

**Virginia Interagency Coordinating Council**  
**December 8, 1999**  
**Meeting Minutes**

The meeting was called to order at 9:40 AM by Anne Stewart, Chair. A list of attendees follows this report.

**Lead Agency Report**

Shirley Ricks reported that consideration of a change in lead agency designation has been postponed until at least Spring 2000. When a change is considered, public comment (from families and the VICC) will be sought. An evaluation of the Part C system is planned; target date for initiation of the evaluation is Spring 2000. One component of the study will be to determine if there is a need for change in the lead agency designation. Shirley reported that Richard Kellogg, Commissioner of the Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRSAS), had concerns whether an agency dealing with health would be more appropriate as the lead agency since all children have health issues. She emphasized that integration of health and disability concerns is critical regardless of which agency serves as the lead agency. She stated that even though the Comprehensive Plan for the Department of Mental Health, Mental Retardation and Substance Abuse Services indicates the lead agency designation will be considered in 2002, it may or may not be addressed then.

Extensive discussion followed. Comments included concerns regarding communication about the comprehensive plan, the necessity of including the VICC and localities in discussions about lead agency designation, and the need to consider the impact on localities and families if the lead agency is changed. The public comment period for the comprehensive plan has been extended. Charline Davidson's fax number was made available to attendees so interested persons could send their comments to her. Shirley Ricks said she would contact Charline Davidson to obtain more information about the inclusion of possible lead agency designation change in the DMHMRSAS Comprehensive Plan. She requested that copies of any written comments on change of lead agency designation be sent to the Virginia Babies Can't Wait! Office.

Cheri Takemoto made a motion that "*the VICC as the governor-appointed body responsible for overseeing the well being of infants and toddlers with disabilities be kept informed of and be included in any discussions concerning a change of the lead agency.*" Jim Blackman seconded the motion. Extensive discussion followed. Jim suggested that we have a meeting to educate the VICC about the implications of a change in lead agency when this is seriously considered. Anne Lucas responded that we do not know the pros and cons and that is why it is absolutely necessary that we have an evaluation of the system. Anne said she expects there to be multiple opportunities

across the state for people to participate in the evaluation of the system. She explained the RFP (request for proposal) process and stated that an advisory body would be needed as part of the process. Anne Stewart suggested that the Direct Services Committee and the Family Support and Advocacy Committee formulate questions that should be asked as part of the evaluation. She requested that these questions be brought to the next VICC meeting (March 2000). Christa Shifflett offered to share CoCoA's response to the possible change with interested persons. The question was not called on this motion.

### **HJR 725 Subcommittee Meetings**

Anne Lucas reported that on Friday, December 10, the Lead Agency would be providing an update on the following areas: family fees and ability-to-pay, cultural diversity, child find and public awareness, monitoring and evaluation, and standardization of forms and processes. She reported that DMHMRSAS representatives, including the Deputy Commissioner, met with Steve Waldron, Executive Director of ARC of Virginia, prior to the November 16 HJR 725 meeting.

Wanda Pruett asked if there was any chance that the HJR Subcommittee could be continued. Anne Lucas explained that keeping the Subcommittee active for this year was a hard won compromise based on assurance that the Subcommittee would be disbanded following this year. Discussion followed about whether or not it would be helpful for the VICC to write a letter to the legislators requesting that the Subcommittee be continued. Pat Abrams reminded the VICC that it advises the Lead Agency, not the legislature. Individuals can make recommendations to the legislature and can reference their affiliation with the VICC.

### **Part C Fees and Ability-to-Pay**

Anne Lucas reported that DMHMRSAS is doing an internal analysis of department policies and procedures in relation to Part C federal regulations and Part C policies and procedures. The group met Monday, December 6. Steve Waldron will be collecting scenarios from families (including child's diagnosis or condition, services, and financial information) to use to evaluate the potential impact of proposed changes on families who represent a wide variety of circumstances. (The family information will be anonymous). Anne reported that the internal workgroup would expand to include other agencies and families. The expected completion date for the internal analysis is February 2000. The target date for changes in policies related to fees and ability-to-pay is Spring 2000 and the expected implementation date for new policies is the beginning of the federal fiscal year, October 1, 2000. Anne informed the VICC that any changes in Part C policy require a 60 day public comment period and must be approved by the Office of Special Education Programs (OSEP).

### **Monitoring and Improvement Measurement System**

17 sites have been selected for monitoring this year. The remaining 17 localities will be monitored the following year. In the interest of time, a full report on MIMS was deferred to the March 2000 meeting.

### **Family Report**

Wanda Pruett reported that families have expressed a concern about the HJR 725 Subcommittee being disbanded. Wanda also reported that families are asking when the new VICC members will be appointed. Members must be appointed by the Governor. The slate of nominees was

forwarded to the Governor's office in August. Shirley Ricks reported that she is following up on this with Martha Mead.

