

Birth to Three Interagency Coordinating Council (ICC)

Family Focused Meeting

Detailed Meeting Minutes

Date: Monday, April 27, 2026 • **Time:** 10:00 AM–2:00 PM

Location: Meriden Public Library, Meriden, CT

ICC Members Present:

Ginny Mahoney (Department of Social Services), Kendall Fenton (DDS Children’s Services), Jennifer Dowdy (CT Insurance Department), Renee Kleiman (CT State Department of Education), Nicole Cossette (Office of Early Childhood, Part C Coordinator), Anne Giordano (EdAdvance, Provider Representative), Rebecca Breen (EASTCONN, Provider Representative), Elaine Balsley (REACHOUT, Inc, Provider Representative), Sharon Marie (Services for the Blind), Lisa Opert (Parent Representative), Caitlyn McNamara (Parent Representative), Maris Pelkey (Creative Intervention, Provider Representative), Julie Hall (Lumibility-KIDSTEPS, Provider Representative), Cindy Jackson (ICC Chair), .

Connecticut Early Childhood Senior Leadership Present:

Commissioner, Elena Trueworthy; Deputy Commissioner, David Morgan

Welcome and Attendees

Cindy Jackson, ICC Chair opened the session before proceeding with introductions of ICC members, agency partners, and provider/public attendees.

Commissioner Introduction: Commissioner Elena Trueworthy expressed her genuine commitment to engagement, leadership, and strong partnerships with families. She explains that the Office of Early Childhood recently created a new division to bring together and strengthen the agency’s work in engagement and partnership, ensuring these efforts guide planning and decision-making with families at the center.

She also thanks Birth to Three providers for their dedicated work across the state. Commissioner Trueworthy mentioned meeting many of them at Advocacy Day and highlights how their advocacy helped emphasize the importance of early intervention. She noted that the governor proposed additional funding for Birth to Three in the budget for fiscal year 2027, along with adjustments for this year, and that the approved budget aligns with that proposal. She acknowledges ongoing discussions about budget timing but credits providers for their strong advocacy and impact.

Deputy Commissioner Introduction: Deputy Commissioner David Morgan emphasized the importance of storytelling as a way to connect with the heart of the work and expressed his eagerness to hear families’ stories during the meeting. Deputy Commissioner Morgan also shared his appreciation for having visited many Birth to Three providers and invited those he has not yet met to reach out. He

highlighted the value of conversations with leaders, directors, and frontline staff, acknowledging the dedication they bring to the Birth to Three system. He reiterated her commitment to continuing site visits and connecting with remaining providers.

Public Comment

Luz Rivera, Director of Help Me Grow Connecticut (HMG) provided detailed overview of the statewide system. She discussed that HMG is a framework, not a standalone program, connecting families to a network of support. She shared that the system includes 14 Care Coordinators, averaging five contacts per family. Supports include connecting families to developmental monitoring (SPARKLER), resource navigation, and referrals to Birth to Three, Home Visiting, and other community services. Luz emphasized the importance connecting families back to HMG, especially if the child is not eligible for Birth to Three services.

A question was asked if SPARKLER was separate from HMG. Luz clarified that SPARKLER is a tool within HMG system and not a separate program.

Family Stories

Throughout the meeting families shared powerful stories both in-person, video, and through letters read by ICC Parent Representatives. Parents described complex medical journeys, experiences with early hospitalizations, long-term developmental challenges, and transformative relationships with Birth to Three providers. Testimonies highlighted the importance of coaching models that integrate intervention strategies into daily routines, the need for emotional support for caregivers, and the critical nature of trusting family-provider relationships. Foster parents discussed the unique challenges of working within child welfare systems and emphasized the need for IFSPs that reflect current placement realities. Providers and families together examined gaps in training, challenges in implementing coaching models, and the crucial role of cultural humility and relationship-based work.

Family Liaison: Elisabeth Teller, Family Liaison discussed her position within the Birth to Three Lead Agency. She shared examples of different types of calls she receives. She reported that she hears often from fathers looking for information on their child's services or understanding the services the child is receiving through our system. Families have also expressed concerns about workforce shortages and their child possibly not receiving the services that they need. Elisabeth shared that she also receives many calls to make a referral to the system or families trying to determine which provider they have. She stated that families can state what services their child is receiving or the name of the people in their home but cannot name their Birth to Three providers. Elisabeth also discussed that with all the calls and emails she receives, only a few became formal complaints.

Family Video

ICC Family Video was shared. The video was created to increase the awareness of family participation within the ICC and to encourage new families to join.

New Business

CPAC Family Connections

Please see attached CPAC report below.

Family Surveys (Nicole Cossette)

Nicole Cossette, Part C Coordinator, reviewed the results of family surveys. Please see results below.

Lead Agency Report (Nicole Cossette)

Please see attached Lead Agency Report below.

Committee Breakouts and Report Out

Legislative / Fiscal

Chairs: Elaine Balsley, Julie Hall, & Shanda Easley

System Support / Professional Development

Chairs: Anne Giordano & Robb Dunn

Communication / Education Outreach

Chairs: Lisa Opert & Maris Pelkey

Closing

Cindy Jackson closed the meeting by thanking families for sharing their stories and reaffirming the ICC's commitment to grounding its work in authentic family experiences. She stressed the importance of maintaining strong, trusting relationships between families and providers and the importance of continue openness and collaboration to ensure the Birth to Three System remains responsive and effective.

Date of Next Meeting

The next ICC meeting is scheduled for **Monday, June 15, 2026**. Location to be determined at the Executive Committee Meeting scheduled for Wednesday, May 6, 2026.



