



**NEW YORK CITY EARLY INTERVENTION COORDINATING COUNCIL (LEICC)**  
**MEETING OF MARCH 20, 2012**

<b>AGENDA ITEMS</b>	<b>DISCUSSION</b>
<b>MEETING CONVENED AT 10:08 AM</b>	The following members were present:  <b>Marie B. Casalino, Assistant Commissioner</b> <b>Marilyn Rubinstein, LEICC Chair</b> <b>Maria Bediako</b> <b>Norma Calderon-Cruz</b> <b>Braden Josephson</b> <b>Peter Pierri</b> <b>Barbara Schwartz</b> <b>Linda Silver</b> <b>Mina Sputz</b> <b>Julia Travers</b> <b>Oliver Trinidad</b>  <b>Guest: Adam Karpati, NYC DOHMH Executive Deputy Commissioner</b>
<b><u>WELCOME</u></b>  <b><u>REVIEW AND APPROVAL OF 11.29.11 MINUTES</u></b>	<b>Marilyn Rubinstein, Chair, LEICC</b> <ul style="list-style-type: none"><li>• Minutes from the November 2011 meeting could not be adopted because a quorum was not present at the meeting. Approval of the minutes was postponed.</li></ul> <b>Marie Casalino, Assistant Commissioner</b> <ul style="list-style-type: none"><li>• Documents to be discussed at the LEICC meeting are posted on the NYC Department of Health and Mental Hygiene (NYC DOHMH) Bureau of Early Intervention (BEI) LEICC webpage and emailed in advance to members; hard copies will no longer be distributed at meetings.</li></ul>



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	<ul style="list-style-type: none"> <li>• Registration to attend meetings should be done through the webpage.</li> <li>• In accordance with Section 2554 of the Public Health Law, and conforming with the Operating Principles, new members will be appointed to the LEICC in July 2012. Dr. Casalino thanked the departing LEICC members for their service. Those individuals interested in being considered for appointment to the LEICC in July should forward their letter of interest and resume to Felicia Poteat by April 6<sup>th</sup>. Resumes will be reviewed and candidates will be interviewed by BEI Senior Leadership staff.</li> <li>• LEICC Committees are chaired by LEICC members.</li> <li>• As a condition of the LEICC’s Operating Principles, LEICC members will be notified of membership changes and vacancies.</li> <li>• Dr. Barbara Schwartz offered a memorial to a former LEICC member who passed away recently, Penny Schneier. Ms. Schneier represented ACS/Child Care &amp; Head Start, where she served as the Special Needs Coordinator for Program Operations.</li> </ul>
<p><b><u>DEPARTMENT REPORT</u></b></p>	<p><b>Marie Casalino, Assistant Commissioner</b></p> <p><b>Provider Oversight</b></p> <ul style="list-style-type: none"> <li>• As discussed in previous meetings, there have been changes in BEI’s provider monitoring process. The Program Monitoring and Quality Improvement Unit has been restructured to create a Technical Assistance Unit and a Provider Oversight Unit. The Provider Oversight Unit has made site visits to 15 agencies to date; formal reports will be ready mid-April.</li> </ul> <p><b>Embedded Coaching</b></p> <ul style="list-style-type: none"> <li>• BEI continues to expand its efforts to promote Embedded Coaching, the standard of care, and has commenced Phase Two of the Learning Collaborative. Phase Two will allow</li> </ul>



