

NEW YORK CITY EARLY INTERVENTION COORDINATING COUNCIL (LEICC)

10.24.2025	10:00 AM	WebEx
<p>LEICC Member Attendees</p>	<p>Lidiya Lednyak, MA, Esq., Assistant Commissioner, Bureau of Early Intervention, NYC DOHMH Elizabeth Leone, Chair of LEICC Patricia Gray, Ed.D., LCSW Renee Noel Sundari Periasamy, MD Jessica Wallenstein, Ph.D. Tricia DeVito, MS, Ed., SDL Christopher Tan, Esq. Danielle Herring (Absent) Beth Elenko PhD, OTR/L, BCP, CLA, FAOTA Jackie Chessen, MSW, SSW, LCSW-R Theresa Pitogo Dolores Giurdanella</p>	
<p>Welcome, Introductions, and Minutes Approval</p>	<p>Elizabeth Leone opened the meeting by reminding attendees that New York City’s Local Law No. 103 of 2013 and the New York State Open Meetings Law require open meetings to be both webcast and archived; therefore, today’s meeting was being recorded.</p> <p>Elizabeth Leone reviewed the procedures for LEICC meetings, including that, for in-person LEICC meetings, attendees should pre-register on the NYC Department of Health Early Intervention LEICC webpage. For web based LEICC meetings, attendees will find a link on the NYC Department of Health Early Intervention LEICC webpage. Meetings are open to the public, but the audience does not address the LEICC members during the meeting. The Chat and Q&A features should not be used for today’s web-based meeting. Members of the public were asked to submit written public comments by emailing EmbeddedCoaching@health.nyc.gov.</p> <p>Elizabeth Leone stated that transcription will be available for this meeting, and that written meeting minutes will be made available.</p> <p>LEICC members introduced themselves. Minutes from the April 2025 meeting were approved.</p>	

SEICC Report, NYS Executive Budget Updates, and Referral Portal

Lidiya Lednyak MA, Esq., Assistant Commissioner, Bureau of Early Intervention provided a summary of the State Early Intervention Coordinating Council (SEICC) meetings held on September 11, 2025. All SEICC materials were shared with the LEICC members, along with the NYC BEI Data Report and Agenda, in advance of this meeting.

SEICC Recap: Bureau Administrative Updates

- Federal Updates
 - SDOH Received the IDEA Part C award Letter on July 1, 2025 (FFY 2025)
 - Funding amount is consistent with that of the previous year (\$28M)
 - For FFY 2026, all branches of federal government are calling for Federal IDEA grant to be funded at the FFY 2025 levels
 - Federal compliance rating received = NYS received “Meets Requirements”
- Stopgap payments
 - NYS BEI issued stopgap payment announcement on 5.16.2025
 - Last State Stopgap payment occurred on 6.19.2025
 - Repayment of the Stopgap payments began on 7.23.2025
 - Payments returned to bi-weekly cycle on 10.1.2025
 - Questions and issues should be directed to EIP.Fiscal@health.ny.gov
- 2024-25 enacted NYS budget savings
 - Part of enacted budget savings included a reduction in group size to 6 children
 - NYS BEI will be issuing regulations with the changes and will offer a full comment period

SEICC Recap: Fiscal Agent Payment Data and Transportation Update

- SDOH reported a significant reduction in the number of claims submitted to Medicaid.
 - 60% of all children in EI have Medicaid.
 - Claims submitted to Medicaid are down from an average of \$118M per quarter in 2024 pre-EI-Hub Implementation to an average of \$92M post EI-Hub implementation.

SEICC Recap: Executive Budget Rate Implementation Update

- In-person and Telehealth Rates in the EIP

- The 2024-25 enacted NYS budget included a 5% increase for EI providers for in-person services.
 - Part of the savings to be achieved by decreasing the rate of EI telehealth services.
 - State Plan Amendment (SPA) was submitted to CMS for the rate increase to be retroactive to 10.1.24 and the telehealth reduction to be effective 1.1.25.
- In-person and Telehealth Rates in the EIP – Role of the Service Provider
- Continue to follow all EI telehealth guidance:
 - Obtain parental consent for telehealth services before any service is provided using telehealth.
 - Use the required technology and internet connection to render telehealth services.
 - EI services rendered via telehealth must include simultaneous audio and visual components for the entire duration of the authorized session.
 - Ensure that NYC Session Notes and Service Logs reflect if service was delivered in-person or via telehealth.
- Modifier for Rural and Underserved Communities
 - The 2024-25 enacted NYS budget included a 5% increase for EI providers for in-person services.
 - The 2024-25 enacted NYS budget included a 4% increase for in-person services delivered in underserved communities to be effective April 1, 2025.
 - On June 30, 2025, the NYS Department of Health submitted a State Plan Amendment (SPA) for the 4% increase.
 - SPA was approved on September 25, 2025.
 - The rate increase will be retroactive back to 4/1/25.
 - NYS BEI indicated that they will publish a list of zip codes and services that will be covered by the 4%.
 - NYS EICC passed a motion recommending a methodology to identify zip codes for the 4% rate increase.