Birth to Three Lead Agency Report

April 27, 2026

Nicole Cossette, Part C Coordinator

State Systemic Improvement Plan (SSIP)

Parents will be able to describe their child's abilities and challenges more effectively as a result of their participation in Early Intervention.

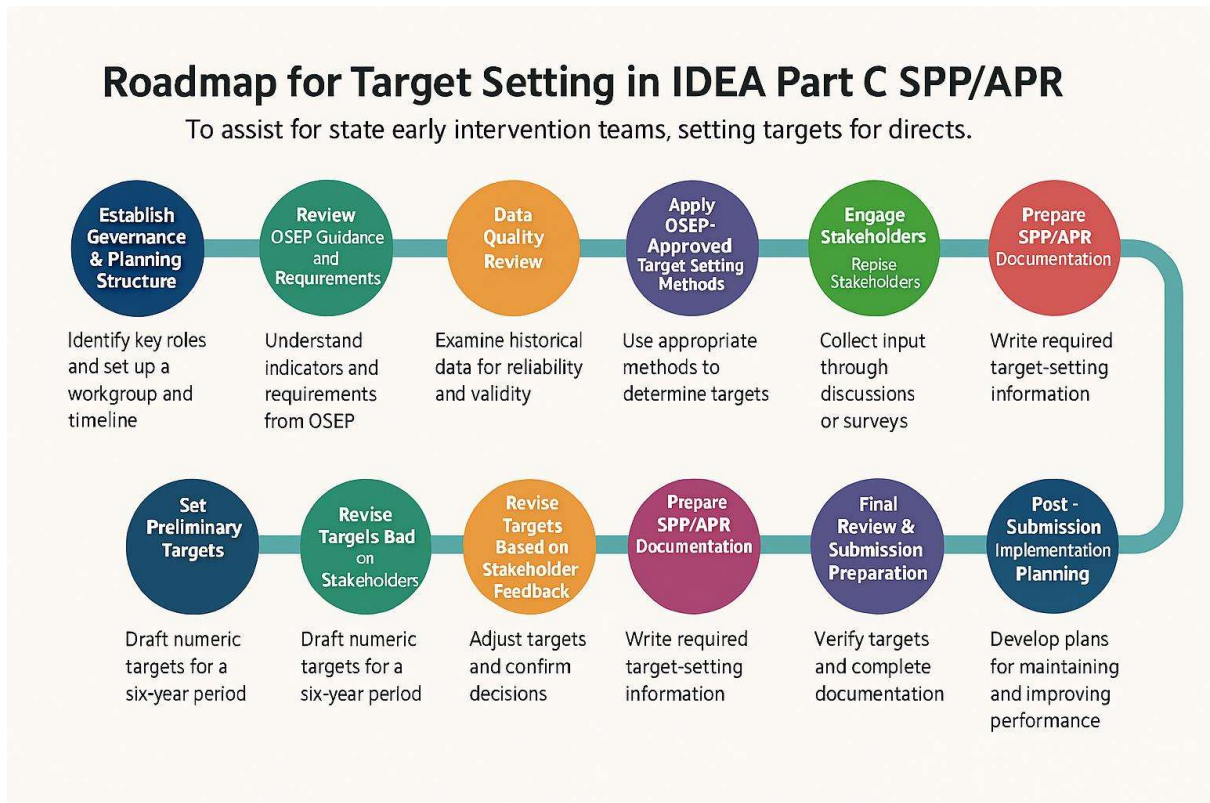
FFY20-25 SPP / APR SSIP

- The week of Clarification has opened and closed. Connecticut made several changes within the Annual Performance Report (APR), including updates to Indicators 1, 7, and 8C. These changes reflect adjustments to how the state monitors for systemic correction of noncompliance and were initiated at OSEP's request during the clarification period. The final APR has now replaced the draft version on the Birth to Three website.
 - Strengths:
 - Connecticut has much to be proud of. The state has increased family outcomes and made significant efforts to improve child outcomes.
 - Items Requiring Further Attention:
 - The state continues to experience some recurring noncompliance. For example, some programs have not fully resolved systemic noncompliance associated with certain indicators. Over the next year, the Lead Agency will work with OSEP and with programs to address these areas of concern and ensure that systemic noncompliance is corrected.
- The FFY 2024 Public Reporting Tables have been updated on the Birth to Three website.
- Next steps include the release of Connecticut's Federal Determination in June, followed shortly afterward by the issuance of local determinations.

- The next SPP/APR package is currently open for a 60-day public comment period. The state intends to submit public comment. More information is attached.

Target Setting Updates

- The Lead Agency is working with Dr. Bonnie Keilty to develop a strategic plan for the upcoming five-year period.
- As part of this strategic planning process, stakeholders will be engaged, and updated target setting will begin.
- Over the next few months, one important area of focus will be the State-Identified Measurable Result (SiMR).



Fiscal Enhancements

- FFY2026 Part C Grant Application has been posted for public comment. The application will be submitted to the Office of Special Education Programs in May.
 - The state still intends to apply for the State Incentive Grant (SIG) monies to support the summer extension option.
 - Our final federal allocation has not yet been finalized; the current application is posted with last year's allocations.
- The Office of Early Childhood (OEC) is actively assessing options for rate setting that falls within the available appropriations. Once final numbers are set and approved, the agency will notify the field.

