes from the March 3, 2022, meeting passed.				
New Business Bureau Administrative Updates	BEI Director Ray Pierce provided the following Bureau Administrative updates:				Bureau Administrative updates will be provided at the September 2022 meeting	
• New second Associate Director: BEI has been recruiting for a second Associate Director and has promoted Yan Wu to that position.						
• EI-Hub Update: The Department and PCG are working on a go live date and once a date is finalized, it will be communicated to the field. Internal testing of the system is occurring. Stakeholders will hopefully be able to access the Sandbox this summer.						
• EI Rate Adequacy Review/Report Legislation (S.5676/A.6579): This legislation will require the Department to conduct a rate adequacy review and submit a report on the findings and recommendations within one year. The review must include an assessment of the existing payment methodologies and levels, recommendations for maintaining or changing the methodologies, the projected number of children who						

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	<p>will need EI services over the next five years, and the workforce needed to provide services to those children, by county. This Legislation is still being reviewed by the Department and Governor's staff.</p> <ul style="list-style-type: none"> • Provider Capacity is a challenge that the Department plans to address with a multifaceted approach. <ul style="list-style-type: none"> A. The Department is working on a new regulation package regarding new professionals for EI. Our legal counsel's office is conducting their final review of it. Provider rates will continue to be addressed. Director Pierce will advocate for reevaluating the rates and increasing them where needed based on the data available to the Department. B. With the passing of the State budget, there will be an across-the-board rate increase of 1% that will get implemented when BEI's Medicaid SPA is approved. C. The Rate Setting Task Force will be continuing to evaluate the rates and developing a methodology to improve the rates so that they align with other health and human service systems. D. BEI will be conducting a promotional campaign to recruit new providers and professionals to work in EI. Projected implementation is projected for late Summer or early Fall. Last April BEI staff attended the NYS Speech, Language, and Hearing conference where nine Speech Therapists indicated an interest in providing EI services. BEI staff will continue to attend events to recruit EI providers. Director Pierce encouraged counties, providers, and stakeholders to let him know about events that BEI staff could attend to promote the EIP. Potential internships in EI for graduate students will also be explored. • Covered Lives: The Department is still in discussions with the Office of Health Insurance Programs (OHIP) and the Division of Budget (DOB) to determine how the Covered Lives EI funding pool will be implemented in the State Fiscal Year (SFY) 2022-2023 with respect to providing funding to municipalities and State pursuant to the legislation. The Department has also engaged counties in discussions to obtain their feedback about the funding implementation. • Differentiated Monitoring and Support 2.0 (DMS)- Office of Special Education Programs: NYS will start Phase 1 of OSEP's Differentiated Monitoring and Support (commonly referred to as DMS) at the end of this month. Phase 1 includes document requests and targeted interviews with state staff on component-specific protocols. Phase 2 will begin in December and includes onsite/virtual visits with State staff, Stakeholder Input and Local-level Interviews. • OTAs and PTAs: OTAs and PTAs were temporarily able to deliver EIP services. Providers should contact the NYS board for their profession if they have questions about their scope of practice. • ABA hours: Service decisions are made by the IFSP team on an individualized basis for each child. There isn't a standardized package for the number of hours a service is authorized to be provided for a child. • EICC Parent's seat update: To increase parent participation on the Council, BEI will be using the vacant discretionary seat to appoint an additional parent to the Council, leaving two empty parent seats. The Department received over 20 interested parents are currently in the review process. 	