## **Department of Medical Assistance Services (DMAS) Follow Up to September Public Comment**

Anita Cordill circulated a letter that was sent by Cheryl Roberts, DMAS Director of Managed Care, to Kathy Phillips, Rural Infant Services Program (RISP) in response to Kathy's letter about the effect of reduced reimbursement on the Infant Program. Cheryl requested a meeting in order to better understand the issues. She indicated that she was unable to provide specific solutions until she had more information. Kathy Phillips stated that she would provide the information the DMAS has requested.

### **Ability-to-Pay**

Shirley Ricks reported that the Reimbursement Office of DMHMRSAS has agreed to develop a standardized process to be used by Community Service Boards (CSBs) to determine ability-to-pay and fee appeals.

Emily Dreyfus distributed a handout entitled ***Burdens of Ability to Pay: Facts and Family Perspectives***. She reported that most of the information in the report was provided to the HJR Subcommittee. The new information in the report is largely family perspectives, including the emotional impact of the issue. She reported that the Family Focus Group report has been finalized. She and Carmen Sanchez reviewed all of the information they had concerning fees and ability-to-pay and developed a report (included as part of the handout) which included direct quotes as well as several common themes. These themes are:

- ◆ Families are opting out or reducing services
- ◆ There is a lack of insurance coverage for some services
- ◆ Families are willing to pay something, but it must be affordable
- ◆ Families are forced to make difficult financial choices
- ◆ The current appeals processes are invasive
- ◆ There are inequities between different localities

Emily distributed letters from families about fees and ability-to-pay. She referred the VICC to the Service Coordinator data reported in June. Emily reported that ATP workgroup representatives, ODU and DMHMRSAS researchers, Early Intervention Interagency Management Team representatives and Virginia Babies Can't Wait representatives met in November and determined that the data from the family survey indicated that the fees and ability-to-pay difficulties may indicate a systemic problem. This conclusion was based on reports from 31 families who chose to decrease or not receive services because they were beyond affordability. These families represented at least 14 different councils.

Carmen Sanchez distributed a copy of her testimony at the November 16, 1999 HJR Subcommittee meeting as well as handouts she distributed at that meeting. She stated that the most agonizing theme she found was that parents feel people are speaking out of both side of their mouths about early intervention services. She stated that parents found it ironic that the importance of early intervention is stressed, yet receiving services can be so difficult. She stated that families are making day by day choices about whether they will get services. She stressed the importance of the evaluation of the fee/ability-to-pay system being an open process and requested that the DMHMRSAS internal workgroup be expanded to include families as soon as possible.

Cherie Takemoto asked for a response from the Part C office about the statement that requirements of IDEA are being violated. Anne Lucas reported that any family who is not accessing services due to fees has the option to contact the DMHMRSAS Reimbursement Office for resolution. She stated that very few families have done so. Anne explained that DMHMRSAS and Community Service Boards (CSB) are required to follow their existing policies and procedures. Therefore, the immediate solution is informing people of the process for appeals and the DMHMRSAS Office of Reimbursement working with each family on an individual basis. She stated that families need to be informed to call her and Barry Mason, DMHMRSAS Office of Reimbursement, if they are unable to resolve fees/ability-to-pay issues. A discussion followed about the disparity between reports from families having difficulty and the number of people requesting appeals. It was suggested that the Part C office could send a letter to families who participated in the focus groups thanking them for providing input concerning fees and explaining the current process for appeals. This would need to be done through the Virginia Institute for Developmental Disabilities because the families' anonymity was guaranteed. The possibility of sending letters to all families receiving Part C services was discussed with the mechanism of distribution being through the local service coordinators. She also stated that she would be happy to send a letter from the Part C office to families. A suggestion was made that information about fees, ability-to-pay and appeals processes be included in the Welcome Book each family new to Part C services receives.

Anne Stewart expressed her thanks to the Ability-to-Pay Workgroup for the outstanding work they have done. Families are being heard that Part C fees and ability-to-pay are a pervasive problem.

Emily Dreyfus stated that the appeals process is too burdensome and too invasive. People are opting out of services rather than having their life examined and judged. Barbara Mease stated that the fees/ability-to-pay scales need to be reasonable up front, so that the appeals process is not (usually) necessary. Emily expressed concerns about the site visits by the Management Team and Part C representatives. She stated that the Ability-to-Pay Workgroup needs to be at the table with DMHMRSAS now.

### **Public Comment**

Jean Odachowski, Council Coordinator for Piedmont Regional Early Intervention Coalition, commented that she is greatly concerned about the potential change in the lead agency.

Julie Katz, Parent to Parent Coordinator, Arlington stated that she hears a lot about fees from families. She has heard that lots of families "just walk away when shown the sliding fee scale."