Education Outreach

- Education and Outreach continued collaborating with UCEDD's STARS project in Waterbury, Hartford, and the Northwest Corner. The STARS project focuses on increasing awareness of the importance of developmental screening and promoting appropriate referrals to Part C and Part B services for children ages 0–5. This project is entering its final year under UCEDD's current grant.
- We were selected to participate in Cohort 1 of the DaSY/ECTA Child Find Technical Assistance initiative. This 18-month national TA effort will help us strengthen and enhance our Child Find system. Through our participation, we hope to achieve the following outcomes:
 - Increase identification and services of children ages Birth–1 with developmental delays or disabilities. – Indicator C5 – Child Find (Birth to 1).
 - Increase awareness among referral sources on what constitutes an appropriate referral to our system.
 - Strengthen our intake system so that it operates more efficiently and smoothly.
- Exhibiting/Tabling: Manchester Early Childhood Fair; LEARN disAbility Summit; Groton Community Early Childhood Resource Fair; Windsor Public Schools Resource Fair; CREC Head Start Community Baby Shower.

- Presentations: Institute of Living Perinatal Support Group; Coalition Against Domestic Violence.
- The summer has 9 events scheduled for upcoming events.

Leadership Grant

- This is the last year of the Leadership Grant. The Annual Performance Report (APR) for the L Grant is now due in October.
- In light of the granted extension, recruitment for the next cohort has concluded, and the new group is expected to begin in the near future.

Personnel Development

- Based on System needs, a Service Coordination Refresher training will be piloted in June 2026. All programs' training and supervision coordinators who are service coordination trained were invited to participate. The Professional Development (PD) team will consider feedback from this group following the pilot to establish ongoing Service Coordination Refresher training opportunities. The Refresher training format will be full day and in-person.
- Caregiver Coach/Mentor Coach TA remains ongoing as they pursue fidelity to this family-centered EBP over a minimum of 6 months.
- The commitment to support EI Staff supporting student placement continues with Fall's reimbursement distributed and Spring applications approved.
- The Devereux Center for Resilient Children will host their second training in June 2026, focusing on resilience in EI staff, Caregivers, and Trauma-informed supports. The training is posted to the B23 calendar and will be offered remotely.

Accountability & Monitoring

- Final drafting and publishing of Understanding Connecticut's Early Intervention System: Parent Rights, Procedural Safeguards, and System of Payments
- Continued work with CPAC on strategic planning, CT AIMH on ARPA-Childhood Mental Health Plan, and DCF revision of MOU

Other

- Childcare follow-up:
 - **Needs Assessment:** There was a recommendation of a needs assessment, however, through feedback from the field it may be that small group discussions are best. The Lead Agency is working with the ICC to determine next steps.
 - The Lead Agency met with Head Start to include them in this discussion. There is potential for some monies that can support this work in terms of training and documents for childcare needs.
 - Documents will soon be sent to the field for feedback.

Data

- The enrollment and fiscal data requested by the ICC on a regular basis is attached.

**State Performance Plan (SPP) / Annual Performance Report (APR) –
Package Changes:**

Comment period: March 23 – May 22, 2026 (60 days)

**Implementation: FFY 2026 SPP/APR due February 1, 2028; covers FFY 2026–
2031**

Introduction and Instruction Key Changes:

- Adds a requirement under General Supervision for states to describe how they identify critical issues using dispute resolution data.
- Target-setting language revised: states must describe stakeholder input (replacing “engagement”).
- Sampling terminology updated from gender → sex.

Changes to Compliance Indicators (C-1, C-7, C-8):

- OSEP proposes removing the requirement for states to report correction of noncompliance under each indicator. States would no longer have to:
 - Document child-specific/systemic correction.
 - Report correction after one year.
 - Provide justification when no findings were issued.
 - **Rationale:** These data are already reported under Indicator C-12; removal reduces duplication and burden.

Updates to Indicator C-3 (Child Outcomes):

- Outcome A revised from “Positive social-emotional skills” to “Development and use of social-emotional skills (including within social relationships).”
 - Purpose: Aligns all three outcomes around learning and development and reflects continuous developmental trajectories from infancy through preschool.
- Major Revisions to Indicator C-4 (Family Outcomes)
 - States must: Describe how data are collected; Provide a link to the survey used; Describe how data are used to improve family

involvement and services.

Burden Reduction:

- Removes requirement to analyze whether respondents' demographics reflect the enrolled population.
- Shifts focus from representativeness → how data drive system improvement.

Extensive Revisions to Indicator C-11 (SSIP):

- Structural & Reporting Changes
- Removes outdated "Phase" language from earlier SSIP years.
- Clarifies expectations for:
 - stakeholder engagement
 - implementation of evidence-based practices
 - fidelity measures
- Data and analysis aligned with the SiMR, including whether targets were met.
- Rationale for changes to SSIP activities—or why none were made.
- Summaries of infrastructure improvements, evidence-based practices, fidelity data, and progress monitoring.
- Strategies for stakeholder engagement and how stakeholder concerns were addressed.

Changes to Indicator C-12:

- Clarifies that all reporting on correction of noncompliance—including pre-finding correction—must occur only under C-12, not under other compliance indicators.

Indicators with No Proposed Changes:

- C-2, C-5, C-6, C-9, C-10 have no changes in this package.

Next Steps:

- Connecticut will gather feedback, develop organizational comments, and respond during the federal comment periods.
- **OSEP Directed Questions:**

- Improving family outcomes data collection, especially for families involved in dispute resolution.
- Making data more meaningful and actionable.
- Current challenges in collecting and reporting these data.

