



# Department of Health

**KATHY HOCHUL**  
Governor

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Commissioner

**JOHANNE E. MORNE, MS**  
Executive Deputy Commissioner

November 15, 2024

Nadine Morrell  
Audit Director  
Office of the State Comptroller  
Division of State Government Accountability  
110 State Street – 11<sup>th</sup> Floor  
Albany, New York 12236-0001

Dear Nadine Morrell:

Enclosed are the Department of Health's comments on the Office of the State Comptroller's Follow-Up Audit Report, 2024-F-3 entitled, "Oversight of the Early Intervention Program" (Report 2021-S-25).

Thank you for the opportunity to comment.

Sincerely,

A handwritten signature in blue ink that reads "Johanne E. Morne".

Johanne E. Morne, M.S.  
Executive Deputy Commissioner

Enclosure

cc: Michael Atwood  
Melissa Fiore  
DOH Audit

**Department of Health  
Comments on the  
Office of the State Comptroller's  
Follow-Up Audit Report 2024-F-3 entitled,  
"Oversight of the Early Intervention Program"**

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The following are the Department of Health's (Department) comments in response to the Office of the State Comptroller's (OSC) Follow-Up Audit Report 2024-F-3 entitled, "Oversight of the Early Intervention Program" (Report 2021-S-25).

Recommendation 1

*Take steps to identify and understand the reasons why some children are not benefiting from the services they are entitled to and why services are not always provided on time. Based on the results, develop and implement strategies to improve participation and timely provision of Program services.*

Status- Partially Implemented

Agency Action - Since our initial audit, DOH has conducted its annual analysis to determine the reason why services were sometimes delayed. According to its February 2024 analysis, the primary reason for service delays was a shortage of availability for in-person services. To address this, DOH has undertaken many steps to increase provider capacity, including obtaining a 5% rate increase for services provided in person, decreasing the required experience hours for individual provider approval, and launching a statewide recruitment campaign. DOH is also working on a loan forgiveness program for new providers.

However, DOH has not taken any additional steps to better understand why, in many cases, children who are eligible for and can benefit from the Program are not receiving services. For instance, the initial audit identified lack of parental consent as a significant barrier. While DOH continues to collect information regarding the reason a case is closed (e.g., family moved out of state, child aged out), when a parent declines to consent or opts to discharge their child prematurely, the record is classified simply as "Family Refused," with no further, more specific, details as to why the parent has chosen to not participate. While we recognize that the Program is voluntary, it is critical for DOH to identify and better understand the underlying reasons why many parents are refusing to participate. DOH should then implement strategies to address these reasons to improve Program participation and service delivery.

**DOH Response to Recommendation 1**

The Department has successfully increased annual enrollment to 73,497 in program year 2022-23, which exceeds pre-COVID enrollment of 70,716 in program year 2018-2019. The Department has implemented activities, including family campaign, community events, electronic Family Listserv communication tool, Parents as Partners training, and referral videos to increase awareness of the Early Intervention Program and referrals to the Program.

While the Program is voluntary, and parents have the right to refuse without providing a reason, the Department is open to exploring why some families "refuse early intervention services". The Department will first engage with local Early Intervention Officials and service coordinators to evaluate methods to gain a better understanding of why some families choose not to participate in the Program.

## Recommendation 2

*Develop and include more specific goals, tasks, and/or objectives on future municipal workplans related to Child Find's public awareness and outreach.*

Status- Partially Implemented

Agency Action - DOH officials stated that they are working internally to develop new language and requirements to address this recommendation. According to officials, future workplans will require each municipality to submit a one- to two-page annual report containing specific information on how they addressed their responsibilities as a local administrator of the Program. The specific information should include, among other details, what marketing materials were purchased, how and when information materials were distributed, and how many parents participated in training. It should also identify any gaps in services, as well as the methods the municipality will use to address those gaps, no later than 60 days after the end of each Program year. Officials said they plan to add the new requirements to contracts beginning October 2024.

### **DOH Response to Recommendation 2**

This recommendation has been fully implemented. The Department has added language to the administrative grant contract, effective October 1, 2024 requiring municipalities to submit an annual report that provides specifics about how they performed their workplan tasks and met their requirements as local administrators of the program which includes addressing gaps in services, increasing public awareness and outreach. The annual report requires municipalities to include specific information about what marketing materials were purchased, how and when information materials were distributed, and how many parents participated in training.