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	<p>agencies to train more interventionists. There will be two (2) content trainings in June and July. BEI is working on a stipend for agency participation.</p> <ul style="list-style-type: none"> <li>○ Dr. Barbara Schwartz suggested considering training people newly entering the field (e.g. students, new practitioners) in addition to established practitioners. Dr. Casalino confirmed that BEI is interested in working with the academic community.</li> </ul> <p><b>Provider Meetings</b></p> <ul style="list-style-type: none"> <li>● BEI will continue to meet with the leadership of provider coalitions and advocacy groups to discuss upcoming changes, New York Early Intervention System (NYEIS), policies, and finance.</li> </ul> <p><b>Policy and Planning:</b></p> <ul style="list-style-type: none"> <li>● Revised Policy and Procedure chapters will continue to be distributed to the LEICC members for review and comment prior to dissemination to the contracted providers.</li> <li>● The revised Transition Chapter has been interwoven with operational steps in NYEIS. This document was recently shared with the LEICC members, and BEI is currently awaiting their feedback.</li> </ul>
<p><b><u>STATE EARLY INTERVENTION COORDINATING COUNCIL (SEICC) REPORT</u></b></p>	<p><b>Marie Casalino, Assistant Commissioner</b></p> <ul style="list-style-type: none"> <li>● The March 2, 2012, RAP meeting was cancelled.</li> <li>● The New York State Department of Health (SDOH) continues to work on the service coordination payment methodology. The rate package has not been released. SDOH is working with the Centers for Medicare &amp; Medicaid Services (CMS) on Medicaid payment for service coordination in this new methodology.</li> </ul>



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<b><u>SEICC REIMBURSEMENT ADVISORY PANEL (RAP) REPORT</u></b>	<ul style="list-style-type: none"><li>• Two (2) SEICC meetings have been held since the November 29, 2011, LEICC meeting.<ul style="list-style-type: none"><li>○ The December 6, 2011 SEICC meeting focused on reviewing the Annual Performance Report, the data that SDOH has to submit to the federal government for compliance and performance measures. There was also discussion about NYEIS and the CHI<sup>2</sup> initiative.</li><li>○ The March 15, 2012 SEICC meeting did not have a quorum. There was further discussion about the Annual Performance Report, particularly on the indicator about natural environments. There was concern about how the information is gathered and if it reflects reality. There was discussion about group interventions. Dr. Casalino suggested bringing concerns about the natural environment measure to the Group Developmental Task Force. There was a presentation on Project TEACH, which provides child and adolescent psychiatry consultation, education, and training for primary care physicians in New York. Pediatricians are getting training about diagnosis and treatment of particular behavioral health conditions so more children can stay in the primary care setting. The project also allows for mental health consultation. One hour of the meeting was devoted to discussing the executive budget proposal. The discussion primarily revolved around insurance issues.</li><li>○ Peter Pierri noted that it is beneficial to look at the reports from SEICC meetings on the SDOH website. The reports show interesting trends that the Council may want to discuss in the future.</li><li>○ Marilyn Rubinstein noted that SEICC meetings can be viewed on-line via the SDOH website.</li></ul></li></ul>
<b><u>DATA REPORT</u></b>	<b>Marie Casalino, Assistant Commissioner</b> <ul style="list-style-type: none"><li>• Due to ongoing issues in NYEIS, it was not possible to generate a data report for the</li></ul>



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	<p>meeting.</p> <ul style="list-style-type: none"> <li>• BEI will make every effort to have a data report available at the next LEICC meeting.</li> </ul>
<p><b><u>CONTRACTS UPDATE</u></b></p>	<p><b>Marie Casalino, Assistant Commissioner</b></p> <ul style="list-style-type: none"> <li>• BEI is continuing to work on the Early Intervention Request for Proposal (RFP). However, it may be affected by proposed legislation (discussed below; see Legislative Update section).</li> </ul>
<p><b><u>NYEIS TRANSITION UPDATE</u></b></p>	<p><b>Marie Casalino, Assistant Commissioner</b>  <b>Ireti Bobb, Director of EI Services</b></p> <ul style="list-style-type: none"> <li>• NYC DOHMH BEI has created a NYEIS Helpdesk.</li> <li>• All newly referred children go into NYEIS; legacy children (children whose program information was in KIDS) were migrated from KIDS.</li> <li>• EI Regional Offices are moving ahead and doing a great job working through the glitches in NYEIS.</li> <li>• The biggest issue has been cases that were converted from KIDS to NYEIS.</li> <li>• Providers should continue to send feedback.             <ul style="list-style-type: none"> <li>○ Linda Silver noted that there has been progress, but 60-day claim submission is a problem from the provider perspective. Making corrections is daunting and users are</li> </ul> </li> </ul>



