



## **2017-2018 BUDGET PROVISIONS ON EARLY INTERVENTION**

### **HPA STRONGLY OPPOSES THE EXECUTIVE AND ASSEMBLY PROPOSALS**

#### **AND**

### **SUPPORTS THE SENATE REJECTION OF THE EARLY INTERVENTION PROVISIONS**

The Governor's budget proposes to significantly expand the Early Intervention program (EI) health insurance mandate to impact both EI service providers and commercial health insurers. The Senate rejected the governor's proposal outright while the Assembly maintained the health insurer provisions and rejected the EI service providers' provisions.

**HPA opposes the Executive & Assembly EI budget language.** HPA does not argue the value of EI services, but most of them are educational or developmental, not medical, and shifting them to commercial insurance would increase premium costs for everyone. The Assembly budget proposal to require prompt payment for EI services, and the fifteen day notice requirement to providers, municipalities and service coordinators when the claim is self-insured, places a significant burden on plans for a task that was supposed to be handled by the state's EI fiscal agent. The savings achieved by the Governor's budget for the EI provisions was a meager and dubious \$1.35 million. By eliminating the EI service provider provisions, the value of these proposals is now at a de minimis level.

The Executive created the EI fiscal agent — and granted a \$43.5M contract — to increase commercial insurance payments for EI services. To date it has failed to streamline the program and increase third party reimbursements. Greater value can be achieved by reviewing the EI fiscal agent contract and aligning that contract to account for unfulfilled obligations instead of passing those costs along to EI service providers and commercial health insurers.