## Recommendation 3

*Take steps to better understand disparities in access to Program services, including those identified in the Department's August 2021 report on race and ethnicity as well as those commonly known by municipal officials, and develop an action plan to improve equitable access to Program services.*

Status – Implemented

Agency Action - Since the initial audit, DOH has met both internally and with municipalities to discuss the findings contained in the August 2021 report on race and ethnicity and develop potential solutions. DOH has also begun to implement some of the potential solutions identified. For example, DOH has obtained an additional 4% rate modifier for services provided in rural and underserved areas (in addition to the 5% rate increase for services provided in person). DOH also analyzed Program enrollment data by zip code, factoring in race and ethnicity. Based on the analysis, DOH launched a social media campaign to promote the Program in the areas identified as having low enrollment among Non-Hispanic Black children compared to the overall population. In addition, DOH is working to remove cultural and linguistic barriers. Recent promotional campaigns have included advertisements in both English and Spanish, and DOH now offers provider training on working with diverse families as well on developing cultural and linguistic competency. Program staff are also participating in the Early Childhood Technical Assistance Center's IDEA Part C Early Intervention Program Racial Equity Community-a collaborative learning community established to promote practices that center on racial equity in statewide early

intervention systems, by recognizing and exposing systemic bias and racism and identifying and implementing tangible strategies to work toward equitable programs, practices, and outcomes for families. Finally, DOH officials stated they are reviewing more recent Program year data (July 2020 through July 2022) to update the report on race and ethnicity and will continue to examine any noticeable trends and explore any new findings.

### **DOH Response to Recommendation 3**

DOH agrees with OSC's assessment that this recommendation has been implemented.

### Recommendation 4

*Routinely verify the accuracy of the provider directory to ensure families have access to provider information that is accurate and useful.*

Status -Partially Implemented

Agency Action -According to officials, DOH now routinely verifies the accuracy of its central directory of providers and updates NYEIS immediately when a provider is newly approved and whenever their information is amended, such as a change in service area or service type. DOH officials stated that they also update the publicly available online version of the central directory of providers monthly to ensure that service coordinators, municipalities, and families have the most accurate and up-to-date information. We compared DOH's provider directory from March 2023 to the directory available online as of March 2024 and verified that it had been updated. We also verified that the current provider directory includes providers with new agreements starting as recent as the previous month and does not include providers with expired agreements.

While DOH has not yet taken steps to update the directory for inactive providers whose provider agreement has not expired, the new data system, EI-HUB, includes a requirement that will inform DOH of providers who have not delivered any services in 2 years. DOH officials plan to contact those providers regarding their interest and availability to deliver Program services. If there is no response or if the provider confirms discontinuation of Program services, DOH plans to remove them from the directory as an approved provider.

### **DOH Response to Recommendation 4**

This recommendation has been implemented. The Department agrees that it is important that the Central Directory accurately reflects approved providers who are actively engaged with the Early Intervention Program. The new data system, EI-HUB, launched on October 15, 2024, and enables the Department to inactivate approved providers who had not delivered services within the past 2 years of their approval to be an Early Intervention Program provider. The Department is working with the vendor to ensure a smooth roll-out of the system.

### Recommendation 5

*Work with the EI-HUB contractor to expedite the release of the new system as soon as practicable. Ensure that municipalities are properly prepared to use EI-HUB and that all essential functionality is operational before NYEIS is decommissioned. Continue to coordinate with counties after implementation to ensure EI-HUB functionality meets their needs.*

## Status -Partially Implemented

Agency Action -In February 2024, DOH announced that the new EI-HUB system would be launched in June 2024 to provide stakeholders with almost 4 months advance notice of the intended launch date. However, DOH subsequently delayed the launch until October 2024 at the request of stakeholders who had not been able to take the training yet. DOH further justified the decision to move the EI-HUB launch to October 2024 to avoid adding to the new system those children who would age out in just a few months when the new school year begins. There were also some unanticipated issues with the system.

DOH continues to provide stakeholders with resources to ensure municipalities are properly prepared. These resources include a monthly newsletter, a system transition checklist, in-person training, and a "Bootcamp" webinar series of six detailed trainings on the system. DOH also provides updates and information on the new system during quarterly all-county conference calls and at quarterly Early Intervention Coordinating Council meetings. Additionally, DOH has an EI-HUB e-mailbox for stakeholders to ask questions, share concerns, and offer feedback.

### **DOH Response to Recommendation 5**

The Department launched the EI-Hub on October 15, 2024, ensuring the recommendation is fully implemented. Early Intervention Program stakeholders will continue to receive training and resources after launch to ensure their successful use of the system. The Department along with its vendor, PCG, provided enhanced training to counties and providers with the delay in launch. The enhanced training included recorded micro e-learning modules, interactive webinars, office hours for one-on-one questions, additional in-person training across the State, and an upgraded Sandbox training version of the EI-Hub which included real provider, county, and therapist data as well as obfuscated child data. Additionally, the Department and the EI-Hub system vendor, PCG, will establish a county and provider user group for continued feedback.