



NYSACHO EI All County Call – October 2, 2024

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Agenda Item	Discussion/Presentation	Action Item
Welcome and General Updates	<ul style="list-style-type: none">General BEI updates:<ul style="list-style-type: none">Federal Funding Stability: Despite federal government shutdown discussions, EI operations and federal grant funding remain unaffected. Core Department of Education staff continue working, ensuring uninterrupted access to federal grant systems.State Plan Amendments (SPAs): The 4% SPA for underserved and rural populations was approved by CMS earlier than expected, due to strong advocacy efforts. Implementation details—zip codes, timelines, and county guidance—will be issued soon. The 5% SPA is still pending approval.BEI is coordinating with PCG and IT to align implementation timelines, as the 4% was approved before the 5%, reversing the anticipated sequence.	
Data and Program Evaluation Unit	<p>Annual Performance Report (APR) Data Cleaning</p> <ul style="list-style-type: none">The unit thanked counties for ongoing data cleaning efforts to prepare for the Annual Performance Report (APR).Due to system constraints in EI Hub, BEI is still collecting data via Excel spreadsheets. Counties were reminded to:<ul style="list-style-type: none">Review all spreadsheet tabs (Indicators 1, 7, and 8A, B, & C).Correct missing or inaccurate fields such as “other delay reasons,” “unknowns,” and “late reasons.”BEI stressed data completeness and accuracy as vital for both OSEP compliance and program improvement. <p>System Glitches and Workarounds</p>	



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	<ul style="list-style-type: none">PCG is addressing technical issues preventing:<ul style="list-style-type: none">Saving transition notification dates.Completing child exits due to closed referrals.Counties encountering issues were advised to contact BEI directly for case-by-case solutions.BEI is regularly checking backend data to monitor county progress and is investigating county suggestions, including whether it is possible to create an automatic closure process (e.g. 2 week auto-close) rather than requiring counties to manually close & report. <p>Timeline for Closures and County Concerns</p> <ul style="list-style-type: none">BEI requested counties complete closure of 8/31 group cases by October 7.Counties voiced frustration about:<ul style="list-style-type: none">Short turnaround time creating significant administrative burden.Frequent reopening requests prevent billing and duplicate workload.Counties requested flexibility or auto-close functionality, citing repetitive “busy work” for data reporting rather than service quality.Yonghua Feng acknowledged these challenges and agreed to:<ul style="list-style-type: none">Explore alternative data collection for major transition periods (Aug. 31, Jan. 1–2).Revisit the issue during the December All County Call with potential solutions.Coordinate with NYSACHO for continued dialogue on realistic timelines. <p>Other Clarifications</p> <ul style="list-style-type: none">BEI will assess feasibility of reports identifying closed children missing transition data.Counties were advised to send data correction spreadsheets to NYEISTA01@health.ny.gov for PCG processing.BEI confirmed ongoing work on both the notification date and referred to 3–5 program date issues within EI Hub.	
Provider Approval and Due Process Unit	<p>General Updates</p> <ul style="list-style-type: none">A reminder was issued regarding the “In the Loop” article on the Central Directory Report, accessible via:<ul style="list-style-type: none">DOH website.EI Hub (with role-based search filters).	



<ul style="list-style-type: none">Provider Approval Unit (PAU) has published step-by-step guides for adding or ending catchment areas separate for agencies and individuals.Additional LMS resources were created for navigating provider profiles, agency directors, and approval processes. <p>Monitoring RFP</p> <ul style="list-style-type: none">The Programmatic and Administrative Monitoring RFP (2026–2031) is now posted on the DOH website for public awareness. <p>Special Education Teacher (SEIT) / Qualified Personnel Approvals</p> <ul style="list-style-type: none">Clarified confusion around certification requirements:<ul style="list-style-type: none">Accepted certifications:<ul style="list-style-type: none">Teacher of Special Education (permanent)Students with Disabilities: Birth–Grade 2Students with Disabilities: All Grades is <i>not</i> accepted for EI, as it lacks the necessary coursework for birth–3 services per SED.Teachers must also have 1,000 hours of experience with children birth–5 years. <p>Basic vs. Appendix 1 Agreements</p> <ul style="list-style-type: none">Basic Agreement:<ul style="list-style-type: none">For individuals contracting through an approved agency or county.Quick approval (~2 weeks) if applications are complete.No Medicaid enrollment required.Appendix 1 Agreement:<ul style="list-style-type: none">For independent providers billing directly.Requires:<ul style="list-style-type: none">Early Intervention Medicaid enrollment (free for individuals without a business name).State Central Registry (SCR) clearance.Approval can take weeks to months depending on application accuracy and Medicaid processing.		
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	<ul style="list-style-type: none">• Providers can enter claims manually in EI Hub or hire a billing service, third-party billing is optional.• Qualified personnel employed directly by agencies (W-2 employees) do not require BEI approval, though agencies must verify their credentials. <p>Training and Resources</p> <ul style="list-style-type: none">• Three recorded webinars are available:<ol style="list-style-type: none">1. <i>Who Can Apply to Become an EI Provider</i>2. <i>How to Apply</i>3. <i>What Happens After Approval</i>• Providers and counties were reminded to direct questions to provider@health.ny.gov. <p>County Discussion</p> <ul style="list-style-type: none">• Counties raised concerns that provider lists inaccurately reflect availability many listed providers do not actually serve their county.<ul style="list-style-type: none">○ Requested ability for BEI to verify or remove non-participating providers.<ul style="list-style-type: none">▪ BEI responded that PAU is:<ul style="list-style-type: none">▪ Asking new applicants follow-up questions about county service areas.▪ Exploring backend data-cleanup methods to identify inactive providers.• Counties offered to bulk-send provider “opt-out” lists to PAU for cleanup assistance.• Counties requested clarification and better guidance for providers mistakenly applying under the wrong agreement (Basic vs. Appendix).<ul style="list-style-type: none">○ BEI agreed to clarify in future applications and coordinate with PCG on correcting user roles for approved providers.	
Fiscal Planning and Policy Unit	<p>State Plan Amendments (SPAs)</p> <ul style="list-style-type: none">• BEI expanded on earlier comments regarding the 4% State Plan Amendment (SPA) for rural and underserved areas:<ul style="list-style-type: none">○ Approved by CMS in late September, which was faster than anticipated.○ Implementation guidance is being developed in collaboration with PCG and DOH IT to adjust system coding, zip code alignment, and rate tables.○ Counties will receive official communication soon detailing:	



