October 15, 2020

Steven T. James
House Clerk
State House Room 145
Boston, MA 02133

Michael D. Hurley
Senate Clerk
State House Room 335
Boston, MA 02133

Dear Mr. Clerk:

Pursuant to Line Item 4513-1020 of Chapter 154 of the Acts of 2018, please find enclosed the Early Intervention Program report with updates from the third quarter of FY20. This report contains information on services by unit type for DPH, and expenditures by payer including DPH, third party insurers, and MassHealth.

The Massachusetts Early Intervention Program has been recognized as a national leader for many years for its service delivery and financing model. These reports demonstrate the breadth of service delivery and payment responsibility for infants and toddlers with special needs.

Sincerely,

Margret Cooke
Acting Commissioner
Department of Public Health
Early Intervention Program

Service Units and Expenditures
Report for Q3 of FY20

October 2020
Legislative Mandate

The following report is hereby issued pursuant to Line Item 4513-1020 of Chapter 154 of the Acts of 2018 as follows:

4513-1020. For the early intervention program; provided, that the department shall report quarterly to the house and senate committees on ways and means on the total number of units of service purchased and the total expenditures for the units of service paid by the department, the executive office of health and human services and third party payers for early intervention services for the following service categories: home visit, center-based individual, child-focused group, parent-focused group and screening and assessment[...]

Summary

This report summarizes data from Q3 of FY20 for the Early Intervention (EI) Program, as well as cumulative FY20 data. More specifically, the report identifies the total number of services delivered to clients sorted by the respective payer for each service category. Additionally, this report notes the total expenditures for each of the respective payers based on the service type.
# Early Intervention (EI) Fiscal Year 2020 Third Quarter

## Report on Units of Service and Expenditures

### Units of Service (number of service hours for each category)

<table>
<thead>
<tr>
<th>Payer</th>
<th>Home Visit</th>
<th>Center Visit</th>
<th>Child Group</th>
<th>EI Only Group</th>
<th>Parent Group</th>
<th>Assessment</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>DPH</td>
<td>117,831.80</td>
<td>5,954.25</td>
<td>21,358.00</td>
<td>9,945.50</td>
<td>5,197.00</td>
<td>26,985.25</td>
<td>187,271.80</td>
</tr>
<tr>
<td>MassHealth</td>
<td>221,693.28</td>
<td>9,845.00</td>
<td>30,035.50</td>
<td>14,651.75</td>
<td>6,487.75</td>
<td>49,607.50</td>
<td>332,320.78</td>
</tr>
<tr>
<td>MCOs</td>
<td>254,840.56</td>
<td>12,243.50</td>
<td>41,271.50</td>
<td>18,401.05</td>
<td>6,797.50</td>
<td>58,198.25</td>
<td>391,752.36</td>
</tr>
<tr>
<td>HMO/Ins</td>
<td>315,738.95</td>
<td>16,867.75</td>
<td>54,162.76</td>
<td>23,257.75</td>
<td>14,002.50</td>
<td>71,211.00</td>
<td>495,240.71</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>910,104.59</strong></td>
<td><strong>44,910.50</strong></td>
<td><strong>146,827.76</strong></td>
<td><strong>66,256.05</strong></td>
<td><strong>32,484.75</strong></td>
<td><strong>206,002.00</strong></td>
<td><strong>1,406,585.65</strong></td>
</tr>
</tbody>
</table>

### Expenditures (payments made by the respective payer for each service category)

<table>
<thead>
<tr>
<th>Payer</th>
<th>Home Visit</th>
<th>Center Visit</th>
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<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>DPH</td>
<td>11,076,634.94</td>
<td>468,242.22</td>
<td>768,888.00</td>
<td>272,506.70</td>
<td>182,726.52</td>
<td>3,395,823.86</td>
<td>16,164,822.24</td>
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<tr>
<td>MassHealth</td>
<td>20,839,731.36</td>
<td>774,210.80</td>
<td>1,081,278.00</td>
<td>401,457.95</td>
<td>228,109.29</td>
<td>6,242,607.80</td>
<td>29,567,395.20</td>
</tr>
<tr>
<td>MCOs</td>
<td>23,957,100.58</td>
<td>962,828.84</td>
<td>1,485,774.00</td>
<td>504,188.77</td>
<td>239,000.10</td>
<td>7,323,667.78</td>
<td>34,472,360.07</td>
</tr>
<tr>
<td>HMO/Ins</td>
<td>29,679,883.58</td>
<td>1,326,479.86</td>
<td>1,949,859.36</td>
<td>637,262.35</td>
<td>492,327.90</td>
<td>8,961,192.24</td>
<td>43,047,005.29</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>85,553,350.46</strong></td>
<td><strong>3,531,761.72</strong></td>
<td><strong>5,285,799.36</strong></td>
<td><strong>1,815,415.77</strong></td>
<td><strong>1,142,163.81</strong></td>
<td><strong>25,923,291.68</strong></td>
<td><strong>123,251,782.80</strong></td>
</tr>
</tbody>
</table>

