



**Budget**

FY09 Expenditures (incurred) for contracted programs

	<i>Net invoices (insurance subtracted)</i>	<i>Includes Supplemental payments of:</i>	<i>Insurance Revenue</i>
June, 2009	\$ 3,608,396	\$ 645,664	\$ 314,418
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July, 2009	\$ 3,697,222	\$ 654,940	\$ 245,745
August	\$ 3,563,320	\$ 510,770	\$ 234,200
September	\$ 3,583,743	\$ 613,710	\$ 300,207
October	\$ 3,709,754	\$ 640,161	\$ 213,380
<b>FY10</b>	<b>\$14,554,039</b>	<b>\$2,419,581</b>	<b>\$ 993,532</b>

Our projected deficit for FY10 so far is \$9m (after we use the \$4.6m in ARRA funding). Without the ARRA funding, it would be \$13.6m. The Governor's proposed deficit mitigation bill for 12/1/09 did not include any cuts to the Birth to Three budget, but the Republican's proposed plan includes a \$1.9m reduction. A public hearing was held on the Governor's plan on 12/9/09.

Autism Services

As of 12/7/09 there were 242 children enrolled in the ten autism-specific programs and 46 in the general programs.

The most recent article in the *Journal of Pediatrics* (11/30) showed that a 20 hr/week program that used an ABA framework for teaching but included work on social interactions and relationships (The Denver Early Start Program for Young Children with Autism) showed better outcomes for children than receiving other early intervention and preschool special education services.

Insurance

DDS staff and autism-specific program staff met with the insurance plans on 10/7 to discuss autism insurance billing. Since then, each of the autism programs have been contacting each of the major plans to join their networks and to agree upon rates and codes for billing. General Birth to Three programs can also attempt to bill if the child has a diagnosis and if the services meet the requirements of the statute.

Each of the 10 autism-specific programs has the personnel to give a DSM-IV diagnosis and each is implementing plans to ensure that the required level of supervision is maintained.

DDS has met with OPM and the Department of Insurance twice to discuss raising the insurance billing rate for Birth to Three services. Secretary Genuario agreed to meet with the health care plans to propose an increase.

Parent Fees- FY10

	<u>Gross</u>	<u>Net</u>
July, 2009	\$ 73,380	\$ 65,047
August	\$ 75,655	\$ 68,322
September	\$ 70,226	\$ 62,963
October	\$ 65,015	\$ 58,449
November	\$ 78,420	\$ 70,967

The hearing on November 12<sup>th</sup> resulted in four providers testifying and one parent. There were approximately 20 additional written comments submitted by the November 20<sup>th</sup> deadline. The revised federal application was submitted 12/7/09 and the process of revising the regulations will continue. In the meantime, based on the statutory requirements and the federal application, the increase in parent fees will be implemented on 1/1/2010. We have been tracking withdrawals each month and will continue to track that data.

Withdrawals of children prior to age three

	<u>Total</u>	<u>Due to fees</u>
July	62	5
August	70	3
September	75	6
October	62	12

Of all withdrawals, only one parent attributed it to dissatisfaction with services.

Enrollment – FY07- FY08

	<b>All Programs</b>		
	<u>Data from data system</u>		<u>Data from invoices</u>
	<i>New Referrals</i>	<i>Eligible Children</i>	<i>Children Served</i>
<b>July, 2009</b>	746	5,405	4,871
August	693	5,363	4,776
September	798	5,346	4,746
October	729	5,313	4,776
November	582	5,227*	not available yet

\*preliminary figure since programs have until 12/15 to finalize November data.

Referrals through November were down 6% from last year. We can account for 3% of that decrease due to late referrals and referrals for children whose speech development appears to be on track, despite parental concerns.

**IDEA Dispute Resolution-FY10**

One written complaint was received July 6, 2009. The program involved was Child and Family Network. The issue involved comments made by a staff member about a child's physician that the parent deemed to be "unprofessional" in nature. There was no finding related to IDEA compliance. The complaint was investigated and a response sent August 17, 2009. The child was transferred to another program the same day as the complaint was filed.

A second written complaint was received September 22, 2009. The family's complaint involves the parent fees. The child is enrolled in the Wheeler Clinic program. Although there were no findings of IDEA non-compliance, the issue for the family is that they were billed for services during a month where the only thing that happened was an IFSP review meeting. Since that meeting had been coded as a "visit" in the data system, the family was charged. The coding was corrected and the family's bill was adjusted.

A third written complaint was received November 11, 2009. The program involved was Academy for Young Minds. The complaint involved hours of service that were missed and the qualifications of the speech pathologist who was substituting for someone that was out on maternity leave. There was one finding of IDEA non-compliance that was specific to the child that is providing the services listed on the IFSP. The program owed the family 10 hours. The issue that the original speech pathologist had training in PROMPT and feeding is being resolved by the program. They added an OT experienced in feeding and are attempting to make temporary arrangements for a PROMPT-trained SLP until the original SLP returns from leave in January.

### **Monitoring and Accountability**

We have almost completed our Annual Performance Report for State Fiscal Year 2009 which is due to the U.S. Dept. of Education by February 1, 2010. Overall, the state maintained 100% or made progress in all but one indicator (Indicator 9: Timely Correction of Non-Compliance). Before the APR can be reviewed broadly by all stakeholders we need input from the ICC to set the targets for the child outcomes. This is the first year that targets will be required for that indicator.

One verification visit was completed to a program with a high percentage of complaints and with eligibility data that was very different than statewide averages. A Corrective Action Plan was developed. The program will be working with Anna Gorski to track the correction of non-compliance and with Deb Resnick and Aileen McKenna to learn more about focusing their interventions on supporting parents using coaching and other models including routines-based strategies.

Another verification visit was made to TheraCare on 11/24. An improvement plan will be developed, focusing on documenting family-centered intervention.

Visits with 10 of our relatively new programs are being scheduled for the rest of this fiscal year.

### **Early Childhood Cabinet**

Although no meetings have been scheduled, nor has the Governor appointed a chairperson, but Linda Goodman was recommended by Commissioner O'Meara to be the department's designee to the new Cabinet. If Connecticut is going to be able to apply for any of the upcoming early childhood federal grants (such as the Early Learning Challenge Grants), the state must at least have a designated State Advisory Council that meets the requirements of the Head Start Act. There would even be some federal funding available for staffing such a council.