

Family Health Committee Meeting Notes February 10th, 2026 – 11:00am to 12:00pm

**Committee Chairs – Lidiya Lednyak
Staff Liaison – Grace Dawson**

Agenda Item	Discussion
Welcome/Introductions	The meeting was opened by Grace Dawson, who facilitated the agenda and transitions between items. No formal roll call was conducted, but members and partners participated actively throughout the discussion, particularly during issue-specific agenda items and polling.
Advocacy Updates	<p>Grace Dawson provided advocacy updates on behalf of NYSACHO. She noted that Sarah Ravenhall was unable to attend due to her presence at the State Capitol, where NYSACHO President Heidi Bond was preparing to deliver testimony later that day.</p> <p>Key advocacy items included:</p> <ul style="list-style-type: none"> • Covered Lives: Heidi Bond’s testimony would address the proposed extension of the Covered Lives initiative, including the Covered Lives sunset and NYSACHO’s position on the 50/50 state–local cost split. • NYSAC Resolution: NYSACHO submitted a resolution to the New York State Association of Counties (NYSAC) supporting the Governor’s proposal to extend Covered Lives through 2029. The resolution also raised concerns about the 50/50 split and requested greater transparency from the State regarding funding schedules and disbursement timelines. • The resolution was shared with committee members via chat and will be discussed at an upcoming NYSAC meeting, where amendments may still be made prior to approval. <p>No questions were raised before the committee moved on.</p>
FHC Committee in 2026!	<p>Lidiya Lednyak and Stephen Jennings outlined a proposed vision and structure for the Family Health Committee in 2026.</p> <p>Key points included:</p> <ul style="list-style-type: none"> • A deliberate effort to broaden the committee’s scope beyond EI and Preschool to include a wider range of family and child health issues. • Potential topic areas include school-based health centers, mental health and school-based mental health clinics, maternal mortality review committees, children with special health care needs, 4410 preschool and EI, reproductive health, and oral health. • The committee intends to create space for members to bring forward emerging issues, with Grace Dawson circulating agendas in advance to ensure relevant stakeholders attend meetings. • A proposed meeting structure would generally split time between EI/Preschool topics and broader family and child health issues, with flexibility based on agenda needs. <p>No questions or objections were raised.</p>



EPA Floride Review	<p>Stephen Jennings presented a detailed overview of the U.S. Environmental Protection Agency’s accelerated review of fluoride in drinking water and the associated request for public comment.</p> <p>Highlights included:</p> <ul style="list-style-type: none">• Tooth decay remains the most common chronic childhood disease, with fluoridated drinking water often serving as the primary preventive measure for low-income children.• The U.S. Public Health Service currently recommends a fluoride concentration of 0.7 parts per million, which is carefully monitored by local water systems in New York State.• The EPA is accelerating a review originally scheduled for 2030 due to a 2024 federal court order and increasing public pressure, focusing on potential neurodevelopmental risks associated with higher fluoride levels.• The review is centered on the regulatory maximum contaminant level of 4.0 mg/L, not the optimal 0.7 mg/L, but concerns were raised that changes could indirectly undermine public confidence in fluoridation.• Stephen emphasized the equity implications, noting that many families lack access to toothpaste, toothbrushes, or dental care, making fluoridated water a critical public health intervention. <p>Lidiya Lednyak and others reinforced the importance of fluoridation, particularly given childcare settings do not require tooth-brushing.</p> <p>Committee Action: A live poll was conducted to gauge support for NYSACHO submitting public comments to the EPA.</p> <ul style="list-style-type: none">• Results showed overwhelming support, with all respondents selecting “Yes” or “I can live with this.”• The outcome will be forwarded as a recommendation for NYSACHO leadership consideration, not a final determination.
School Psychologists Bill	<p>The committee discussed the State’s elimination of school psychologists from EI services.</p> <p>Key discussion points:</p> <ul style="list-style-type: none">• School psychologists were removed from EI following a 2018 Medicaid State Plan Amendment that made their services non-Medicaid reimbursable.• While this change did not affect preschool services, it significantly reduced workforce capacity in EI, which is already experiencing shortages.• Lidiya noted that the issue could be resolved through a new State Plan Amendment restoring Medicaid eligibility for school psychologists.• Members emphasized the importance of restoring this capacity post-COVID, given increased developmental and mental health needs. <p>Committee Action: A second poll was conducted on whether NYSACHO should review and comment on pending school psychologist legislation.</p>