<p>Early Intervention Data Report</p>	<p>Nora Puffett, Director, Administration and Data, reviewed the data report. Data was presented on new referrals and re-referrals, receipt of services, aging out outcomes and insurance status in the Program.</p> <ul style="list-style-type: none"> ● Number of New and Re-Referrals Per Fiscal Year, by Race and Ethnicity July 2019 – September 2025 ● Number of New and Re-Referrals Per Fiscal Year, by Borough July 2019 – September 2025 ● Number of Children Receiving General Services Per Fiscal Year, by Borough July 2019 – September 2025 ● Number of Children Receiving General Services Per Fiscal Year, by Race and Ethnicity July 2019 – September 2025 ● Outcomes for Children Aging Out of EIP Citywide, July 2022 – March 2025 ● Outcomes for Children Aging Out of EIP by Race and Ethnicity, July 2022 – March 2025 ● Insurance Status of Children Receiving General Services, July 2025 – September 2025
<p>Early Intervention Provider Oversight Activities</p>	<p>Nora Puffett, Director, Administration and Data, presented NYC Provider Oversight Annual Monitoring Results by Service Area, January 2025 to October 2025. Results were presented for 24 completed program monitoring reviews for 24 completing agencies.</p>
<p>EI-Hub Implementation Update</p>	<p>Dolores Giurdanella, Director, NYC Regional Office Operations, presented an EI-Hub Implementation and Regional Office Update.</p> <p>What Concerns Remain Since the Launch of the EI-Hub?</p> <ul style="list-style-type: none"> ● Continued work is being done to improve timeliness: <ul style="list-style-type: none"> ○ Consistent practices within the Regional Office and across offices ○ Response times to families and EI providers ○ Workflow reorganization to reduce the time needed for review ● Speeding EIOD Approvals: Meet all requirements for submission of IFSP documentation <ul style="list-style-type: none"> ○ Parents/surrogates must sign Initial IFSP consents and attendees page, and Review, Annual and Amendment IFSP consents. <ul style="list-style-type: none"> ▪ Initials: SCs must submit signed forms via the RO HCS Secure File Transfer mailbox within 5 calendar days of the IFSP meeting.

	<ul style="list-style-type: none"> ▪ Reviews, Annuals and Amendments: <ul style="list-style-type: none"> • SCs are required to upload signed forms in the IFSP Parent Agreement Panel. • SCs are required to update required IFSP panels ○ Amendments: SCs must end-date existing SAs and create new ones to ensure that new SAs are generated. <p>What Is NYC Doing About Timeliness?</p> <ul style="list-style-type: none"> • Modifying internal processes to identify central points of contact for receiving initial IFSP Consents and expediting EIOD signatures. • Planning to bring back amendment IFSP meetings with the EIOD present to help with facilitating meetings, obtaining signed consents and strengthening connections with families. • Starting to use data reports to expedite problem resolution on <i>active, non-amendment IFSPs</i> and reduce the need for amendments.
	<p>Jeanette Gong, Ph.D., Director, Intervention Quality Initiatives, NYC Bureau of Early Intervention, presented on EI-Hub Implementation and Provider Entry for EI-Hub Referrals.</p> <ul style="list-style-type: none"> • When EI-Hub was launched on October 24, 2025, EI Providers were not able to submit referrals via the new NYS DOH BEI data system. • NYC BEI believes that EI Providers should be able to enter and submit referrals into the EI Hub • NYC BEI advocated and collaborated with NYS DOH BEI, and by summer 2025, PCG worked it out so that EI Providers could be assigned the <i>EI Provider Referral Role</i> that permits EI providers to submit referrals into the EI-Hub. • To support EI providers in submitting referrals, NYC EI created training and resources so that referrals can be entered accurately and completely so that essential information is available for service coordinators contacting families. <p><u>EI Provider Referral Training</u></p> <ul style="list-style-type: none"> • Training opportunity emailed to all EI Provider agencies 6/18/2025. • Thirty-three (33) separate one-hour training sessions were held between 7/10/25 – 7/22/25.

- Two components:
 - Demonstration
 - Practice using EI-Hub sandbox
- 102 provider agencies were assigned the EI Provider Referral Role by PCG after successfully completing the training.
- Each participating Provider Agency was given resources:
 - NYC BEI EI-Hub Step-by-Step Instructions for Entering Referrals
 - FAQs
- Resources and video recording of referral entry steps are available on the NYC BEI Learning Management System (LMS).