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	<p>E. School Psychologist: On April 20, 2022, the Department sent a listserv communication to stakeholders regarding the discontinuation of the use of school psychologist in the EIP as of July 1, 2022. A bill extending this provision until June 30, 2024, passed both the Senate (S8802) and Assembly (A9974). The Department and Governor's office are currently reviewing the bill.</p>	
<p><i>EICC Member Updates</i></p> <p><i>Vice Chair Vote</i></p> <p><i>2022-2023 Executive Committee</i></p> <p><i>2022-2023 Task Forces</i></p> <p><i>Open Discussion</i></p>	<p>Zahra Alaali, Program Coordinator, Early Hearing Detection and Intervention (EHDI) Program, provided EHDI program updates on the following:</p> <ul style="list-style-type: none"> EHDI-IS Usability Survey: The EHDI Program sent a voluntary survey to 600+ users of The Early Hearing Detection and Intervention- Information System (also known as EHDI-IS). The survey aims to discover areas where the audiology reporting module performs well (Effectiveness, Efficiency, Satisfaction); and Identify areas for improvement where the module does not meet the needs of the data reporters. The response rate was 19%. The EDHI program will continue to assess the quality of data collected in the EHDI-IS and provide training and technical assistant to EHDI-IS users. Diversity and Inclusion Plan: The EHDI team examined disparities in receiving diagnostic follow-up services and findings showed that the children in New York City (NYC) were less likely to receive follow-up than children in the rest of the state. the EHDI team developed an action plan to address diversity and inclusion in the EHDI system, focusing on the NYC population. <p>Steve Held informed the Council that voting for Vice-Chair of the EICC takes place at the June meeting. Four (4) members were nominated, and two (2) Members accepted the nomination. He requested that Members take a moment to fill out the ballot that is in their meeting materials and give it to Dawn Smith by the end of the lunch break. For Members at the remote locations, Members were asked to provide their voting ballot to staff at the remote site. The tally will be determined after the voting sheets are returned from the remote locations.</p> <p>Steve Held informed the Council that the membership of the Executive Committee is reviewed and appointed each year in June by the Department and Chair of the Council. As a reminder, it consists of two (2) parents, two (2) providers, two (2) state agency representatives, two (2) municipal representatives, the EICC chair, and the Vice Chair. The Department will send an email to the Council to poll members on their interest in serving on the Committee for the next year. The main function of the Executive Committee is to set the agenda for all full Council meetings. There are four, one-hour meetings per year, and they are held approximately eight (8) weeks before the full day meeting.</p> <p>Steve Held 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. The current two task forces will continue their work.</p> <p>Members discussed the following topics during open discussion: the use of School Psychologists and the recruitment of Psychologists in the EIP, rate increases for EIP service providers, the financial and time burden on families who need to transport their child to the EI service provider, the number of hours for ABA, telehealth and its impact on the EIP, provider capacity and the additional professions to be included in the Regulation packages.</p> <p>Steve Held asked Members to consider the following two (2) motions, which were discussed:</p>	<ul style="list-style-type: none"> EICC Member updates will be provided at the September 2022 meeting The Department will email Council members to poll them on their interest in serving on the Executive Committee for the next year.

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	<p>A motion was made by Steve Held, with a second by Lidiya Lednyak, that the SCICC respectfully recommends that the Bureau of Early Intervention continue to allow school psychologists to provide EI services until the Governor and Department opine on the current legislation. Thirteen (13) members voted in-favor, none opposed, and none abstained. Motion carried.</p> <p>Steve Held asked the EICC to consider a motion for the SCICC to respectfully recommend that the Bureau of Early Intervention immediately forward a request for a meaningful increase in EI by temporarily utilizing income from covered lives. The motion was discussed and withdrawn. Steve Held informed the Members that the Commissioner advocated to the State Education Department for a rate increase because the Preschool Providers (3 to 5) are so far behind their public counterparts who provide services to the 5 to 21 population. The 3 to 5 Service Providers received about an 11% increase.</p>	
<p>Report of Task Force Activities <i>Provider Workforce Capacity Task Force including Competency-Based Training and Telehealth Update</i></p>	<p>Marina Yoegel, EICC County Member, EIO Westchester County, provided the following update on the Provider Workforce Capacity Task Force activities.</p> <ul style="list-style-type: none"> • The BEI removed the word “Proposed” from the title of the <i>Competency Areas for the Delivery of Evidenced–Based Evaluations and Services</i> document and updated the BEI website. • On March 21, 2022, the BEI shared the draft <i>EI Workforce Capacity Companion Document for Competency Areas</i> with the academic partners for their review and comments. • On May 24, 2022, the BEI shared the comments received the academic partners' review of the draft <i>EI Workforce Capacity Competency Companion Document for Competency Areas</i> with the Task Force Chair and Advisors. Comments were received from Nazareth College, Manhattanville College, Lehman College CUNY and Brooklyn College CUNY. • NYC BEI agreed to review comments, edits and integrate recommended changes into one document that will be shared with the Task Force for review, additional comments and edits. • Telehealth surveys are currently in the approval process before being distributed pending Department approval. • The Task Force raised the issue of the current use of telehealth in the absence of guidance/standards issued from the BEI for the EI workforce • The Task Force suggested that the BEI consider issuing clinically and programmatically appropriate short-term guidance on the use of telehealth, until formal guidance is issued in order to begin a process of building rapport with the EI workforce and families. <p>Next Steps:</p> <ul style="list-style-type: none"> • NYC BEI will integrate recommended changes from the academic partners’ review of <i>EI Workforce Capacity Companion Document for Competency Areas</i> which will be shared with the Task Force • Pending BEI guidance to address the use of telehealth in the Early Intervention Program, the Task Force recommends that the BEI issue short-term guidance that defines the delivery of EI services in the IFSP-telehealth/in person. • BEI will determine how the <i>EI Competencies</i> will be disseminated to the EI workforce and families. They will consider creating various formats, e.g., portal training, self-paced modules, webinars, desk guides and parent pamphlets. 	<ul style="list-style-type: none"> • Task Force updates will be given at the September 2022 meeting

