

MINUTES

January 9, 2003

Worcester, Massachusetts

Members Present: Tina Adams, Zulmira Allcock, Margrit Bechara, Joan Bejune, Claire Brady, Hope Colen, Kathy Dunn, Renee Duseau, Peggy Freedman, Mary Jones, Mary Lutz, Margaret Mahoney, Therese Murphy, Pat Pellegrino, Barbara Prindle-Eaton, Judy Sleeper, Mary Ellen Thompson, Deborah Turiano, Amy Young.

I. Welcome and Approval of Minutes – Barbara Prindle-Eaton: Barbara welcomed members of the ICC, and introduced Mary Lutz, the new Representative to the ICC from the Medical Services Unit of the Massachusetts Department of Social Services. The Minutes of the meeting held on November 14, 2002, were approved as written.

Because important votes are being taken in ICC meetings throughout this year, Barbara reviewed Roberts Rules of Order regarding the process the ICC will use: If a vote is to be taken on a specific issue, that fact will be noted on the Agenda. Early in the discussion, the Chair will call for a positive motion and a second to the motion. If no motion is made, the matter would be referred back to committee for further work. Assuming a motion and second were obtained, discussion continues. An amendment to the main motion could be offered (but not a negative motion). Debate on the amendment takes place, followed by a vote. If this vote is positive, then debate on the amended motion resumes. If the amendment is defeated, then debate on the original motion continues. Additional amendments to the main motion could be offered as needed.

II. Director’s Report – Ron Benham: Ron distributed the budget portion of the Department of Public Health Part C Application to the federal government for Seventeenth Year funding under IDEA – the Individuals with Disabilities Education Act. The full application will be available at the Public Hearing to be held on January 24th in Boston. Ron explained that anyone wishing to may speak at the Hearing. There will be three hearing officers: Ron Benham, Barbara Prindle-Eaton, and a parent. Following the Hearing, there will be a 60-day public comment period during which written testimony may be submitted. The Application will contain a written response to all concerns raised at the Hearing and during the public comment period. Ron summarized the major elements of the proposed Part C budget, which is currently level-funded because the federal government is operating under a continuing resolution. The President has recommended a \$400,000 increase in Part C funding for Massachusetts. Congress will probably pass a budget within the next two months. Ron also explained that Ronald Preston has been appointed the new Secretary of Health and Human Services in Massachusetts, and Christie Ferguson, from Rhode Island, has accepted the position of Commissioner of the Department of Public Health.

The national Infant-Toddler Coordinators' Association, which employs a legislative advocate, expects that an announcement will soon be made about progress toward reauthorization of IDEA, Head Start, TANF – Temporary Aid to Needy Families – and Child Care and Development Block Grant programs all come up for reauthorization this year. The Coordinators' Association may work toward broader eligibility requirements for Part C, and believes that the allocation method currently in use does not benefit states which serve a higher percentage of children at risk. Massachusetts already serves most of the children who might be brought in if requirements are extended.

III. Early Intervention Partnerships – Jodi Anthony: Jodi described an RFR – a Request for Response – that will be posted January 17 at www.compass.com for a program called EI partnerships. This program will encompass some of what First Steps Home Visiting and FIRSTLink newborn home visiting have been responsible for to date. The newly-developed program is the outcome of a long planning process on the part of an expert working group at DPH. A primary goal was to better integrate elements of these two programs with others of the Division of Perinatal and Early Childhood Health at DPH. The decision was made to invite only existing Early Intervention vendors to apply during a pilot phase in which approximately 8 programs would be funded to begin work July 1, 2003. EI Partnerships focuses on catchment areas which include at least one city or town with a high prevalence of FIRSTLink infant and maternal risk, based on factors recorded on birth certificates. Anticipated funding will be from a combination of federal Maternal/Child Health Block Grant and an Interagency Service Agreement between the Division of Medical Security and DPH. The programs will be designed to utilize the existing infrastructure of certified EI programs and to build collaborations with other maternity and infant-toddler activities in the state. Additional information will be available once the RFR has been posted.

IV. Member Updates: Claire Brady – Early Learning Services of the Department of Education: Sixteen Project Playgroup proposals were received. They are being reviewed and announcement of awards will be made very soon. Local Education Agencies have recently been invited to respond to two RFRs: one is regarding Early Childhood Mental Health Study Groups, and the other focuses on Early Childhood Learning Standards. **Deborah Turiano** introduced a guest, Margaret McNaught, who teaches early childhood education in Australia. **Tom Miller** announced the annual conference on the visually impaired: *Taking Care of Our Children, Taking Care of Ourselves* will be held May 3, 2003.