Jeanette Gong, Ph.D., Director of Intervention Quality Initiatives, NYC Bureau of Early Intervention, presented on the Hunter College Service Coordination Professional Development Institute (SCPDI).

SCPDI: Mandatory 2025-26 NYC Policy Trainings

- In 2025-26, SCPDI is offering **NYC EIP Policy Series Trainings** that are **mandatory for SC supervisors**, who must complete them by December 2026.
- The training series began in February 2025 to support SCs in implementing updated NYC EIP policies and procedures.
- Provider agencies must ensure that staff and independent contractors implement changes for compliance.
- Provider Oversight will begin tracking SC supervisors' compliance with this requirement in early 2026.
- The five mandatory **NYC Policy Series** trainings for SC Supervisors, to be updated in 2026, are:
 - Pre-IFSP Updates
 - IFSP Updates
 - Post-IFSP Updates
 - Integration of Natural Environments, Family-Centered Practices, and the Creation of Desired Outcomes
 - A Collaborative Approach to EI Children and Families in Foster Care
- Trainings on MDE/Screening and Transition will also be offered in 2026.

	<p>SCPDI: Information and Resources</p> <ul style="list-style-type: none"> • All SCPDI trainings <ul style="list-style-type: none"> ○ fulfill the NYS DOH BEI annual requirement for professional development. ○ cover the <i>NYS DOH BEI Competency Areas for Evidence-based Evaluations and Services in NYS EIP</i>. • The <i>NYC EIP Policy and Procedure Manual</i> and forms were updated in October 2025 and are available on the NYC BEI <i>Information for Providers</i> webpage: https://www.nyc.gov/site/doh/providers/resources/early-intervention-provider-policies-procedures-forms.page • Each SCPDI training participant receives copies of the PowerPoint and materials to use in training their own SCs. • Register for SCPDI trainings on the NYC BEI Professional Development and Trainings webpage at https://www.nyc.gov/site/doh/providers/resources/early-intervention-professional-development-and-trainings.page • Remaining 2025 trainings include: <ul style="list-style-type: none"> ○ 11/12/2025: A Collaborative Approach to EI Children and Families in Foster Care* ○ 11/18/2025: Connecting Families Using Culturally Relevant Responses ○ 12/02/2025: The Integration of Natural Environments, Family-Centered Practices, and the Creation of Desired Outcomes* <p style="text-align: center;">* Mandatory 2025 NYC EIP Policy Series Training for SC Supervisors</p>
<p>Early Intervention Referral Portal</p>	<p>Mary-Elizabeth Vachon, LMSW, MPH, Systems Integration Manager, and Diana Girhotra, MPA, EI Quality & Communication Project Manager presented on the implementation of the Public Early Intervention Referral Portal and a provided a Portal demonstration.</p> <p>Introduction</p> <ul style="list-style-type: none"> • As of 10/14/25, the public can now make a referral to Early Intervention or Developmental Monitoring anytime from a computer, smartphone, or other mobile device

Who should use the portal to submit referrals?

- Parents and family members, daycare providers, pediatricians, other community members.
- **EI providers who are approved to submit referrals directly into the EI-Hub should continue to do so.**
- If EI Hub flags the referral as a duplicate, EI providers should submit the referral via the portal.
- **EI providers who do not submit referrals into EI-Hub should use the portal.**

Who should NOT use the portal?

- EI providers who are approved to submit referrals directly into the EI-Hub should continue to do so.
 - Only if EI Hub flags the referral as a duplicate should these EI providers submit the referral via the portal.
- Administration for Children's Services (ACS) and foster care agency team members should continue to call the ACS Hotline 877-885-KIDZ (5439) to refer families.
- Health Care providers submitting referrals through their Electronic Health Record (EHR) should continue to do so.
- If unable to use the portal, parents can call 311 and ask for 'Early Intervention' to complete the referral by phone.