*This report is cumulative for the year and includes previous quarters.*

## Service Definitions

**Home Visit** - A Home Visit is a face to face meeting at the enrolled child's home or a setting outside of the EI program's primary site.

**Center Visit** - A Center Individual Visit is a face to face meeting at the EI program's site with the enrolled child and child's parents.

**Child Group** - A Child Focused Group is a face to face meeting at a community based site of a group of enrolled children.

**EI Only Group** - A EI Only Child Group is a developmental group where the only participants are children and families enrolled in EI.

**Parent Group** - A Parent Focused Group is a face to face meeting of a group of enrolled children's parents for the purpose of support and guidance.

**Assessment** - An Assessment consists of procedures by a multi-disciplinary team to determine a child's eligibility for service and assess strengths and needs.

## Payer Definitions

**DPH** - Department of Public Health

**MassHealth** - MassHealth Plans

**MCOs** - MassHealth Managed Care Plans

**HMO/Ins** - Private Commercial Insurers
# Report on Units of Service and Expenditures

## Fiscal Year 2020

### Third Quarter

### January - March

#### Units of Service (number of service hours for each category)

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<thead>
<tr>
<th>Payer</th>
<th>Home Visit</th>
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</tr>
</thead>
<tbody>
<tr>
<td>DPH</td>
<td>46,077.00</td>
<td>2,365.50</td>
<td>7,702.50</td>
<td>3,444.00</td>
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<td>10,591.75</td>
<td>72,024.75</td>
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<td>MassHealth</td>
<td>72,618.00</td>
<td>2,933.25</td>
<td>8,730.25</td>
<td>3,871.25</td>
<td>1,823.75</td>
<td>15,498.25</td>
<td>105,474.75</td>
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<tr>
<td>MCOs</td>
<td>82,356.49</td>
<td>3,647.00</td>
<td>11,784.50</td>
<td>5,155.25</td>
<td>1,905.50</td>
<td>18,246.00</td>
<td>123,094.74</td>
</tr>
<tr>
<td>HMO/Ins</td>
<td>94,438.24</td>
<td>4,416.75</td>
<td>14,572.01</td>
<td>5,837.50</td>
<td>3,590.00</td>
<td>20,511.00</td>
<td>143,365.50</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>295,489.73</td>
<td>13,362.50</td>
<td>42,789.26</td>
<td>18,308.00</td>
<td>9,163.25</td>
<td>64,847.00</td>
<td>443,959.74</td>
</tr>
</tbody>
</table>

#### Expenditures (payments made by the respective payer for each service category)

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</thead>
<tbody>
<tr>
<td>DPH</td>
<td>$4,331,308.38</td>
<td>$186,022.92</td>
<td>$277,290.00</td>
<td>$94,365.60</td>
<td>$64,835.04</td>
<td>$1,332,865.82</td>
<td>$6,286,687.76</td>
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<td>MassHealth</td>
<td>$6,824,353.08</td>
<td>$230,670.78</td>
<td>$314,289.00</td>
<td>$106,072.25</td>
<td>$64,123.05</td>
<td>$1,950,299.78</td>
<td>$9,489,807.94</td>
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<tr>
<td>MCOs</td>
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<td>$286,800.08</td>
<td>$424,242.00</td>
<td>$141,253.85</td>
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<tr>
<td>HMO/Ins</td>
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<td>$126,224.40</td>
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<tr>
<td><strong>Total</strong></td>
<td>$27,774,342.62</td>
<td>$1,050,827.00</td>
<td>$1,540,413.36</td>
<td>$501,639.20</td>
<td>$322,179.87</td>
<td>$8,160,346.48</td>
<td>$39,349,748.53</td>
</tr>
</tbody>
</table>

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