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<p><i>Rate Setting Methodology Task Force Update</i></p> <p>Bureau of Early Intervention (BEI) Training, Technical Assistance, and SSIP Update</p>	<p>Steve Held, Vice Chair, provided an update on the Rate Setting Methodology Task Force (see presentation). Topics the Task Force is looking to address are whether the rates must be cost neutral and whether rate add-ons can be used to address areas of the state where children are statistically underserved. To begin this equity-based analysis, Ken Moehringer presented the components of the rate system and the data set utilized in its initial development. The rates are posted on the DOH website. At the next meeting Task Force meeting Donna Bradbury will be presenting on how rate add-ons are determined in the Office of Mental Health (OMH). The Task Force is considering two (2) data requests: 1) zip codes that might identify a lack of sufficient service availability and 2) the percentage of very specific hours that an approved provider designates to the EIP program.</p> <p>Jessica Simmons provided an update on the Bureau of Early Intervention (BEI) Training, Technical Assistance, and State Systemic Improvement Plan (SSIP) (see presentation).</p>	
Lunch Break	12:05 p.m. to 12:30 p.m.	
<p>Report of Additional Department Activities</p> <p><i>EI-Hub</i></p> <p><i>PCG (State Fiscal Agent) (SFA) Update</i></p>	<p>Ryan White, PCG, provided an update on the EI-Hub (see presentation). Topics included the below:</p> <ol style="list-style-type: none"> 1) Current Status: The date for the EI-Hub go live is “TBD”. PCG provided a three-week transition timeline prior to NYEIS transitioning to read-only status. Business will go on as usual during the first week and EI billing will continue to be available. Week two, EI Billing will still be available prior to going down on Wednesday to create final payments from the last NYEIS file. For week three, Monday is the launch of the EI-Hub solution in full. NYEIS will continue to be read only. Part of the implementation process includes a version of the EI-Hub that allows system users to experience the EI-Hub before it is launched. The sandbox will be open to all users and PCG will supply limited customer service to sandbox users via the Call Center. PCG will provide an email address for users to share their experiences. 2) Testing update: PCG noted that quite a bit of data migration will occur this week. In the next few weeks, PCG will be doing some end-to-end testing for the 837 claims loader. 3) Training update: The Learning Management System (LMS) will include additional training resources to sandbox users, including navigating the EI-Hub, including case management, service logging, and billing and claiming. A brief demo of the LMS was provided by PCG. Responses to FAQs are included in the LMS. Included is information on how users can stay informed regarding the transition to the EI-Hub. <p>Rob Lillpopp, PCG, provided an update from the State Fiscal Agent (see presentation). PCG informed the council that since commercial insurance is not billed any longer due to Covered Lives, future presentations will not contain commercial insurance payment information. PCG will be voiding some claims that were submitted before EI Billing stopped processing the claims and when Covered Lives came into effect. PCG presented statistics on SFA Billing and Claiming, including commercial insurance denial rates, reasons, and claims where there has been no response. Open claims in the system that are still open after 60 days is less than 1%. Goal in the Covered Lives era is to make sure eligibility right in the first case, so that Medicaid Code 35 errors decrease. PCG has seen that 1% of claims were submitted after 90 days as opposed to 4% previously. Call Center data was presented. Call Center volume was approximately 80 calls a day.</p> <p>Lidiya Lednyak inquired if there will be verification of Medicaid coverage in the new system. PCG stated there is a 271-response report that will include if a child has or does not have Medicaid coverage.</p>	<ul style="list-style-type: none"> • An update on the EI-Hub will be given at the September 2022 meeting • An update from PCG will be given at the September 2022 meeting

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<i>Fiscal Agent Payment Data Update</i>	Ken Moehringer, Fiscal Planning and Policy Unit, provided an update on the fiscal agent payment data (see presentation). Topics discussed included child enrollment, provider capacity, timeliness of payments, and insurance and Medicaid reimbursement. For Q1 2022 there was an increase of 16% in children with an IFSP over last year and almost at t at pre-pandemic levels. Ken Moehringer provided an update on provider capacity. There are more active billing providers for Q1 2022 we have an increase of 6%, and the ratio of child to rendering provider is consistent with Q3 and Q4 of 2021 at 4.39. There was an increase in services provided of 15% comparing Q1 2022 to a year ago. Regarding timeliness of provider payment, 90% of claims were paid in full within 34 days, and 97% of claims submitted in Q1 of 2022 were paid within 34 days. Timely submission of claims by providers is a little higher, but not significant, with 90% of claims submitted within 60 days. We are no longer submitting claims to commercial insurance, and the amount submitted was 12 million as opposed to 14 million previously, and this amount will continue to drop next quarter. Medicaid claims submitted is 15% higher than a year ago, consistent with claims submitted. The rate of Medicaid reimbursement is in the low 70's, but this amount should increase as we expect to have better upfront Medicaid information.	<ul style="list-style-type: none"> • An update on the Fiscal Agent Payment Data will be given at the September 2022 meeting
Future Agenda Items	Agenda items suggested by EICC members for future EICC meetings include: <ul style="list-style-type: none"> • Shortage of Service Providers • Update on Legislation Amendment to Add Mental Health Provider Types (Legislation Amendment Section 69-4.1) • EI service provider rates 	
Public Comment	There were not any public comments.	
Adjournment	The meeting was adjourned by Steve Held at 2:15 p.m.	