

Legislature Should Bolster Early Childhood Intervention (ECI) to Support School Readiness

Early Childhood Intervention (ECI) is one of the state's main programs for influencing children's trajectory during the developmentally critical years of early childhood and ensuring that more students start kindergarten ready to succeed. The proposed Medicaid rate cuts for children's therapies would adversely affect the community organizations that provide ECI services, which are distinct from the home health agencies at the center of the rate controversy. After past budget cuts to ECI, legislators should ensure full funding and support is provided to the program and the children with disabilities and delays who rely on it.

Background

ECI is the state program to help children from birth to age three with disabilities and developmental delays. A range of comprehensive services is provided by community organizations such as Easter Seals, Any Baby Can, and the Brighton Center, to name just a few examples. These groups ensure that services are coordinated to meet the unique needs of each child and that parents have the guidance and support necessary to continue to meet their children's needs. Services are tailored to meet each child's developmental goals. For example, ECI may provide speech therapy to children who need help learning to speak, or physical therapy to children who need help learning to walk. Services are provided in the home or wherever the child is most comfortable.

As federally required, every child meeting the state's eligibility requirements is entitled to program access, regardless of family income. However, the financing mechanisms of ECI are complex and administratively challenging. Depending on a family's income, ECI services may be financed through a combination of Medicaid, a family "cost share," private insurance, and state general revenue funds in the form of contracts administered by the Texas Department of Assistive and Rehabilitative Services (DARS). ECI is partially funded through Part C Individuals with Disabilities Education Act (IDEA) funding, which supports similar state programs throughout the country.

A Proven Track Record

ECI is an effective program for helping children prepare for school. Nearly half of children in the program or in similar programs in other states who were at risk of needing costly special education services did not need

special education when they arrived in kindergarten. Over 75% of participating Texas children have shown gains in social-emotional skills and use of age-appropriate skills.

Recent Legislative Decisions Undermine Services

Yet the Legislature has shortchanged ECI multiple times in recent years, endangering services for children in need. Legislators cut funding in 2011, resulting in tighter eligibility requirements and a focus only on children with more severe – and expensive – needs. The Legislature underfunded ECI again in 2015. In addition, in 2015, the Legislature passed controversial cuts to Medicaid reimbursement rates for children’s therapies without taking into account the impact of those cuts on ECI access. The cuts were aimed at home health agencies, which are distinct from ECI providers. A lawsuit to stop those reimbursement rate cuts is pending.

In response to reduced funding and policy changes, the number of ECI providers throughout the state has dropped from 56 to 49 since 2011. Existing ECI providers have eliminated staff, increased caseloads for staff, reduced their community outreach efforts, and taken other steps that jeopardize access to these critical services. While ECI serves approximately 50,000 children every year across the state, Texas reaches a smaller percentage of children than the national average (2.03% vs 2.79%, according to the latest data).

For communities working to strengthen their early childhood systems and improve school readiness, a robust ECI system is critical. If the Legislature continues to reduce access to ECI for families with children age birth to three with disabilities and developmental delays, more children will arrive in pre-k and kindergarten with behavioral and physical challenges that require costly interventions and strain classroom management.

Policy Opportunities

The 2017 legislative session offers early childhood advocates a key opportunity to bolster ECI and ensure every eligible family can access services. Specifically, state policymakers should:

- Boost state funding to meet the needs of all eligible ECI families
- Dedicate funding for statewide community outreach efforts (Child Find)
- Measure program performance based on outcomes rather than service hours
- Ensure all private insurers cover speech therapy and other services Medicaid covers
- Reduce administrative burdens for ECI providers
- Offset the impact of any acute therapy rate cuts with increased GR and other revenue sources

For more information, please sign up for ECI policy alerts and updates at www.txchildren.org.