

# STATE OF NEW YORK

1198--A

Cal. No. 686

2023-2024 Regular Sessions

## IN SENATE

January 10, 2023

Introduced by Sens. RIVERA, ASHBY, BROUK, MANNION, MYRIE, SALAZAR, WEBB -- read twice and ordered printed, and when printed to be committed to the Committee on Disabilities -- recommitted to the Committee on Disabilities in accordance with Senate Rule 6, sec. 8 -- reported favorably from said committee, ordered to first and second report, ordered to a third reading, passed by Senate and delivered to the Assembly, recalled, vote reconsidered, restored to third reading, amended and ordered reprinted, retaining its place in the order of third reading

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:

1 Section 1. The public health law is amended by adding a new section  
2 2557-a to read as follows:

3 § 2557-a. Early intervention program review. 1. The commissioner shall  
4 conduct a comprehensive study and review of the early intervention  
5 program including the models of service delivery and the rates of  
6 reimbursement for each such service and model made through the early  
7 intervention program for efficacy, adequacy and effectiveness of service  
8 delivery and the full implementation of individualized family service  
9 plans. The review shall include:

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

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

15 (ii) analysis of costs to providers participating in the early inter-  
16 vention program, including time and cost of travel, service provision,  
17 and administrative activities; and

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

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

5 (b) recommendations for maintaining or changing reimbursement method-  
6 ologies. Recommendations under this paragraph shall be consistent with  
7 federal law and shall include recommendations for appropriate changes in  
8 state law and regulations. The recommendations shall consider appropri-  
9 ate payment methodologies and rates for in-person and telehealth early  
10 intervention evaluations and services to address barriers in timely  
11 service provision as well as racial and socioeconomic disparities in  
12 access, with consideration of factors including, but not limited to,  
13 payment for bilingual services, travel time, geographic variability,  
14 access to and cost of technology, cost of living, and other barriers to  
15 timely service provision;

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

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

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

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

29 3. Within one year after the effective date of this section, the  
30 commissioner shall submit a report of the findings and recommendations  
31 under this section to the governor, the temporary president of the  
32 senate, the speaker of the assembly, and the chairs of the senate and  
33 assembly committees on health, and shall post the report on the depart-  
34 ment's website.

35 § 2. This act shall take effect immediately.