

Support Overdue Rate Increase for Early Intervention Providers Cosponsor HB2191 (Conroy) and SB1316 (Aquino)

Early Intervention (EI) ensures that children under three with 1) developmental delays, 2) diagnosed medical conditions with a substantial likelihood of delay, or 3) other established factors that put them at risk of substantial delay have the best chance for healthy development. **In EI, children receive a range of developmental and social-emotional services, including speech and language, occupational and physical therapies, and social work services.** Families also receive the coaching and support they need to further the gains their children make in therapy. EI serves children from all income levels and in every county across the state.

Less than five percent of Illinois infants and toddlers are served in EI, well below the expected disability prevalence rate of 13 percent. Recent policy initiatives are improving identification and referral of infants and toddlers to EI by promoting developmental screenings for children across early childhood settings. These screenings ensure we are finding those infants and toddlers who can benefit from services that prevent the need for future, costlier interventions. Because of these system improvements, the **statewide caseload is increasing.** In the spring of 2018, nearly 23,000 children received EI, a number that's grown from 21,000 just two years ago.

Problem

Illinois must support its workforce in order to meet the needs of its residents. **EI providers, unfortunately, have not seen an increase to their reimbursement rates in 11 years** (and the last increase was just 3 percent.) Between 2008 and 2017, the state's Consumer Price Index has increased by 16.2%. A decade of stagnation presents a number of challenges for the provider community:

- Agencies have trouble recruiting and retaining staff due to low wages and rising costs;
- agencies are often unable to provide annual raises and merit-based salary increases;
- EI providers are seeing increased caseloads, which leads to burnout and staff turnover; and
- because current reimbursement rates only cover direct services, the rates often fail to account for administrative and billing costs.

Solution

We must increase reimbursement rates for all providers. In addition, *a differentiated increase for developmental therapists (DTs)* is needed because the current reimbursement rate for DTs is much lower than the rate at which other professionals providing onsite services are able to bill. **HB2191 and SB1316 require the Department of Human Services (DHS) to increase reimbursement rates for providers by 3.0% in FY20, FY21, and FY22, except that the reimbursement rate for Developmental Therapy will increase by 6.0% over the same three years.** This modest COLA will cost the state no more than \$5 million during the first fiscal year of implementation.

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List of Supporting Organizations

The Arc of Illinois

Delta Gamma Center for Children with Visual Impairments

DuPage Early Childhood Collaboration

Elmhurst College

Erikson Institute

Fight Crime: Invest in Kids Illinois

Fox Valley United Way – SPARK Early Childhood Collaboration

IARF

Illinois Association for Infant Mental Health

Illinois Head Start Association

Illinois Psychiatric Society

Invo Progressus Healthcare

Latino Policy Forum

March of Dimes

Metropolitan Family Services

Molinaro Pediatrics

National Association of Social Workers, Illinois Chapter

Peoria County Bright Futures

POWER-PAC Illinois, a project of COFI

Prevent Child Abuse Illinois

ReadyNation Illinois

Speech Tree Associates

YMCA of Metropolitan Chicago