HOUSE BILL REPORT HB 1676

As Reported by House Committee On:

Human Services, Youth, & Early Learning

Title: An act relating to special education early support for infants and toddlers.

Brief Description: Concerning special education early support for infants and toddlers.

Sponsors: Representatives Senn, Couture, Taylor, Stonier, Pollet, Callan, Rule, Goodman and Kloba.

Brief History:

Committee Activity:

Human Services, Youth, & Early Learning: 2/8/23, 2/14/23 [DPS].

Brief Summary of Substitute Bill

- Increases the multiplier for the Early Support for Infants and Toddlers (ESIT) program funding formula from 1.15 to 1.25.
- Provides that for funding purposes, a child is considered to have received ESIT services if they are receiving services on the monthly count day or have newly started receiving services at any point during the month.

HOUSE COMMITTEE ON HUMAN SERVICES, YOUTH, & EARLY LEARNING

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 9 members: Representatives Senn, Chair; Cortes, Vice Chair; Taylor, Vice Chair; Eslick, Ranking Minority Member; Couture, Assistant Ranking Minority Member; Callan, Goodman, Ortiz-Self and Rule.

Minority Report: Without recommendation. Signed by 2 members: Representatives Dent and Walsh.

Staff: Omeara Harrington (786-7136).

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This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.

Background:

Part C of the federal Individuals with Disabilities Education Act (IDEA) provides grant funding to states to operate a comprehensive program of individual and family intervention services for children from birth to age 3 who have been diagnosed with a disability or developmental delay. In Washington, these intervention services are administered by the Department of Children, Youth, and Families (DCYF) through the Early Support for Infants and Toddlers (ESIT) program. The ESIT program provides an array of services, such as developmental services, occupational and physical therapy, language therapy, and service coordination to clients according to an individualized family service plan.

The DCYF contracts with provider agency organizations, including public, private, tribal, and nonprofit entities, and school districts, to provide early intervention services within an assigned area. In some counties, services are coordinated through county lead agencies, which subcontract with provider agencies for service delivery.

Funding for the Early Support for Infants and Toddlers Program.

Funding for the ESIT program is through multiple sources including state special education funding and other state funding, as well as federal IDEA funds. Funding is appropriated to the DCYF based on the annual average headcount of children who are eligible for and receiving early intervention services. The headcount must be multiplied by the per pupil statewide allocation for the prototypical kindergarten through grade 12 (K-12) school, multiplied by 1.15. The DCYF is required to distribute funds to ESIT service providers and, when appropriate, to county lead agencies. A child is considered to have received ESIT services if the child received services within a month prior to the monthly count day.

Summary of Substitute Bill:

The multiplier for the Early Support for Infants and Toddlers (ESIT) program funding formula is increased from 1.15 to 1.25. For purposes of funding, a child is considered to have received ESIT services if they if they are receiving services on the monthly count day or have newly started receiving services at any point during the month.

Substitute Bill Compared to Original Bill:

The multiplier for the Early Support for Infants and Toddlers (ESIT) program funding formula is increased from 1.15 to 1.25 (rather than 1.38 in the underlying bill). For funding purposes, a child is receiving ESIT services if they are receiving services on the monthly count day or have newly started receiving services at any point during the month (rather than receiving services within a month prior to the monthly count day, in current law, or receiving services at any time during the month whether or not the child is new to services, in the underlying bill).

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Appropriation: None.

Fiscal Note: Available. New fiscal note requested on February 15, 2023.

Effective Date of Substitute Bill: The bill takes effect 90 days after adjournment of the session in which the bill is passed.

Staff Summary of Public Testimony:

(In support) The Early Support for Infants and Toddlers (ESIT) program is a critical part of the special education continuum, but it has been underfunded and should be more commensurate with other special education programs. It is necessary to act quickly to get affected families the services they need. Eighty-five percent of brain development happens before age 3. When children are served at ages birth to 3, they often do not need ongoing services. Early intervention changes lives and makes learning smoother, and lessens emotional and social stigmas in the future. Families have seen major benefits to their children with disabilities as a result of the ESIT program through family service plans and services like physical therapy, occupational therapy, feeding therapy, sign language, and mobility equipment. Not all children are fortunate enough to receive these services. The youngest people with disabilities should not be forgotten.

The increase in the rate provided in the bill is a 20 percent increase, as ESIT program providers are currently paid 20 percent lower than providers in other parts of the special education system. Also, the provider payment date is moved in the bill. Currently, payment starts the first day of the second month of services. However, a lot happens during the first month, and it is important to make sure that providers are paid for the first month of services. This bill will help address workforce issues, which is important as obtaining and retaining staff has reached a crisis point, putting the ESIT program at the brink of failure. Providers will leave the ESIT program to work for the school district or hospital where they will be paid more. Increased funding for the ESIT program would allow it to serve more children and offer competitive pay to providers.

(Opposed) None.

Persons Testifying: Representative Tana Senn, prime sponsor; Jen Chong Jewell; Magan Cromar, King County's Developmental Disabilities and Early Childhood Supports Division; Julia K. Anderson; Nick Federici, Kindering, Boyer Children's Clinic, and Birth To Three Development Center; Colleen Fuchs, Joya Child and Family Development; Jerome Johnson, Kindering; and Rene Denman, Toddler Learning Center.

Persons Signed In To Testify But Not Testifying: None.