



## Agencies for Children's Therapy Services – Advocacy Alert – February 27, 2024

[Agencies for Children's Therapy Services](#) (ACTS) is an association of 31 agencies providing Early Intervention, Pre-K, Special Education, and School Age Special Education services. Member agencies collectively serve over 25,000 infants, toddlers, and preschoolers statewide.

### Background

The Executive Budget proposes administrative changes/efficiencies to the Early Intervention Program to yield savings to offset the cost of its proposed 5% increase in the reimbursement rates for in-person services. However, these three **proposed** initiatives are **misguided, bad for children and families, will cause irreparable harm to provider capacity, and contradict recent initiatives** of the New York State Department of Health (NYSDOH).

- Prohibition of two or more extended visits for the same services on the same day.
- A drastic reduction in the rate of reimbursement for telehealth services to the current facility-based rate.
- A decrease in the maximum size of groups for Group Developmental services from 10 to 6.

### Summary of Concerns

- Prohibition of Two or More Extended Visits in Same Day: In the rate system established by NYSDOH in the early 1990s, visits that are 59 minutes or less are paid at a “basic” visit rate and visits that last one hour or more are paid at an “extended” visit rate. However, this visit payment framework pre-dated the proliferation of intensive applied behavior analysis (ABA) for children diagnosed with autism. In 1999, the NYSDOH issued Clinical Practice Guidelines on Autism recommending that children in the program diagnosed with autism receive a minimum of 20 hours per week of ABA therapy. The NYSDOH convened a new group of experts to reconsider the guidelines in 2017 and this group **maintained** that children diagnosed with autism should receive a minimum of 20 hours per week. Consistent with NYSDOH's recommendations, many children with autism currently receive four hours of ABA therapy for five days per week. Yet, while clinically the NYSDOH recommends intensive therapy, it has never modified its payment system to accommodate it. In the absence of any fair way to pay therapists for four hours of daily therapy in the current pricing system, counties and provider agencies have adapted to pay therapists for two or more extended visits on the same day.

**The Governor's proposal to eliminate two or more extended visits in the same day achieves savings on the backs of children with autism and their families** as therapists will be forced to limit the duration of services to one hour per day due to a 50% reduction in reimbursement for children receiving intensive ABA. Furthermore, it will cost the State more funding in the long run as children with autism may require more services and assistance in preschools, during their school years and beyond.

- Telehealth Payment: ACTS understands that there is a desire to create an incentive for therapists to deliver services in person rather than via telehealth by creating a differential in rates. However, several counties have NO providers who will deliver services in person and rely on therapists from other counties to serve children via telehealth. Hard to serve counties in urban areas will lose their telehealth therapists. This proposal would reduce the payment rate for a telehealth speech therapy visit in most of upstate NYS from \$66-68 to \$49-50 which is a 25% reduction in reimbursement to therapists resulting in the loss of any remaining therapists to serve rural and hard to serve counties.
- Group Size: In September 2022, the NYSDOH proposed rulemaking to reduce the maximum size of developmental groups from 12 to 8; then revised its proposal in October 2023 to increase the maximum from 8 to 10 in response to capacity concerns from commenters. **It is perplexing why the Governor and NYSDOH would NOW propose to reduce the group size down from 10 to 6!** Developmental groups are an essential service for children who are approaching the age when they will be transitioning to preschool and can benefit from socialization and communication with their peers. Developmental groups are actually *more cost-effective* than individual visits to homes.

## Alternatives

ACTS **urges the Legislature and Governor to include an 11% increase in reimbursement statewide for the Early Intervention Program and to REJECT** these administrative proposals that would do irreparable harm to the program. ACTS understands there is a need to offset the costs of any rate increase and proposes the following alternative savings/revenue proposals that are NOT harmful to provider capacity, children in the program or their families.

- (\$1 m) Elimination of “push-in” and “pull-out” services: The NYSDOH just finalized regulations to eliminate the practice of “push in” or “pull out” services during developmental groups but the Executive has not included the estimated cost savings on the score card for this change.
- (\$0.7 million) EI audit recoveries – The NYSDOH just launched a new effort to audit 75 EI provider agencies and 25 therapists each year for the next four years, but the Executive has not included the estimated cost savings on the score card for this change.
- (\$4 million) Increase covered lives assessment pool for EI: Commercial insurances no longer receive ANY claims for early intervention services and \$40 million annually in revenue is collected from insurers in lieu of the costs to serve children. This is woefully low and commercial insurers should contribute more to cover the costs of services that would have been covered by their parents’ health insurance policies.

**Contact:** Brad Hutton, M.P.H.

ACTS Government Affairs Liaison  
 Hutton Health Consulting, LLC  
 (518) 598-4039  
[bhuttonhealth@gmail.com](mailto:bhuttonhealth@gmail.com)