Connecticut Office of Early Childhood Birth to Three System Monthly Enrollment Data - For Meeting 4/27/26*

	April 2025	May 2025	June 2025	July 2025	Aug 2025	Sept 2025	Oct 2025	Nov 2025	Dec 2025	Jan 2026	Feb 2026	Mar 2026
Calls to 211CDI	1290	1128	1188	1177	1038	1179	1222	1007	1024	1125	1019	1312
Percent compared to CY2019 average (1113)	116%	101%	107%	106%	93%	106%	110%	90%	92%	101%	92%	118%
<i>Families declining the referral to B23¹</i>	60	51	66	66	61	56	47	45	54	65	58	61
Percent compared to CY2019 average (199)	30%	26%	33%	33%	31%	28%	24%	23%	27%	33%	29%	31%
Percent of calls to 211CD (CY2019 average was 17%)	5%	5%	6%	6%	6%	5%	4%	4%	5%	6%	6%	5%
Referrals to Birth to Three	1230	1077	1122	1110	977	1123	1175	962	970	1060	961	1250
Percent compared to CY2019 average (913)	135%	118%	123%	122%	107%	123%	129%	105%	106%	116%	105%	137%
<i>Families declining eligibility evaluations²</i>	203	187	167	146	157	149	154	139	154	177	156	173
Percent compared to CY2019 average (67)	303%	279%	249%	218%	234%	222%	230%	207%	230%	264%	233%	258%
Percent of B23 referrals (CY2019 average was 7%)	17%	17%	15%	13%	16%	13%	13%	14%	16%	17%	16%	14%
Initial Eligibility Determinations	1067	1001	991	1058	838	946	1024	824	884	788	822	976
Percent compared to CY2019 average (843)	125%	117%	116%	124%	98%	111%	120%	96%	103%	92%	96%	114%
Determined to be Eligible	737	683	642	739	556	674	699	587	611	562	609	718
Percent compared to CY2019 average (570)	129%	120%	113%	130%	98%	118%	123%	103%	107%	99%	107%	126%
Percent Eligible	69%	68%	65%	70%	66%	71%	68%	71%	69%	71%	74%	74%
Percent compared to CY2019 average (68%)	1%	0%	-3%	2%	-2%	3%	0%	3%	1%	3%	6%	6%
<i>Families leaving Part C in the month before an initial IFSP meeting³</i>	35	44	40	42	39	27	34	30	29	28	27	21
Percent compared to CY2019 average (55)	64%	80%	73%	76%	71%	49%	62%	55%	53%	51%	49%	38%
Percent of B23 those eligible (CY2019 average was 10%)	5%	6%	6%	6%	7%	4%	5%	5%	5%	5%	4%	3%
Initial IFSP meeting held during the month	677	701	587	672	574	616	661	569	593	588	537	653
Percent compared to CY2019 average (516)	131%	136%	114%	130%	111%	119%	128%	110%	115%	114%	104%	127%
<i>Families leaving Part C after the initial IFSP meeting but before EITS³</i>	11	14	9	12	12	13	18	9	5	16	12	7
Percent compared to CY2019 average (15)	73%	93%	60%	80%	80%	87%	120%	60%	33%	107%	80%	47%
Percent of all Exits	2%	3%	2%	3%	1%	2%	3%	1%	1%	3%	2%	1%
Eligible children who received an EITS in the month	7269	7380	7425	7644	7703	7238	7390	7155	7064	7167	7059	7297
Percent compared to CY2019 average (5177)	140%	143%	143%	148%	149%	140%	143%	138%	136%	138%	136%	141%
Average hours per child per month	5.1	5.0	4.8	5.1	4.6	5.0	5.3	4.6	4.6	4.8	4.7	5.3
Percent compared to CY2019 average (7.3)	70%	68%	66%	70%	63%	68%	73%	63%	63%	66%	64%	73%
Eligible children with an ASD diagnosis who received an EITS in the month	927	934	992	909	968	885	879	869	865	819	789	806
Percent compared to CY2019 average (676)	137%	138%	147%	134%	143%	131%	130%	129%	128%	121%	117%	119%
Average hours per child per month	10.0	10.0	9.4	9.7	8.6	9.3	10.1	8.5	8.3	9.4	9.1	10.3
Percent compared to CY2019 average (24.9)	40%	40%	38%	39%	35%	37%	41%	34%	33%	50%	37%	41%
Eligible children without an ASD diagnosis who received an EITS in the month	6402	6504	6490	6784	6771	6408	6559	6322	6235	6382	6307	6533
Percent compared to CY2019 average (4529)	141%	144%	143%	150%	150%	141%	145%	140%	138%	141%	139%	144%
Average hours per child per month	4.3	4.2	4.0	4.4	4.0	4.3	4.6	4.0	4.0	4.2	4.1	4.7
Percent compared to CY2019 average (4.7)	91%	89%	85%	94%	85%	91%	98%	85%	85%	89%	87%	100%

Connecticut Office of Early Childhood Birth to Three System Monthly Enrollment Data - For Meeting 4/27/26*

	April 2025	May 2025	June 2025	July 2025	Aug 2025	Sept 2025	Oct 2025	Nov 2025	Dec 2025	Jan 2026	Feb 2026	Mar 2026
Children in families who exited before age 3³	225	260	260	272	261	239	253	198	195	202	213	208
Percent compared to CY2019 average (224)	100%	116%	116%	121%	117%	107%	113%	88%	87%	90%	95%	93%
Children in families who exited at age 3⁴	376	223	196	175	1015	495	402	421	450	402	402	390
Percent compared to CY2019 average (322)	117%	69%	61%	54%	315%	154%	125%	131%	140%	125%	125%	121%
Children in Families who exited at age 3 as eligible for Part B	216	74	55	52	860	335	238	244	289	224	233	225
Percent compared to CY2019 average (225)	96%	33%	24%	23%	382%	149%	106%	108%	128%	100%	104%	100%

data as of 4/16/26*

All counts are counts of cases and include may include referrals within 45 days of age 3.

