### Joint Task Force on the Consolidation of Early Childhood Education and Care

# North Carolina Early Intervention Program Women's and Children's Section

# Division of Public Health Department of Health and Human Services

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### Joint Task Force on the Consolidation of Early Childhood Education and Care

### Early Intervention—Infant and Toddler Program

#### Overview

- History
- Demographics
- Federal Requirements
- Administration and Funding
- Successes
- Challenges

## Early Intervention—Infant and Toddler Program History

- Prior to 2002
  - Division of Mental Health
  - Area Mental Health Programs
  - Developmental Evaluation Centers, and
  - Local Health Departments

All had a role in Early Intervention and Infant & Toddler Program

### Early Intervention—Infant and Toddler Program History

- In 2000
  - In response to Federal concerns and General Assembly action
  - Authority to
    - Evaluate
    - Enroll
    - Develop and coordinate a service plan
       Was consolidated in Division of Public Health
- In 2004
  - Further changes
  - DECs became Children's Developmental Service Agencies
    - Evaluation
    - Eligibility determination
    - Service coordination
    - Authorization of community services

- Serves infants and toddlers
  - Birth up to 3 years of age
  - Have or are at risk of
    - Developmental Disability or Delay
- Anyone can refer a infant or child
  - Hospital
  - Physician
  - Family Member
  - Child Care Worker
- Average age of referred child—14 months



- Child receives an evaluation for Eligibility
  - Free to Family
- If found to be Eligible—has or is at risk of Developmental Delay or Disability
  - Family can choose or decline enroll the child in EI/ITP program
- Services
  - Provided as long as the need continues
  - Periodic assessments of progress and need
- Services are provided in age appropriate setting
  - Home or Child Care Center
  - Conducive to an infant's or toddler's learning



- Serves children statewide
- In SFY 2008-09
  - 19,962 Children referred to EI/ITP
  - 17,606 Children enrolled in EI/ITP
- 41% increase since 2004

### Number of Children Referred and Enrolled in EI/ITP Program

	FY 2004-05	FY 2005-06	FY 2006-07	FY 2007-08	FY 2008-09
Referred	17,263	17,319	17,727	19,690	19,662
Enrolled	12,430	15,160	15,048	15,869	17,606

### Early Intervention—Infant and Toddler Program Federal Requirements

- Individuals with Disabilities Education Act (IDEA)—
   Part C
  - Enhance development of infants & toddlers with disablities
  - Reduce education costs by minimizing need for special education
  - Minimize institutionalization, Maximize independent living
  - Enhance capacity of families to meet child's needs

# Early Intervention—Infant and Toddler Program Federal Requirements

- Individuals with Disabilities Education Act (IDEA)—
   Part C
  - Federal Grant Program
  - Assist states in operating a comprehensive, statewide program of early intervention services
  - Lead agency to receive and administer grant
  - Interagency Coordinating Council

### Early Intervention—Infant and Toddler Program Administration

- Children's Developmental Service Agencies
  - Responsible for Evaluation
  - Responsible for Coordination of Services
  - Monitor Providers (approx. 700)
  - Conduct Home Visits
- Needed Services—based on evaluation
  - Through Community Providers
- In SFY 2008-09
  - 19,962 Children referred to EI/ITP
  - 17,606 Children enrolled in EI/ITP



#### Smokies

 Cherokee, Clay, Graham, Haywood, Jackson, Macon Swain

#### New Bern

- Carteret, Craven, Jones, Lenoir, Onslow, Pamlico

#### Wilmington

 Brunswick, Columbus, Duplin, New Hanover, Pender

#### Greensboro

 Alamance, Caswell, Guilford, Randolph, Rockingham

#### Fayetteville

Bladen, Cumberland, Robeson, Sampson

#### Raleigh

Wake

#### Asheville

- Buncombe, Henderson, Madison, Transylvania

#### Boone

 Allegheny, Ashe, Avery, Mitchell, Watauga, Wilkes, Yancey

#### Concord

- Cabarrus, Iredell, Rowan, Stanly, Union

#### Morganton

- Alexander, Burke, Caldwell, Catawba, McDowell

#### Rocky Mount

 Edgecomb, Halifax, Johnston, Nash, Northhampton, Wilson

#### Sandhills

 Anson, Harnett, Hoke, Lee, Montgomery, Moore Richmond, Scotland,

#### Durham

 Chatham, Durham, Franklin, Granville, Orange, Person, Vance, Warren

#### Shelby

- Cleveland, Gaston, Lincoln, Polk, Rutherford

#### Charlotte

Mecklenburg

#### Elizabeth City

 Camden, Chowan, Currituck, Dare, Gates, Hertford, Pasquotank, Perquimans, Tyrell, Washington