V. Committee Reports. Program Planning Committee – Hope Colen and Joanne Sweeney: Three drafts of revised IFSP documents were distributed, and changes were reviewed: the IFSP Brochure, the IFSP Form, and the IFSP Guidance Document. The Committee has made changes in language to reflect the most recent wording related to natural environments and outcomes; there are no substantive changes. Programs will receive master copies of the Guidance Document; it cannot be electronically transmitted because of the nature of its graphics. The other drafts will be sent by email. The ICC should be prepared to vote on these documents at the March meeting. **Standards Committee – Dan Couet:** Dan distributed a handout about the process and time line for obtaining feedback on the Co-Treatment Procedures section of the Operational Standards. A questionnaire will also be sent to Program Directors and parents. **Personnel Preparation – Judy Sleeper for Karin Lifter:** The Committee has been

systematically reviewing the CSPD – the Comprehensive System of Personnel Development – and will have a revision ready to present to the March meeting. The Committee has been looking at the federal guidelines and at CSPDs in other states. There will be an attempt to make the Massachusetts document more active by showing who is responsible for each part of the plan.

Recruitment and Retention Task Force – Kathy Dunn: The Task Force will soon complete a draft of resources and information. The next step will be to present this to Steering Committee in preparation for bringing it to the full ICC. **Low Incidence Committee – Tom Miller:** Tom distributed a written report and discussed the highlights. Presentations on universal newborn hearing screening and cochlear implants are planned for an upcoming ICC meeting. Tracy Osbahr stated that 99% of all newborns now receive hearing screening before leaving the hospital. **Fiscal Committee – Michelle Fagnano:** The Committee continues to discuss the impact of the current very difficult fiscal situation on EI programs. To date, the system as a whole is over budget, and a number of measures have been announced which are designed to bring the spending rate back in line with projections. The Committee has three active subgroups which address insurance issues, receivables, and reconciliation of billing/payments. Barbara Prindle-Eaton asked for clarification about how these groups are publicized: All meetings are open, and Steve McCourt sends notices by email. **Membership Committee – Amy Young:** An updated ICC membership list was distributed. Current vacancies include a Greater Boston Provider Representative and a Parent Representative from the Southeast. The Committee is developing a website, and looking for in-kind services in order to reduce costs. A recruitment notice for ICC and committee vacancies will be distributed in the near future. The Committee is also working on written procedures and developing a time line that follows the ICC year.

VI. Report on Administrative Update – Ron Benham: Ron reviewed cost reduction measures announced to EI providers in a document dated December 12, 2003, which are to become effective January 13, 2003. He stressed the process used to arrive at these decisions, which included thoughtful discussion, listening to providers, and meetings with the leadership of the Massachusetts Early Intervention Consortium. To date, EI has been essentially untouched by 9C cuts in which the Governor has exercised unilateral authority to make cuts in state programs. Child growth in EI was anticipated to be at 6%, and has actually been only 3 -3.5% through December. However, the system is \$1 million over budget in FY 03, and we cannot anticipate any additional funds in a supplementary budget. In addition, FY04 contains a great deal of uncertainty; the Governor's budget will not be issued until the end of February. DPH has two overriding responsibilities: to insure that eligible children receive the quality services they have a right to, and that providers can be paid for the services they provide. Cost containment measures have been designed to insure that these responsibilities can be carried out. The modest reductions being made do not include any change in eligibility. Ron then reviewed each item in the December 12 announcement. The goal is to build a reserve sufficient to pay all providers' legitimate claims. Departments were told to submit budget requests for level funding for FY 04, and have been allowed to submit Critical Commitment letters outlining what they think they will need in order to fulfill known obligations for FY 04. Any cut to EI would have a disproportionate negative impact on the amount of federal Medicaid reimbursement the state can receive.

Discussion: In response to questions and comments, the following clarifications were offered: Changes to specialty services include placing a per-child limit on intake visits. It would be helpful if an advisory could be sent to LEAs informing them that EI can no longer bill for visits on or after a child's third birthday. Ron and Claire Brady agreed to discuss this. The reduction in cost reimbursement contracts for FY 03 is to be based on the December 1st count. DPH receives documentation on all claims including those sent to insurance companies, and is planning to have edits in place which will reject claims that are not in compliance with these cost reduction measures. Waivers will be considered only if the circumstances are extraordinary. Regarding specialty services, most children are not receiving excessive service; the waiver process can be used in situations where providers think there is clear clinical justification for more service.

Barbara Prindle-Eaton summarized discussion and commented that all ICC members need to be informed about these cost reduction measures in order to effectively advocate for very early prevention and education – it has the potential to save substantial money for other state agencies later. Understanding what is happening to EI gives each ICC member a stronger sense of what may lie ahead. Please be proactive in informing elected representatives about ways in which EI affects other systems.

VI. Other Business:

A handout was distributed in which the journal, *Young Exceptional Children*, one of the journals of the Council for Exceptional Children, is inviting submission of manuscripts for possible publication in the journal.

Steering Committee is beginning to plan for the ICC Retreat scheduled for June 12. Given that there has been a great deal of growth in the system, a visioning process for the future of the system is being considered. If you would like to volunteer to help plan this retreat, please contact Barbara Prindle-Eaton or Darla Gundler.

There is a very full agenda already planned for the March meeting of the ICC, and important votes will be taken. Please plan to attend. Regrets and proxies should be sent to Darla in advance.

VII. Adjournment: 12:20 p.m.