- 1) includes parent declined, referred to LEA, DCF no concerns and unable to contact
- 2) includes parent declined, moved out of CT, deceased and unable to contact
- 3) EITS stands for Early Intervention "Treatment" Services vs EIS (also evaluations, assessments, and IFSP meetings)
- 3) includes parent withdrew, moved out of CT, deceased and unable to contact
- 4) includes eligible for Part B, not eligible, and eligibility not determined/LEA not included

The Family Survey

What do we report out on the family survey?

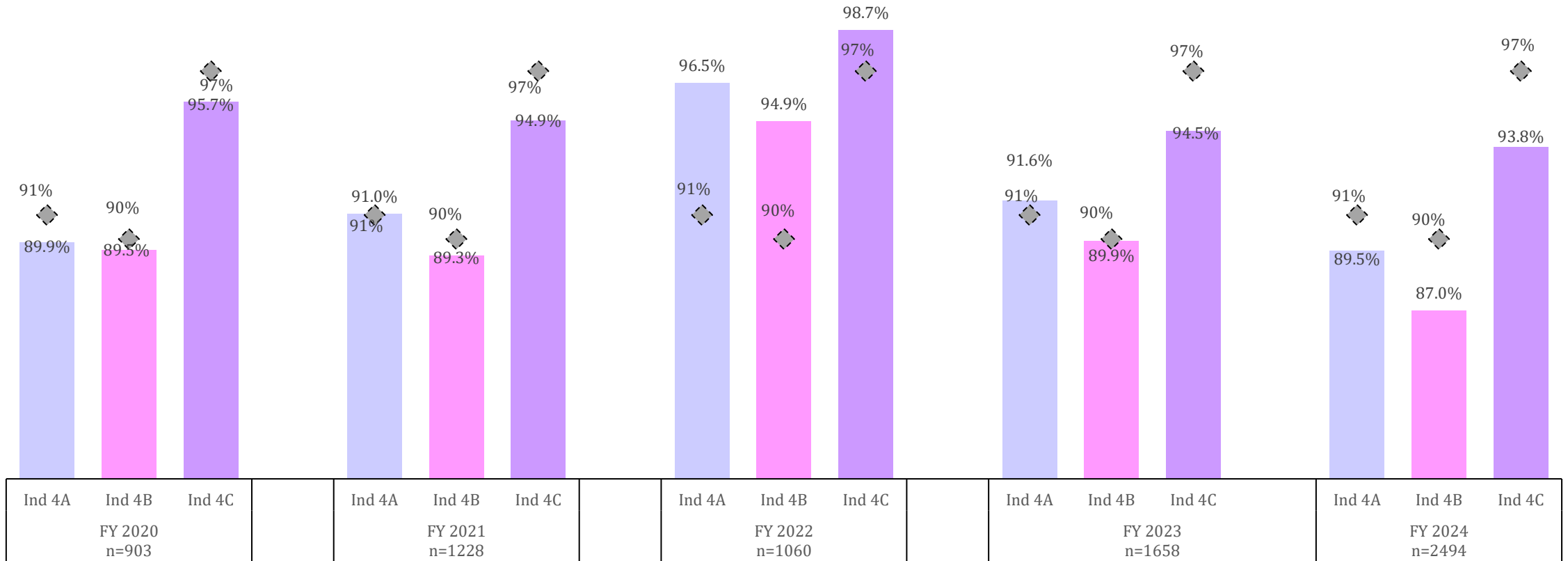
Indicator 4 of the SPP/APR focuses on the percent of families participating in Part C who report that early intervention services have helped the family:





4A Know their rights

4B Effectively communicate their children's needs

4C Help their children develop and learn

For FFY 2024 the Birth to Three System in the State of Connecticut increased the response rate to **2,494** did meet the target for indicator **4A**, **4B** or **4C**.



- Legend:**
-  represents the ICC generated target for each indicator. The targets are based on historical data for the state and change yearly.
 -  represents the percent of families who report that services have helped the family know their rights (Indicator 4A)
 -  represents the percent of families who report that services helped the family communicate their children's needs (Indicator 4B)
 -  represents the percent of families who report that services helped their children develop and learn (Indicator 4C)

Fiscal Year 2025 – 2026 Fiscal Report

Connecticut Birth to Three System

April 27, 2026

Prepared by the Office of Early Childhood

The Connecticut Birth to Three System remains committed to delivering high-quality early intervention services. This report provides a comprehensive overview of the system's financials through March 2026, including funding sources, expenditures, private provider payments, and service delivery trends. As of March, the Fiscal Year 2026, total expenditures are expected to exceed available funding by approximately \$3.2 million, driven in part by increased service delivery data. Direct service hours continued to rise, with projected totals for FY26 exceeding 516,874 hours.

ct.gov

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In lieu of COLA's state legislation, private provider payments supplied to programs. The amount is subject to change year-to-year. For Fiscal Year 2026 a total of \$789,136 in private provider payments is was disbursed in January February. During this FY there was a secondary PPP payment that was sent to programs in the form of a grant payment.

The OEC continues to monitor funding streams, including Medicaid and commercial insurance reimbursements, and remains focused on aligning expenditures with available resources. The OEC appreciates ICC's continued partnership and recommendations on improving the financial structure within the Birth to Three system.