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	<p style="text-align: center;">still learning the system. Most agencies use at least three (3) data systems. There is still more room to collaborate.</p> <ul style="list-style-type: none"><li>• Dr. Casalino noted that BEI is aware of the fiscal challenges. SDOH is also aware of issues and is working on fixing intricacies.</li><li>• There are two (2) counties in NYS that are not using NYEIS.</li></ul>
<b><u>EI FINANCE UPDATE</u></b>	<p><b>Anthony Faciane, Budget Analyst (spoke on behalf of Assunta Rozza, Deputy Commissioner for Finance)</b></p> <ul style="list-style-type: none"><li>• Provider community feedback has been instrumental.</li><li>• DOHMH Finance is working closely with SDOH to resolve issues; significant progress has been made. However, it is an ongoing process, and additional work remains to be done.</li><li>• There will be a new NYEIS release in upcoming weeks.</li><li>• DOHMH Finance recommends that providers take part in SDOH NYEIS webinars.</li><li>• Covansys continues to make payments. Providers should address all concerns to Rick Kennedy or Anthony Faciane rather than to Covansys or SDOH.</li><li>• The 60-day requirement has been reinstated and timeliness of submissions is good.</li><li>• The new reviews of documentation for Medicaid billing is not an audit. It serves to ensure that DOHMH billing is Medicaid-compliant. Claims that are being reviewed will not delay</li></ul>



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	<p>processing of other claims. The information requested should be provided as soon as possible. The link to a free program for encrypting data before emailing it to DOHMH Finance was sent to providers.</p> <ul style="list-style-type: none"><li>○ Peter Pierri noted that the providers were not expecting the Medicaid billing project. He requested that DOHMH give providers advance notice of new policies and practices in the future.</li><li>○ Linda Silver reinforced the importance of communication with the whole provider community.</li></ul>
	<p><b>Adam Karpati, Executive Deputy Commissioner, NYC DOHMH</b></p> <ul style="list-style-type: none"><li>• Thanked the LEICC and LEICC committee members.</li><li>• DOHMH is assessing ways to enhance collaboration with providers and families, promote best practices, and measure performance.</li></ul> <p><b>Marilyn Rubinstein, Chair, LEICC</b></p> <ul style="list-style-type: none"><li>• Requested that providers look for parents to join the LEICC, particularly parents of children who have graduated from the Early Intervention Program.</li><li>• Proposed creating a one (1) page document about the LEICC for prospective parent members.</li></ul>



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<p><b><u>COMMITTEE REPORTS</u></b></p>	<p><b>Marilyn Rubinstein, Chair, Transition Committee</b></p> <ul style="list-style-type: none"><li>• The Transition Committee has not met since the November 29, 2011, LEICC meeting.</li><li>• The goal of the Committee is to develop a family-friendly document.</li><li>• Transition and IFSP chapters for the Policy and Procedure Manual have been sent to LEICC members for review; comments are due on March 23, 2012.</li></ul> <p><b>Braden Josephson, Chair, Program Reports Committee</b></p> <ul style="list-style-type: none"><li>• The Program Reports Committee has been reviewing questions and concerns from the November 29, 2011, meeting regarding Bronx referrals and how services are authorized and provided.</li><li>• BEI is authorizing differently, yet the average number of hours of service that children receive has not dropped significantly.</li><li>• Provided highlights from new provider monitoring system:<ul style="list-style-type: none"><li>○ Sample size has been increased, and thus more program evaluators are on site during the visit.</li><li>○ A score is given for each service area; these scores are not aggregated into a single “overall” agency score.</li></ul></li><li>• The Self-Assessment Tool now links all standards from the new monitoring tool to the applicable regulations and citations.<ul style="list-style-type: none"><li>○ Nancy Calderon-Cruz inquired about the timeline for visits.</li></ul></li></ul>
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- Nora Puffett and Dr. Braden Josephson confirmed that the review period continues to be one (1) year, and agencies receive 30-day advance notice of a monitoring visit.

