

**Testimony submitted to the Joint Legislative Budget Hearing on Health  
Thursday, February 16, 2017  
Provided by: *Winning Beginning NY***

*Winning Beginning NY (WBNY)* is the State's early learning coalition, with over 60 organizational and individual members. We thank the Committee for reading our testimony. We have attached background documents for each priority that contain detailed information.

### **Home Visiting**

Funding has been flat-funded for Healthy Families New York since 2008 and increased only incrementally for Nurse-Family Partnership (NFP), which is the only program currently funded through the Department of Health.

Two additional research-based programs, Parents as Teachers and The Parent-Child Home Program, Inc., receive little or no State funding. These programs decrease child abuse, increase school readiness, and improve health outcomes.

We ask that you:

- Maintain \$26.8 million and invest an additional \$9.5 million in maternal, infant, and early childhood home visiting to adequately fund a continuum of supports and services for families.
- NFP: Maintain \$3 million in funding. Add \$3 million to preserve current program sites (\$500,000) as well as to support growth in new communities and/or expand existing teams (\$2.5 million), such as 75 family slots in the greater NYC area and 375 family slots in Upstate counties.

### **Early Intervention (EI)**

EI provides evaluations and services to infants and toddlers with significant developmental delays or disabilities and their families. The State has decreased funding for EI services by *one-third* since 2010. Instead of providing cost-of-living increases, the State cut the EI service rate for home- and community-based services by 10% in April 2010 and cut the reimbursement rate for all EI services by an additional 5% in April 2011. Meanwhile, the State implemented a new process for seeking reimbursement, placing significant administrative burdens on EI service coordinators and providers.

As a result, experienced, high-quality EI providers have shut their doors or stopped taking EI cases, making it difficult for children to access their mandated services in a timely manner in certain areas.

In New York City, in May 2014, an agency that had served 3,000 children the prior year ended its 20-year EI program, citing the reduced reimbursement rates. Meanwhile, between 2012 and 2015, the NYC EI office saw a 910% increase in the number of calls regarding the inability to find EI providers for children who qualified for services.

The Executive Budget includes a proposal to enhance reimbursement from health insurance companies for the cost of EI services. While we support measures to require health insurance companies to contribute their fair share to the cost of EI, we are concerned that certain provisions of this proposal would be burdensome for families and providers, such as requiring providers, in certain cases, to appeal insurance denials and wait until the end of the appeals process to get paid and requiring parents to provide health insurance information to multiple EI professionals.

We ask that you:

- Restore reimbursement rates by increasing the current rates by at least 5% this year. In addition, the Executive Budget proposal should be amended to ensure it does not burden families or providers and to reinvest any savings from the proposal into the EI program.

Thank you for your time.