Executive Summary

Total State and Federal Part C Direct Service Funding for FY26 is \$36.7 million, including:

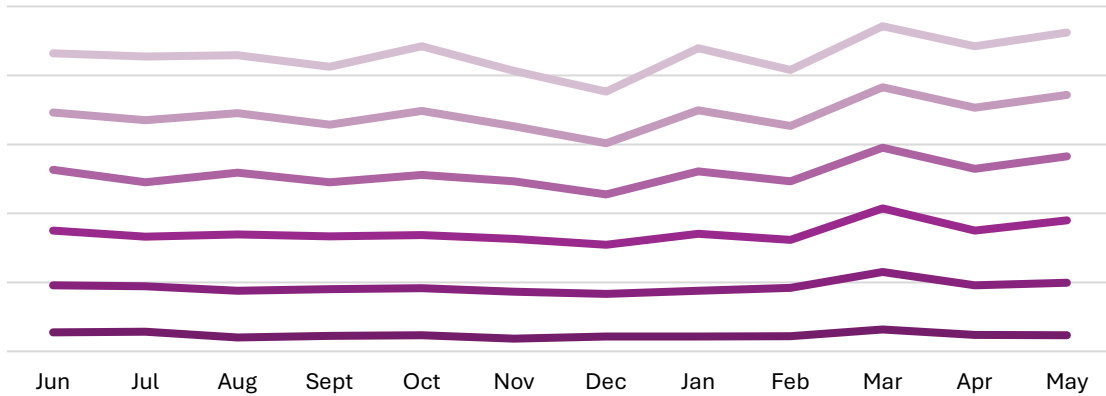
- \$34.1 million in State Appropriation
- \$2.0 million in Part C (GAP) funding
- \$620,000 in Part B Evaluation funding
- **Total Expenditures** are projected at \$40.1 million, resulting in a **projected deficit of approximately \$3.2 million.**
- **Private Provider Payments** totaling \$789,136 are issued in January and February.
- **Direct Service Hours** are projected to exceed **516,874 hours in FY26**, representing an **increase** over FY25 and continuing a multi-year upward trend.

Medicaid and Commercial Insurance Revenue:

- **Medicaid reimbursements** consistently have a payment-to-billed ratio exceeding 90%. **Commercial insurance payments** remain lower, with an average reimbursement rate of approximately 34%.

Direct Service Hours

— Direct Service Hours 21 Act. — Direct Service Hours 22 Act.
— Direct Service Hours 23 Act. — Direct Service Hours 24 Act.
— Direct Service Hours 25 Act. — Direct Service Hours 26 Est.



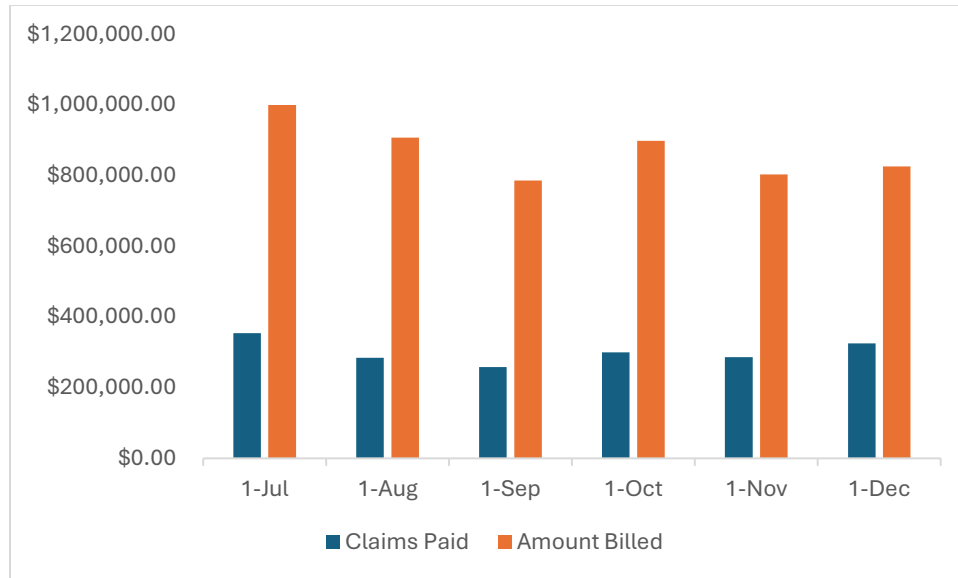
Direct Service Hours						
FY	<u>21 Act.</u>	<u>22 Act.</u>	<u>23 Act.</u>	<u>24 Act.</u>	<u>25 Act.</u>	<u>26 Est.</u>
Jun	33,683	34,276	39,605	43,921	41,633	42,999
Jul	34,273	32,815	36,033	39,425	45,006	46,237
Aug	30,114	33,879	40,831	44,786	43,097	42,015
Sept	31,226	33,868	38,246	39,281	41,605	43,694
Oct	31,724	34,088	38,367	43,667	46,427	47,230
Nov	29,208	33,941	38,327	41,876	39,770	39,076
Dec	30,734	30,902	35,619	36,489	37,076	39,111
Jan	30,865	33,140	41,201	45,151	44,467	41,502
Feb	30,888	35,092	34,875	42,400	40,122	40,413
Mar	35,848	41,678	46,094	44,002	43,800	44,456
Apr	31,892	36,031	39,656	44,783	44,215	44,878
May	31,720	37,926	45,356	46,385	44,595	45,264
Total	382,171	417,634	474,209	512,165	511,810	516,874
% Chg	263.79%	9.28%	13.55%	8.00%	-0.07%	0.99%

State Expenses:

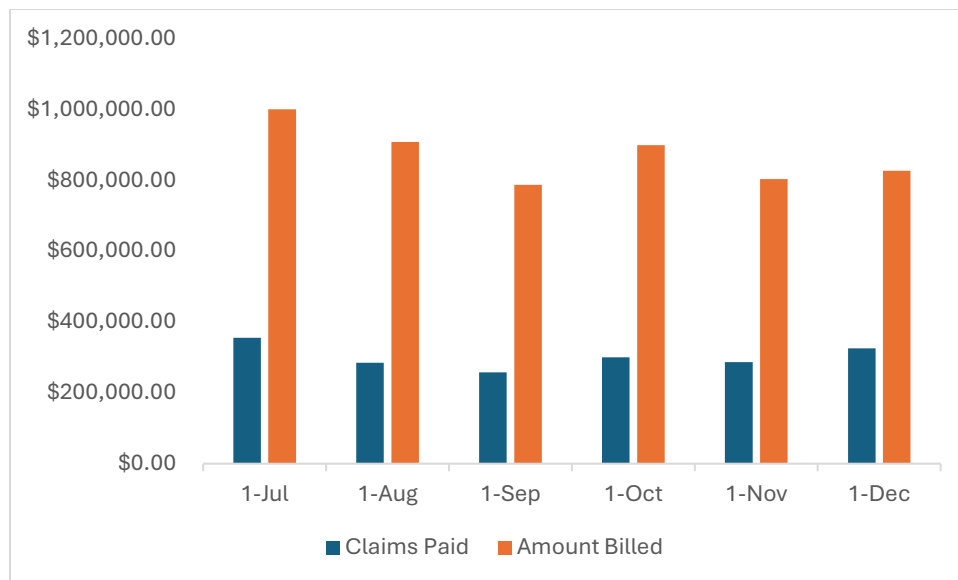
These data points are based on budget tracking in the system as of March 2026, based on data from PCG using the date paid, based on monthly estimates by the OEC including a list of assumptions and data that change frequently. Data is also based on reconciled invoices (actual) and estimates using a list of assumptions using available information. Also note this is based on direct service expenses.

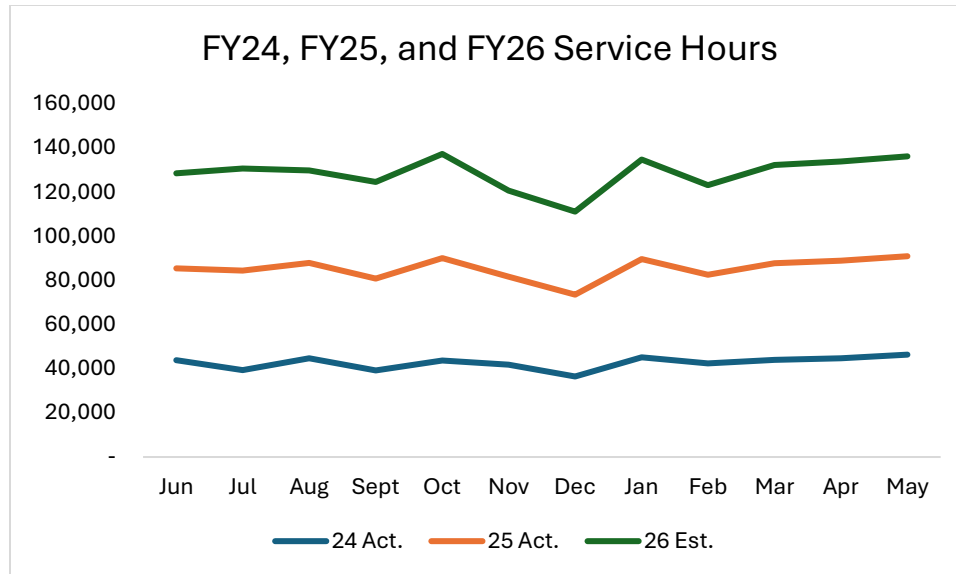
OEC Birth to Three Direct Service:	
State Appropriation	\$ 34,082,762
Part B Evaluations	\$ 620,000
Part C for GAP	\$ 2,012,233
Total Funding	\$ 36,714,995
Surplus (Deficit)	\$ (3,329,634)

Medicaid:



Commercial Insurance:



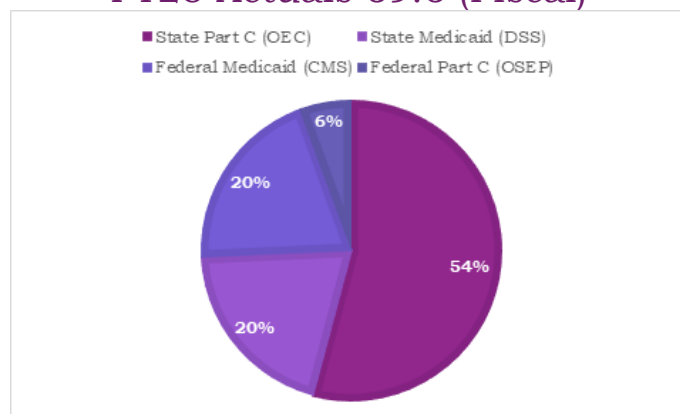


Additional Payments to the Field:

During State Fiscal Year 2026 there were the following payments made in addition to the direct service fiscal data that is outlined above:

- A federal private provider payment – this is a one-time grant payment to cover the supplemental one-time private provider payment. This is outside of the legislated private provider payments.
- A payment to programs to support Early Intervention Services Over Three.
- Contract amendments to cover monitoring and technical assistance process.
- There are also funds that will be sent to programs to support training via our professional development initiatives.

