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Planning Tool: Building the Case

to Expand Medicaid

and Private Insurance for Early Intervention

February 16, 2021

*This document can be found at:* [*https://ectacenter.org/topics/finance/btc.asp*](https://ectacenter.org/topics/finance/btc.asp)

This planning tool is designed for state teams wanting to expand funding— either Medicaid and/or private insurance— to cover early intervention supports and services. It includes detail on the considerations, information and data needed to craft a document that makes a compelling argument for the expansion. The tool serves as a guide and provides a means to capture the objective, as well as the process and information used in the expansion effort.

Having an archive of the work is key. Attempts at expansion may not always be successful. A documented plan supports subsequent efforts for the expansion as personnel, stakeholders, priorities, and other circumstances within state context change over time.

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# Sections of the Planning Tool

1. Solidify the Objective
2. Build a Network of Partners
3. Ascertain Political Context
4. Establish the Context of early Intervention and the Need for Change
5. Conduct Data Analysis
6. Make the Sell: Projected Impact and Developing Options
7. Develop an Action Plan

For each section, asses the following:

* What information is available?
* What information is needed?
* How do we obtain the needed information?

# 1. Solidify the Objective

**Think about what you would like to achieve**, keeping in mind that refining the objective will be part of the process. This early decision will provide direction and inform the additional information needed to move forward.

## Identify Members of the Planning Team

| **Name** | **Role** | **Email Address** |
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*Add additional rows to this table as needed.*

## 1.2. Solidify the Objective

### Medicaid

[ ]  Add services or revise service or provider qualification definitions

[ ]  Change service or rate structure, e.g. group services into home visit category

[ ]  Change how the benefit is administered, e.g. waiver, fee for service, managed care

[ ]  Other(specify):

### Private Insurance

[ ]  Legislatively mandated coverage

[ ]  Terms of agreement with individual insurers

[ ]  Cap vs. no cap

[ ]  Define or clarify scope of services covered

[ ]  Other (specify):

# 2. Build the Network of Partners

**In the end, it’s all about relationships.** Partners play a critical role in helping to make a convincing argument for the expansion. Be strategic and intentional in selecting relevant stakeholders who will support the objective. Anticipate those who might be resistant and connect with them to address their concerns.

## 2.1. Leverage new and ongoing partners.

*See also: 3.2. Engage Stakeholders*

#### Who are existing partners that will support the change today?

| **ICC** | **Families** | **Service Providers** | **Insurers and Benefits Coordinators** | **Legislators** |
| --- | --- | --- | --- | --- |
| [ ]  Yes[ ]  No[ ]  Some/Maybe | [ ]  Yes[ ]  No[ ]  Some/Maybe | [ ]  Yes[ ]  No[ ]  Some/Maybe | [ ]  Yes[ ]  No[ ]  Some/Maybe | [ ]  Yes[ ]  No[ ]  Some/Maybe |

#### What information is needed to engage existing partners to support the effort?

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#### What information is needed to develop and engage new partners?

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## 2.2. Establish communication and transparency.

#### How will the team determine what information needs to be shared?

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#### What means of communication will be used?

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#### What information will be available and where will it be located?

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# 3. Ascertain Political Context

**Be current and clear about competing priorities among state leadership**, individual motivation to either support or oppose the desired expansion, the status of the state budget and any pressing issues on the legislative agenda. Use this information to target additional stakeholders of influence.

## 3.1. Assess the political environment.

### 3.1.a. Who in the state and within agencies has decision-making and influencing roles regarding the change?

| **Name** | **Role** | **Email Address** |
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*Add additional rows to this table as needed.*

### 3.1.b. Assess current events and history.

#### What are the current dynamics in the state including the state budget, competing priorities across state agencies and within the Lead Agency? What is the impact of COVID-19 or other unanticipated negative issues on the legislative agenda?

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#### Has the desired change been tried before by other entities and what was the result?

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#### What are the policy implications of the proposal and how do they relate to other legislative and key stakeholder priorities?