NYC EI Referral Portal Dissemination

- Updated 311 scripts
- Citywide Immunization Registry
- Healthy NYC
- EI Website
- Print Material
- Social Media

- Demonstrations for:
 - **EI Providers** on 11/10/25 at 1pm

	<ul style="list-style-type: none"> ○ Community Partners on 11/6/25 at 11am <p>Stakeholders were invited to email RSVPs to: EmbeddedCoaching@health.nyc.gov</p>
<p>MyCity Child Care Provider Portal</p>	<p>Renee Noel, MPH, Assistant Commissioner, Bureau of Child Care, New York City Department of Health gave a presentation on the development and implementation status of the MyCity Child Care Provider Portal</p> <p><u>MyCity Provider Portal: What Is It?</u></p> <ul style="list-style-type: none"> ● Online system for applying for a new group child care permit or renewal. ● The Portal will simplify the application process for providers and Health Department staff, making it more efficient and transparent, and allowing faster permit issuance. ● MyCity Provider Portal serves as a document depository, dashboard and tracking system. <p><u>MyCity Relieves the Following Provider Challenges</u></p> <ul style="list-style-type: none"> ● User Experience ● Document Upload and Tracking ● Email Coordination ● Changes & Notifications ● Interagency Integration ● Provider Feedback <p><u>Provider Portal Solution</u></p> <ul style="list-style-type: none"> ● Online Application Portal <ul style="list-style-type: none"> ○ Ensures a user-friendly interface that guides applicants through the process. ○ Allows applicants to schedule on-site visits and inspections as per the availability of the DOHMH staff. ● Document Upload & Management <ul style="list-style-type: none"> ○ Ensures document validation (e.g., correct formats, required fields) ○ Reduces duplicate uploads across different portals. ○ Requests documents at the appropriate step to reduce confusion and better track the application progress.

	<ul style="list-style-type: none"> • Direct Communication with Workers <ul style="list-style-type: none"> ○ Communicates with providers and NYC Health Department in near real-time ○ Alerts programs to status updates and requests ○ Shows inspector availability and allows scheduling inspections and site visits online <p><u>Closing</u></p> <ul style="list-style-type: none"> • The new MyCity Provider Portal reflects our shared commitment to making it easier to do the right thing — for providers, for staff, and ultimately for New York City’s youngest children and their families. • It is not just a technology upgrade; it’s a culture shift toward transparency, efficiency, and partnership. • Portal functions underwent User Acceptance Testing (UAT) to verify ease of use. • Launch date to be announced. <p>Visit the Bureau of Child Care website for up to date information and requirements at: https://www.nyc.gov/site/doh/services/child-care.page</p>
<p>Electronic Health Records – Early Intervention (EHR – EI)</p>	<p>Katharine H. McVeigh, PhD, MPH, Director of Early Intervention Research and Evaluation, and Shivali Choxi, MD, Senior Director, Pediatric Primary Care Innovation, NYC H+H, presented on EIBDX: Using Automation to Sustain and Expand Access to Closed Loop Referral between Healthcare and the NYC EIP.</p> <p><u>Background</u></p> <ul style="list-style-type: none"> • BEI connects families to vital services for children under 3. • Historical under-referral among communities—need for equity. • EHR-EI initiative launched to modernize referrals citywide. <p>Success of the EHR-EI Model – Adoption</p> <ul style="list-style-type: none"> • The EHR-EI model has been extremely successful. <ul style="list-style-type: none"> ○ EHR-EI is operational at 56 locations across 5 healthcare systems. ○ 41 ambulatory care centers <ul style="list-style-type: none"> ▪ 10 referral only ▪ 31 bidirectional data exchange

- 1 NICU
- 14 audiology departments

Success of the EHR-EI Model – Referrals

- EHR-EI has also had a measurable impact on EI Referrals
- Referrals of Black children represented 19% of all EI referrals in FY24, up from 17% in FY19.

Success of the EHR-EI Model – Retention

- In FY24, retention among children with consent for bidirectional data exchange was 6 points higher than among similar children for whom consent was not obtained.

EIBDX Automates the Closed Loop Referral Cycle

- To promote the sustainability and scalability of the bidirectional data exchange model, we have developed the automated EIBDX solution.
- EIBDX is automated which makes it sustainable as the standard of care with our current partners and allows us to expand the functionality to other NYC healthcare provider networks.
- Key improvements built into EIBDX include digital data transmission, automated consent transmission, automated progress note generation and ingestion of progress notes into children’s EHRs.
- Progress note data are returned in both human-readable HTML format and as structured data to support population health management and reporting.
 - Progress notes report on 51 items related to identifying information, referral status updates, service authorizations, and case management specifics.

EIBDX Closed Loop Referral

- EIBDX is operating using a connection between the NYC Health Department and NYC H+H.
- The process starts with the medical team submitting an EI referral through the child’s EHR.
- The referral is transmitted to EIBDX and processed by BEI.
- Twice a week, automated computer scripts generate status updates for each referral received by EIBDX and output progress notes for children with consent for bidirectional data exchange whose status has changed.

	<ul style="list-style-type: none">• The progress notes are then compiled and sent out by EIBDX through direct messaging and ingested directly into the child’s EHR.• In March we will be deploying a universal solution that private hospitals can use.
Public Comments	<p>No public comments.</p> <p>The meeting was adjourned at 12:05 PM.</p>