**Nancy Calderon-Cruz, Chair, NYEIS Provider Advisory Committee**

- Focused on challenges for programs.
- Recommendations for NYEIS are at the SDOH level. One recommendation is developing reporting capabilities.
- Will meet again when given direction by LEICC.

**Linda Silver, Chair, Programs and Services Committee**

- The Programs and Services Committee's mission has been to focus on Embedded Coaching in service provision. Its focus has been on changing session and progress note forms to reflect Embedded Coaching principles, including functional outcomes, natural routines, observations, and learning activities.
- The Committee's next topic will be how Provider Oversight will monitor providers on their use of Embedded Coaching.
- Another goal of the Committee is to develop literature about Embedded Coaching for parents.
- Nancy Calderon-Cruz remarked that a one (1) sheet session note is of great concern and asked if the form can have two (2) session notes per page.





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	<p>salaries and the ratio of overhead to direct services expenditures. Overhead expenditures are capped at 15%.</p> <ul style="list-style-type: none"><li>○ Peter Pierri further explained the provisions of the Executive Order:<ul style="list-style-type: none"><li>▪ 1) Sets a minimum for percent of expenditures on direct services - at least 75% in 2013, 80% in 2014, and 85% by 2015. The question of what is considered a direct service is still open.</li><li>▪ 2) Caps Executive Director salary at \$199,000, a figure taken from the federal index. There may be some flexibility, including considerations for organization size and geographical differences; the details should be clarified within the next month.</li><li>▪ Many providers have supported provisions for insurance companies to be part of the EI payment system. However, they felt that some provisions in the current budget proposal were detrimental to providers and that there are smarter ways to ensure that private money comes into the system.</li></ul></li><li>○ Linda Silver noted that people can continue to contact legislators with feedback on the legislation.</li><li>○ Peter Pierri explained that the SDOH cost report was developed for providers that do not submit Consolidated Fiscal Reports (CFR).</li><li>○ Council members discussed the status of quality assurance staff. Peter Pierri remarked that OPWDD and other state agencies consider quality assurance staff, not administrative staff. There are no special qualifications required for quality assurance staff in statute, but they tend not to be clerical.</li></ul>
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	<ul style="list-style-type: none"> <li>○ Maria Bediako stated that it is important to look at the functions of the staff in question. If the work is in support of a program aspect, lean toward considering that direct service.</li> <li>○ Marilyn Rubinstein remarked that Assembly Member Dick Gottfried’s Chief of Staff said that EI has generated more comment than ever before.</li> </ul>
<p><b><u>PUBLIC COMMENT</u></b></p>	<p>Carole Oshinsky: Commended the LEICC. Encouraged continued access to EI services. Emphasized the importance of localities continuing to push timeliness of service provision.</p> <p>Mindy Kassover: Has worked in physical therapy for 28 years. Ms. Kassover has watched and testified at SEICC meetings. She has found that parents benefit from Center attendance and the ability to network with other families. Ms. Kassover expressed that the drawback to Center attendance is giving up confidentiality. She suggested that EI documents provide space for parents to state what they have learned from providers.</p> <p>Sharon Blumenthal: Executive Director of Metro Children. Offered thanks to Linda Silver for being the provider voice and to NYC NYEIS helpdesk, Sim Peters, and Ireti Bobb. Ms. Blumenthal expressed the view that NYEIS has become all-consuming. Providers need regular communication on workarounds that are city-specific. Requested a contact list for Regional Offices and guidance on the best contact person to resolve different issues. Ms. Blumenthal also requested a formal appeal process for the 60-day billing requirement.</p>
<p><b><u>ANNOUNCEMENTS</u></b></p>	<p><b>Marilyn Rubinstein, Chair, LEICC</b></p> <ul style="list-style-type: none"> <li>● Final meeting as LEICC Chair due to term limits.</li> </ul>



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**MEETING ADJOURNED AT 11:50 AM**

- Confirmed next meeting will be held on July 24, 2012.
- Suggested that NYC DOHMH BEI look broad and wide for membership, including academia and parents of children who were in the Early Intervention Program.