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### 3.1.c. Who are the additional stakeholders and individuals that can influence the decision? What additional resources (passion for EI, budget impact, constituent groups) are available?

| **Within the Lead Agency** | **Within Key Networks** |
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## 3.2 Engage stakeholders.

#### **Families:** Build legislative support with locally elected representatives

| **What additional stakeholders are needed?** | **What strategies will be used to engage this group on the issue?** |
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#### **EI Service Providers:** Bring valuable perspective on programmatic capacity and need. They can serve as key champions for (or barriers to) the change. It is important to involve and have buy-in from this group.

| **What additional stakeholders are needed?** | **What strategies will be used to engage this group on the issue?** |
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#### **Insurers/Benefit Coordinators:** Provide insight and key information on requirements and viable strategies

| **What additional stakeholders are needed?** | **What strategies will be used to engage this group on the issue?** |
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#### **Legislators and other leadership:** Influence state priorities by leveraging motivation and needed allocation of state funds

| **What additional stakeholders are needed?** | **What strategies will be used to engage this group on the issue?** |
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#### **Community Organizations:** Assist in building community awareness and interest in the desired benefit of the change

| **What additional stakeholders are needed?** | **What strategies will be used to engage this group on the issue?** |
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#### Others:

| **What additional stakeholders are needed?** | **What strategies will be used to engage this group on the issue?** |
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# 4. Establish the Context of Early Intervention

**It cannot be assumed that state leadership with decision-making authority has a comprehensive understanding of early intervention supports and services in the state.** Details on system infrastructure, flow of funds, current billing practices, funding sources used, and the identified need for the expansion should be provided and summarized in a succinct format.

## 4.1. Describe the intent and purpose of Part C.

#### Does any statutory and regulatory language apply to the desired change?

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## 4.2. Succinctly describe the State Part C System.

#### What are the roles of the Lead Agency and the local service structure?

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#### Types of providers

[ ]  Non-profit agencies

[ ]  For-profit agencies

[ ]  State/Local governmental employees

[ ]  Independent private providers

#### Funding flows to providers through:

[ ]  Contracts

[ ]  Grants

[ ]  Vouchers

[ ]  Fee for Service

[ ]  Capitation

[ ]  Central Finance

#### What is the provider experience and capacity for administrative direct service billing? Current billing practices (for other services and programs? Part C?)

[ ]  Currently billing for Medicaid

[ ]  Currently billing for private insurance

[ ]  Data System capabilities

#### Funding Sources

[ ]  Federal:

[ ]  State:

[ ]  Local:

#### Provide a sense of the numbers on eligibility criteria, e.g., broad, moderate vs. narrow, percentage of children served:

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## 4.3. Describe the need for change.

#### Why is this change needed?

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#### What will improve as a result of the change?

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#### How will the change improve outcomes for infants and toddlers with delays and disabilities and their families?

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# 5. Conduct Data Analysis

**Identify the elements and analysis needed to make a compelling case effectively and efficiently for the expansion.** Having multiple formats for sharing the data analysis, including data visualizations, honors adult learning styles and boosts the likelihood of consumption and use of the data.

## 5.1. Estimate the Number of Impacted Children

#### Eligibility criteria:

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#### How many children are currently being served (number and percentage)? What are the number and percentage using the birth cohort methodology?

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#### What is a five-year trend analysis of numbers served?

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#### What is the target percentage of children to be served, maximizing child find?

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#### How are children insured?

| **Year** | **Percentage of Medicaid-enrolled children** | **Percentage of children with private insurance** |
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*Add additional rows to this table as needed.*

## 5.2. Services Provided

#### What services are provided?

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#### Annual units of service?