	<ul style="list-style-type: none">• The poll again showed unanimous support, with all respondents selecting “Yes” or “I can live with this.”
Audiology Services in EI	<p>This agenda item was raised by Dutchess County representatives Heather and Janine Fitzmaurice, with Janine providing detailed context.</p> <p>Key issues discussed:</p> <ul style="list-style-type: none">• Counties are experiencing severe shortages of audiology providers for EI evaluations.• Major providers, including Albany Medical Center and Mid-Hudson Regional Hospital, have discontinued EI audiology services following rate changes.• Families are often required to travel long distances for assessments, and in some cases, services are unavailable entirely.• Several counties reported relying on external or private evaluations when EI capacity is unavailable, with mixed experiences regarding acceptance by BEI.• Counties shared strategies, including leveraging providers in neighboring counties or New York City and accepting outside evaluations when permitted by EIO discretion. <p>Next Steps Identified:</p> <ul style="list-style-type: none">• NYSACHO will raise a more pointed question with BEI regarding the use and acceptance of external audiology evaluations when EI capacity is unavailable.• The issue may also be raised during the statewide EI meeting to seek clearer guidance.
EI Long-Term Data	<p>Lidiya Lednyak introduced a discussion on the need for long-term fiscal data to support EI advocacy efforts.</p> <p>Key points included:</p> <ul style="list-style-type: none">• State partners, particularly the Division of Budget, are seeking data that demonstrates the fiscal return on investment for EI services at the state level.• While research clearly shows long-term benefits of EI, translating outcomes into state-specific cost savings is challenging.• Participants discussed potential approaches, such as comparing EI participation to later preschool service utilization, but raised concerns about methodological limitations and data availability.• Several members highlighted differences in service authorization philosophies between EI and preschool that complicate direct cost comparisons. <p>Conclusion: The committee agreed this issue requires further thought and analysis. Members were asked to reflect on possible data approaches, with plans to continue the discussion at a future meeting.</p>
EI Hub	<p>Significant concerns were raised regarding ongoing issues with the EI Hub, including billing, session calculations, and communication challenges.</p> <p>Key concerns included:</p> <ul style="list-style-type: none">• Persistent misinformation from the Hub call center, leading to disputes with providers and administrative burden on counties.• Confusion around session calculations and payment limits, with counties unable to resolve discrepancies.



	<ul style="list-style-type: none">• A lack of a dedicated, county-specific contact within the Hub system, resulting in delays and unresolved issues. <p>Members expressed frustration with the lack of follow-through on earlier commitments for county support and on-site engagement.</p>
MCH Community Programing Workgroup	<p>Transportation reimbursement issues were discussed, particularly related to caregiver mileage.</p> <p>Key points:</p> <ul style="list-style-type: none">• Multiple counties reported that caregiver mileage invoices are appearing as \$0 billed in the Hub, despite services being authorized and accepted.• It was clarified that caregiver mileage is not billed to Medicaid and is instead reimbursed through state aid.• Due to delays and administrative complexity, some counties are reimbursing families directly and attempting to reconcile costs later.• Members agreed this issue warrants further discussion at the statewide EI meeting, with clear, advance questions submitted to BEI.
Open Discussion	<p>During open discussion, members emphasized:</p> <ul style="list-style-type: none">• The need for NYSACHO to be more assertive during statewide EI meetings, particularly regarding Hub functionality and transportation.• Interest in submitting questions in advance and structuring sessions to allow counties to respond and clarify real-world impacts.• General agreement that EI Hub issues continue to place a disproportionate burden on local programs.
Closing	<p>The next Family Health Committee will be held virtually on Tuesday, March 10th, 2026 at 11:00am.</p>



Participants

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