#### Greenville

• Beaufort, Bertie, Greene, Hyde, Martin, Pitt, Wayne

#### Winston Salem

Davidson, Davie, Forsythe, Stokes, Dece Ynther 15, 2009



Evaluation Services SFY 2008-09				
Evaluation Service	Number	Percentage		
Physical	2059	5.9%		
Nursing	1573	4.5%		
Psychological	4457	12.7%		
Social Work	3950	11.3%		
Speech/Language	6071	17.3%		
Audiology	2927	8.3%		
Physical Therapy	3047	8.7%		
Learning	7143	20.4%		
Occupational Therapy	2102	6.0%		
Nutrition	693	2.0%		
Intermediate Assessment	115	0.3%		
Social Family Assessment	0			
Clinical Assessment	962	2.7%		
TOTAL	35,099	100.%		
Of All Services		10.1%		



Treatment Services SFY 2008-09				
Treatment Service	Number	Percentage		
Physical	2269	7.9%		
Nursing	376	1.3%		
Psychological	2052	7.2%		
Social Work	690	2.4%		
Speech/Language	5558	19.5%		
Audiology	512	1.8%		
Physical Therapy	4148	14.5%		
Learning	7683	26.9%		
Occupational Therapy	753	2.6%		
Nutrition	3649	12.8%		
CBRS	301	1.1%		
Clinical Treatment	570	2.0%		
TOTAL	28,561	100.%		
Of All Services		8.2%		

Case Management and Other Services SFY 2008-09				
Other Service	Number	Percentage		
Interpretive Conference	12551	4.4%		
Tracking	0			
Ancillary Services	7228	2.6%		
TCM/Service Coordination	257877	91.2%		
Preliminary Assessment	26	0.0%		
Evaluation Coordination	4980	1.8%		
TOTAL	282,662	100.0%		
Of All Services		81.6%		

Total of All Service SFY 2008-09				
	Number	Percentage		
Evaluation Services	35,099	10.1%		
Treatment Services	28,561	8.2%		
Other Services	282,662	81.6%		
TOTAL	346,322	100.0%		

## Early Intervention—Infant and Toddler Program Funding

- Various Sources of Funding
  - Federal Grant (IDEA—Part C)
  - Amount based on State population
- Third Party Reimbursement
  - Medicaid
  - Private Health Insurance
- State General Fund

Funding for EI/ITP CDSA Program—in millions							
SFY 2004-05 through 2009-10							
	2004-05	2005-06	2006-07	2007-08	2008-09	2009-10	
Requirements	\$50.4	\$57.2	\$63.1	\$73.1	\$75.1	\$78.2	
	Receipts						
Federal	\$9.4	\$8.5	\$8.5	\$9.6	\$11.3	\$12.7	
Medicaid	\$12.0	\$13.9	\$21.5	\$24.4	\$26.9	\$28.2	
3 <sup>rd</sup> Party/Self Pay	\$ 0.56	\$ 0.67	\$0.38	\$0.48	\$ 0.44	\$0.68	
Miscellaneous	\$ 0.11	\$ 0.08	\$ 0.05	\$ 0.02	\$ 0.04		
Carry Forward	0	\$2.1	\$ 0.21	\$ 0.09	\$ 0.9		
Total	\$22.1	\$25.3	\$30.6	\$34.7	\$39.7	\$41.6	
General Funds	\$28.4	\$31.9	\$32.5	\$38.4	\$35.9	\$36.5	

# Early Intervention—Infant and Toddler Program Funding

### Third Party Reimbursement

- Evaluation and Service Coordination bill to Payors
  - Service Coordination not covered by insurers
  - Service Coordination is covered by Medicaid
- Services provided by community providers are billed to 3<sup>rd</sup>
   Party Payors or family on a sliding scale
- If family has insurance; asked to bill insurer
  - Family can refuse
  - If family refuses, State has to pay per IDEA



### Early Intervention—Infant and Toddler Program Funding

### Third Party Reimbursement

- Evaluation and Service Coordination bill to Payors
  - Service Coordination not covered by insurers
  - Service Coordination is covered by Medicaid
    - 61% of the enrollees are Medicaid-eligible
    - 82% of the Medicaid funding--\$27.0M in FY 08-09 was for reimbursement of Case Coordination
  - Financial Advantage to EI/ITP program being in Division of Public Health

### Early Intervention—Infant and Toddler Program Successes

- IDEA requires
  - Evaluation for Eligibility & Development of Service Plan
    - Within 45 days of referral
    - 96% success rate
  - Services to begin
    - Within 30 days of Service Plan
    - 93% success rate (2006 73%)
- 2004 changes resulted in increased referrals—Families, MDs, Other Care Givers
- Increased Medicaid Reimbursement



### Early Intervention—Infant and Toddler Program Challenges and Considerations

- Continued Effort to Collect 3<sup>rd</sup> Party Receipts
- Scarce GF resources
- Growing number of children being evaluated, enrolled and served

### Regarding Consolidation

- Cost-settlement concern
- Successes of Early Intervention with Division of Public Health
- Other States' organizations

