

12

**TESTIMONY TO
JOINT LEGISLATIVE BUDGET HEARING
HEALTH & MEDICAID
JANUARY 25, 2016**

Submitted by: Steven Sanders, Executive Director
ACTS (Agencies for Children's Therapy Services)

Good Afternoon.

My name is Steven Sanders. I am Executive Director of Agencies for Children's Therapy Services (ACTS). ACTS member agencies provide about 60% of the Early Intervention services across the State.

Thank you for the opportunity to testify before this Health Budget Committee. I especially want to recognize Senator Catharine Young who has attained this important assignment as Chair of Senate Finance. Of course I also want to thank the continued diligence of Chairman Farrell, Chairman Gottfried, and Chairman Hannon.

I am here again this year to discuss the Governor's proposals for Early Intervention. Too often he has sought changes to the program solely as a device to reduce expenditures to the State and/or Counties. But the children and families who desperately rely on these services pay the price. And providers are expected to assume the responsibilities and costs that state and local governments abdicate.

Fortunately the worst of the Governor's proposals have been rejected in prior years by this Legislature...but harm to the program has been done through the Governor's policies and unilateral regulation changes. Sometimes even promulgating policies that the Legislature has refused to accept.

This year's Executive budget proposal is a mixed bag:

The proposed changes to require commercial insurance companies to more quickly adjudicate claims and pay their fair share is, as some might say, a "no brainer." Currently commercial insurance companies take far too long to determine whether they will honor a claim, and they pay far too little. Of the \$600M which is billed in Early Intervention each year to all sources the commercial insurance sector pays a miniscule 2%. That percentage has remained a constant in the Early Intervention Program for two decades... and it is shameful. The Governor's reforms in the insurance law area strikes the right balance of autonomy and responsibility for private insurers.

The Executive also proposes a very modest but very long overdue increase of 1% to offset some of the administrative cost increases that Early Intervention providers have absorbed over the past number of years. This would be the first such increase in well over a decade. And while it does not come close to compensating for cuts of over 20% and increased mandated administrative expenses, it would be a start.

However, the Executive's recommendations for changes in other areas, especially as it relates to services, is misguided and must be rejected again as the Legislature did when the Governor proposed virtually identical measures in 2013.

In a thinly veiled attempt to cut funding by holding down referrals to the Early intervention Program, the Governor would make it more difficult for parents to have comprehensive evaluations and get the help that their children need. Another layer of bureaucracy in the form of "prescreening" before evaluations will only add time and obstacles to the process. This is totally unwarranted. IDEA gives parents the legal right to have an evaluation for their child if they or their pediatrician feel that there may be one or more developmental delays. When that occurs time is of the essence. Moreover the Governor's not so subtle effort to have those evaluations be less rigorous by removing the provision that such evaluations be "multidisciplinary" will have the effect of denying children ALL the services that they may need, and are legally entitled to receive.

The Governor's recommendation that eligibility for Early Intervention for children with a prior diagnosed medical condition should be established using the child's medical records or other records is fraught with problems. There are many underlying conditions that may not manifest in records or observed by health professionals not trained to uncover developmental disability symptoms. Those conditions, sometimes very oblique or concealed can only be identified by a qualified evaluator. Ironically these so called cost saving measures would not even save money. For every child that does not receive the requisite Early Intervention services, those services shift to the public schools, and the cost for school age special education increases exponentially.

In the final analysis Early Intervention is a money saver not a money driver. For a fraction of the cost of more expensive pre-school or school age special education, Early Intervention in many cases will remediate or lessen a child's developmental issues at an early age. The Governor may wish to absolve state government and counties of some cost in the short run, but in reality those costs become the burden of already hard strapped school districts.

But the greatest consequence is to the children and their families who will not obtain the services that they need when it will do them the most good. For them there is no postponing help. Services delayed are services denied because clinicians and studies agree that there is only a short window of opportunity when these infants and toddlers can be helped most effectively. These kids and their families literally cannot wait a few more weeks or months. They will pay the price for the rest of their lives.

The Governor has rightly proclaimed that early detection and immediate intervention in cancer treatment is of paramount importance. He is right. That is also true of toddlers with developmental disabilities or delays. Early Intervention is the right prescription, and time is of the essence.

Thank you again for sticking up for the nearly 70,000 families each year with Early Intervention needs for their children. Should you wish to visit a program in your district and see for yourself the routine miracles that are performed each day, I am happy to arrange such a visit. I promise you it will make your day!