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## 5.3 Fund Source Mapping

#### What fund sources do you use? How much revenue from each source?

| **Fund Source** | **Amount** |
| --- | --- |
| [ ]  Federal Part C |  |
| [ ]  Medicaid |  |
| [ ]  TANF |  |
| [ ]  State Part C Appropriation |  |
| [ ]  State General Funds |  |
| [ ]  State DD Funds |  |
| [ ]  Other State Funds: |  |
| Fund Name: |  |
| Fund Name: |  |
| [ ]  Local Funds: |  |
| Fund Name: |  |
| Fund Name: |  |

*Add additional rows to this table as needed.*

## 5.4. Project costs for implementation (initial implementation and on-going).

#### What are the roles of the Lead Agency and the local service structure?

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#### Policy Development

[ ]  Part C EI

[ ]  Medicaid

[ ]  Other (specify):

#### Training and TA

[ ]  State EI staff

[ ]  Contractor

[ ]  Providers

#### Data system change

[ ]  Part C EI

[ ]  Medicaid (MMIS)

[ ]  Vendors

#### Billing and collection system

[ ]  Local providers

[ ]  Central billing

#### New reports and reporting to track impact of changes (costs to administer and collect data)

[ ]  Part C EI

[ ]  Medicaid

[ ]  Budget or finance

#### Other Sources

[ ]  Administration and Monitoring (include on-going)

[ ]  Other Provider costs

#### Does the team have access to these data at the state level? At the local level?

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#### What are the current strengths for collecting and analyzing these fiscal data?

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#### More information is needed about the following:

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# 6. Make the Sell: Project Impact and Develop Options

**All the information gathered is used to identify the costs and anticipated impact** of the expansion, both fiscally and programmatically. Cost categories include personnel, infrastructure (e.g., data system enhancement) which may exceed revenue generated, especially in the first year of implementation. Return on investment should be projected over time, with detail on the investments that are needed and by whom.

### Federal

[ ]  Projected amount of increase in Medicaid federal funds

[ ]  Projected impact on other federal funds (grants, block grants)

[ ]  Decrease in rate of Part C grant spend down

[ ]  Permit the state to shift or avoid use of other Federal funds

### State

[ ]  Projected amount increase, decrease or no impact on State General Revenue needed to match Medicaid federal funds

[ ]  Use currently unmatched EI Part C State General Revenue funds

[ ]  Funds drawn from Medicaid budget

[ ]  Other change in Agency fund expenditures

[ ]  Projected decrease in State funds to address projected growth in population and services

### Fiscal Impact

[ ]  Projected amount of funding:

| **Over the next fiscal year:** | **In the first year and subsequent years:** |
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### The projection is based on:

[ ]  Projected numbers of total children (current, rate of growth, trends, and if diagnosis (autism) or delay type (mild speech delay) specific applicable percentage)

[ ]  Projected percentage of children by insurance coverage type (based on current breakdown of insurance coverage Medicaid, CHIP, private insurance, Medicaid and private insurance, and Health Savings Account (HSA) or self-insured)

[ ]  Projected number of new covered services (using current services delivered broken down by type and trends)

[ ]  Current collections by insurance type specifying current service covered and type of insurance (data sources and trends)

[ ]  Projected impact of change in rate structure

### The alternative change could be achieved by:

#### For Medicaid

[ ]  Medicaid State Plan change adding service or changing definitions (specify section within current plan)

[ ]  State administrative rule change

[ ]  Addition or changing waiver

[ ]  Other (specify):

#### For Private Insurance

[ ]  Law/statute change (specify section within current statute)

[ ]  Insurance regulatory policy change

[ ]  Agreements with individual insurers (ERISA plans, public employee plans, private market plans)

[ ]  Part C EI policy change

[ ]  Other (specify):

# 7. Develop an Action Plan and Timeline

**Having a written plan of action provides direction and assures accountability to the expansion effort.** The plan brings clarity and transparency by articulating the necessary steps in the process, and the persons responsible for carrying out those steps. The plan also serves as an archive of the work, which supports subsequent attempts for the expansion as personnel, stakeholders, priorities, and other circumstances within state context change overtime.

#### What is the timeline for making the ask for the objective?

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#### What are the key steps for each of the six areas listed above?

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#### Who are the point-people and resources needed?

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#### What are the benchmarks that will indicate progress?

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