FY 25 Fiscal Breakdown:
 FY25 Actuals 69.6 (Fiscal)



OEC Birth to Three Funding:	
State Appropriation	\$ 34,082,762
Part B Evaluations	\$ 620,000
Part C for GAP	\$ 2,012,233
Total Funding	\$ 36,714,995
Surplus (Deficit)	\$ (3,329,636)

Direct Service Hours						
FY	21 Act.	22 Act.	23 Act.	24 Act.	25 Act.	26 Est.
Jun	33,683	34,276	39,605	43,921	41,633	42,999
Jul	34,273	32,815	36,033	39,425	45,006	46,237
Aug	30,114	33,879	40,831	44,786	43,097	42,015
Sept	31,226	33,868	38,246	39,281	41,605	43,694
Oct	31,724	34,088	38,367	43,667	46,427	47,230
Nov	29,208	33,941	38,327	41,876	39,770	39,076
Dec	30,734	30,902	35,619	36,489	37,076	39,111
Jan	30,865	33,140	41,201	45,151	44,467	41,502
Feb	30,888	35,092	34,875	42,400	40,122	40,413
Mar	35,848	41,678	46,094	44,002	43,800	44,456
Apr	31,892	36,031	39,656	44,783	44,215	44,878
May	31,720	37,926	45,356	46,385	44,595	45,264
Total	382,171	417,634	474,209	512,165	511,810	519,338
% Chg	263.79%	9.28%	13.55%	8.00%	-0.07%	1.47%

- 1) Based on Budget Tracking system as of March 2026
- 2) Based on data from PCG using date paid
- 3) Based on monthly estimates by the OEC including a list of assumptions and data that change frequently
- 4) Based on reconciled invoices (actual) and estimates using a list of assumptions using available information
- 5) Note: This is based on direct service expenses.

Actual
Estimated

OEC Birth to Three System Direct Service Expenditures¹

Invoice	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26	Apr-26	May-26	Total
Paid in	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26	Apr-26	May-26	Jun-26	Total
Actual or Estimate	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual (Incomplete)	Estimate	Estimate	Estimate	Estimate
Escrow	\$ 1,893,145.89	\$ 1,776,201.27	\$ 2,023,830.02	\$ 1,849,537.88	\$ 2,166,092.29	\$ 1,632,972.98	\$ 2,016,593.13	\$ 1,493,165.30	\$ 1,922,087.59	\$ 1,755,357.75	\$ 1,769,122.25	\$ 1,778,866.15	\$ 22,076,972.50
GAP	\$ 1,192,200.00	\$ 1,216,600.00	\$ 1,226,200.00	\$ 1,148,600.00	\$ 1,178,600.00	\$ 1,156,400.00	\$ 1,145,800.00	\$ 1,142,200.00	\$ 1,135,400.00	\$ 1,170,000.00	\$ 1,170,000.00	\$ 1,170,000.00	\$ 14,052,000.00
Interpretation	\$ 119,466.32	\$ 115,844.97	\$ 173,858.10	\$ 92,705.58	\$ 159,844.91	\$ 157,603.88	\$ 118,492.79	\$ 169,227.06	\$ 151,393.63	\$ 140,000.00	\$ 140,000.00	\$ 140,000.00	\$ 1,678,437.24
ATech + Other	\$ 44,177.85	\$ 60,085.06	\$ 54,522.43	\$ 60,713.24	\$ 60,837.23	\$ 28,664.77	\$ 44,824.54	\$ 21,365.31	\$ 39,770.15	\$ 46,500.00	\$ 46,500.00	\$ 46,500.00	\$ 554,460.58
Private Provider Payment				\$ 7,233.00					\$ 349,530.00	\$ 446,450.00			\$ 803,213.00
Monthly Contract Pay	\$ -	\$ -	\$ -	\$ 97,222.22	\$ 97,222.22	\$ -	\$ -		\$ 219,444.00	\$ 123,611.00	\$ 48,611.00	\$ 48,611.00	\$ 634,721.44
NET OEC Payments (I)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Net OEC Payments	\$ (3,169,064.00)	\$ 3,329,946.00	\$ -	\$ -	\$ (59,317.40)	\$ (417,146.73)	\$ 476,464.13	\$ (17,221.78)	\$ (1,830,590.40)	\$ 1,847,812.18	\$ -	\$ -	\$ 160,882.00

*Note: Private Provider Payment paid out in January; NET OEC Payments include billing fees

Commercial Insurance Payments²

	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26	Apr-26	May-26	Jun-26	Total
Actual or Estimate	Actual	Actual	Actual	Actual	Actual	Actual	Actual (Incomplete)						
Claims Paid	\$354,733.10	\$284,672.90	\$258,017.21	\$299,853.36	\$286,406.47	\$325,102.48	\$ 96,264.33						
Amount Billed	\$999,732.00	\$907,449.00	\$786,726.00	\$898,950.00	\$803,298.00	\$825,963.00	\$ 264,153.00						
% Paid/Billed	%Paid/Billed	35%	31%	33%	33%	36%	39%						
Billing Fees	\$ -	\$ 50,526											\$ 50,526

*Note: January will change - incomplete month at the time the data was pulled.

Medicaid Insurance Payments²

	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26	Apr-26	May-26	Jun-26	Total
Actual or Estimate	Actual	Actual	Actual	Actual	Actual	Actual	Actual (Incomplete)						
Amount Paid	\$3,480,314.17	\$2,927,501.97	\$2,965,158.65	\$3,226,292.78	\$3,485,010.04	\$ 2,693,691.00	\$ 1,666,386.42						
Amount Billed	\$3,829,218.85	\$3,166,982.59	\$3,186,870.82	\$3,413,114.62	\$3,682,248.04	\$ 2,843,359.62	\$ 1,768,575.42						
% Paid/Billed	91%	92%	93%	95%	95%	95%	94%						
Billing Fees	\$ -	\$ 33,418											\$ 33,418

	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26	Apr-26	May-26	Jun-26	Total
State Expenditure/Forecast Budget Totals:	\$ 79,926	\$ 6,582,622	\$ 3,478,411	\$ 3,256,012	\$ 3,603,279	\$ 2,558,495	\$ 3,802,175	\$ 2,808,736	\$ 1,987,035	\$ 5,529,731	\$ 3,174,233	\$ 3,183,977	\$ 40,044,631