	<ul style="list-style-type: none">▪ The list of eligible zip codes.▪ Effective dates for claiming under the 4% enhancement.▪ Instructions for payment adjustments and retroactive application where applicable.• The 5% SPA remains pending CMS review, and BEI continues to coordinate advocacy efforts to expedite its approval. <p>Fiscal Operations and County Communication</p> <ul style="list-style-type: none">• BEI acknowledged that implementation sequencing of the 4% and 5% SPAs has caused confusion for local programs and PCG but affirmed that BEI's fiscal and IT teams are working to minimize disruption.• Counties were reminded to hold off on changing any internal billing structures until formal guidance is distributed. <p>Transportation</p> <ul style="list-style-type: none">• Counties were informed that BEI and Medicaid Policy staff are evaluating transportation cost efficiencies and potential audit findings related to transportation claims.• BEI is analyzing:<ul style="list-style-type: none">○ Provider billing compliance with rate methodology.○ Consistency between county contracts and service documentation.○ Potential corrective actions for any patterns of over- or under-reimbursement.• BEI indicated that they will issue updated written guidance once the fiscal team completes its internal audit review. <p>Audits</p> <ul style="list-style-type: none">• BEI reported continued coordination with the DOH Audit Unit on reviewing:<ul style="list-style-type: none">○ County program cost reports and fiscal reconciliations.○ Provider documentation tied to EI service delivery and billing accuracy.• Counties were encouraged to retain all backup documentation for prior years' claims and respond promptly to any data or fiscal audit requests.• BEI's fiscal and policy teams are aiming for greater transparency and predictability in how audits are initiated and communicated to local programs.	
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Information Systems and Quality Improvement Unit	<p>EI Hub Functionality and Fixes</p> <ul style="list-style-type: none">PCG acknowledged ongoing challenges within the EI Hub, particularly related to:<ul style="list-style-type: none">Inability to save transition notification dates.System glitches preventing case closure or reopening referrals.Referred 3–5 dates not populating correctly.PCG engineers are actively addressing these issues, and updates will be included in an upcoming fall release.<ul style="list-style-type: none">However, PCG confirmed that some exit and closure fixes will occur in a later release, not in the immediate fall update. <p>Data Reporting and Temporary Workarounds</p> <ul style="list-style-type: none">BEI reiterated that until the system issues are resolved:<ul style="list-style-type: none">Counties must continue to use the Excel data correction spreadsheets provided by the Data and Evaluation Unit.These should be returned to NYEISTA01@health.ny.gov for aggregation and transmission to PCG.Counties were advised to document any system errors encountered during data entry or billing in order to support BEI's troubleshooting and audit protection efforts. <p>User Roles and Permissions</p> <ul style="list-style-type: none">Multiple counties raised concerns about providers' incorrect role assignments within the Hub following approval.<ul style="list-style-type: none">BEI agreed to work with PCG and the BEI Info Team to ensure users have proper access to service logging, billing, and case management features.Counties were encouraged to continue reporting access discrepancies to EIHubHelp@pcgus.com with clear details. <p>Quality Improvement and Monitoring</p> <ul style="list-style-type: none">The Information Systems Unit is using backend data to:<ul style="list-style-type: none">Monitor county-level data completeness and timeliness.Identify recurring data entry barriers.Develop training materials based on user feedback.	
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	<ul style="list-style-type: none">BEI thanked counties for their cooperation, noting visible progress in data cleanup and Hub navigation improvements since the last All County call.	
Open Discussion	<p>EI Hub Functionality and User Roles</p> <ul style="list-style-type: none">Several counties raised continuing issues with EI Hub functionality, including:<ul style="list-style-type: none">Transition and referred 3–5 dates not saving.Inability to close or reopen cases efficiently.Incorrect user role assignments for new providers following approval.BEI confirmed that:<ul style="list-style-type: none">The fall Hub release will include partial fixes, with others coming in later updates.They will work with PCG and the BEI Info Team to ensure accurate user permissions for case management and billing functions.Counties should continue documenting system errors and reporting them to	
Adjournment	The next EI All County Call is December 18th (10-11)	