STATE OF NEW YORK

10175

IN ASSEMBLY

May 10, 2024

Introduced by COMMITTEE ON RULES -- (at request of M. of A. Paulin) -- read once and referred to the Committee on Health

AN ACT to amend the public health law, in relation to a review and recommendations of reimbursement adequacy and other matters relating to early intervention

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

Section 1. The public health law is amended by adding a new section 2557-a to read as follows:

§ 2557-a. Early intervention program review. 1. The commissioner shall conduct a comprehensive study and review of the early intervention program including the models of service delivery and the rates of reimbursement for each such service and model made through the early intervention program for efficacy, adequacy and effectiveness of service delivery and the full implementation of individualized family service plans. The review shall include:

(a) a comprehensive assessment of the existing methodology used to determine payment for early intervention screenings, evaluations, services and service coordination, including but not limited to:

(i) analysis of early intervention rules, regulations, and policies, including policies, processes, and revenue sources;

(ii) analysis of costs to providers participating in the early intervention program, including time and cost of travel, service provision, and administrative activities; and

(iii) analysis by discipline and labor region of salary levels for individuals providing early intervention services compared to the salary levels for individuals in the same disciplines and labor regions providing services other than in the early intervention program;

(b) recommendations for maintaining or changing reimbursement methodologies. Recommendations under this paragraph shall be consistent with federal law and shall include recommendations for appropriate changes in state law and regulations. The recommendations shall consider appropriate payment methodologies and rates for in-person and telehealth early intervention evaluations and services to address barriers in timely

EXPLANATION--Matter in *italics* (underscored) is new; matter in brackets [-] is old law to be omitted.

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service provision as well as racial and socioeconomic disparities in access, with consideration of factors including, but not limited to, payment for bilingual services, travel time, geographic variability, access to and cost of technology, cost of living, and other barriers to timely service provision;

(c) the projected number of children who will need early intervention services in the next five years disaggregated by county;

(d) the workforce needed to provide services in the next five years to all children eligible for early intervention services, disaggregated by county; and

(e) opportunities for stakeholder input on current rate methodologies.

2. Such review shall also include an assessment of the efficacy of program models for the provision of early intervention services, including, but not limited to group services, individual services, facility based services and home-based services and the configurations of such service models. Such review shall include a comprehensive assessment of the utilization of each model and configuration, including barriers to fuller utilizations, and utilization disaggregated by clinical service.

3. Within one year after the effective date of this section, the commissioner shall submit a report of the findings and recommendations under this section to the governor, the temporary president of the senate, the speaker of the assembly, and the chairs of the senate and assembly committees on health, and shall post the report on the department's website.

§ 2. This act shall take effect immediately.