Cori Hill stated she was asked by Rhonda Stees to read a letter she wrote concerning fees. A copy is attached.

Carmen Sanchez, Family Resource Coordinator for Fairfax/Falls Church and the parent of a five year old with Cerebral Palsy, stated that we can do a lot of work about the fees/ability-to-pay issue, but there will still be the issue of the Virginia Code. She stated that the code was developed for adults and works well for adults, but does not work for children.

Mary Anne White, Council Coordinator for Goochland-Powhatan made five comments:

1. She requested that the room be set up better so that persons with hearing impairment, such as herself, could hear the proceedings better.
2. She sent a letter to other council coordinators about the inclusion of the change in lead agency in the DMHMRSAS Comprehensive Plan. She stressed that this letter was not from CoCoA.

She stated that at a Virginia Association for Community Service Boards (VACSB) meeting, it was noted that there is a misperception that most councils report to Health Departments. Most report to CSBs.

3. She reported that the Richmond Times-Dispatch printed an editorial by Thomas Sowell in the December 6, 1999 edition. In the editorial, Sowell questioned that need for early intervention and suggested that speech pathologists recommend early intervention in order to ensure their jobs. She wondered if the VICC would be willing to write a letter in response to the editorial. She stated that the Speech, Language and Hearing Association of Virginia is responding and that an effort is being made to secure a response from the American Speech, Language and Hearing association.
4. She stated it is difficult for individuals trying to attain the highest standard by 2002 to know what they need to do. She asked what the process would be for individuals who were not able to attain the highest standard by 2002.
5. In regards to the ability-to-pay issue, she stated that she believes "both sides of the table" truly want to work toward resolution and she wondered if mediation should be considered. She also asked that when potential solutions are considered, care be taken not to change systems that are working well now.

Allan Phillips, Infant Program Director for Fairfax/Falls Church, stated that he received information about the consideration of lead agency designation change in time for this to be discussed at their local interagency coordinating council (ICC) meeting on Monday, December 6. Their ICC sent a letter to Charlene Davidson. He stated that it feels like a decision was made outside of the interagency process which is counter to the intent of the law concerning services for infants and toddlers with disabilities.

Anne Simmons, Central Virginia Council Coordinator, stated that their council identified a need for change in the sliding fees scale and appeals process. She stated that a representative from the DMHMRSAS Office of Reimbursement planned to meet with them, but cancelled because he/she was told not to attend by Barry Mason because of the work being done at the state level.

Terry Izzo, Program Coordinator for Infant Intervention Services in Richmond, reported that their agency is working to maximize third party reimbursement to providers and to educate and empower providers about maximizing third party reimbursement.

Kathy Phillips, Council Coordinator for the Rural Infant Services Program, thanked Anita Cordill for the opportunity afforded Kathy to express her concerns and to work with DMAS regarding reimbursement. She stated that it is getting harder and harder to provide services in natural environments. Kathy stated that she strongly supports comments made by Mary Anne White concerning ability-to-pay. She wondered if the VICC should review calls made to the Part C Office.

Darlene Warsing, Program Coordinator for Northwestern, stated that as an ATP Workgroup member, she has observed that issues about fees/ability-to-pay continue to grow. She also wondered if it would be helpful to use a mediator.

Alison Standing, Rappahannock Area Council Coordinator, stated that her council did provide comments to Charlene Davidson concerning the inclusion of change of lead agency designation in the DMHMRSAS Comprehensive Plan. Their comments suggested that research be done before any action is taken.

Martha Adams, newly appointed Director of Mental Retardation Services, DMHMRSAS said she attended the meeting to listen and learn in order to work effectively with the Part C system.

Evelyn Louis Jeune is a member of an advocacy group for Part B. She stated they are learning about lots of kids who were missed by Part C.

Susan Shaw, Blue Ridge Infant and Toddler Council Coordinator, reported that her council did not believe they had a problem with fees/ability-to-pay, but after hearing all of the discussion, wonders if there might be problems of which they are not aware. Her council is meeting next week to look at this; they will look at each child with the service coordinators to make sure that families are getting the services they need.

Deana Buck, Richmond City Council Coordinator, said we need to have other steps in place that do not involve Barry Mason (for the fees/ability-to-pay issues). Local councils need to have tools to question how things are done and how to address the problems. She stated councils are trying to do what they can. Lots of ways beyond CSBs are needed to resolve problems. Other agencies, in addition to CSBs, need to be a part of the solution.

Dana Yarbrough, parent, stated that her family paid \$400 per month for early intervention services until the appeals process resulted in reduced fees. The appeals process took six months. Her family had to file for bankruptcy. Dana also reported that the Family Support and Advocacy Committee will be sponsoring the "Families are Special Too" conference March 31-April 1. The committee is looking for presenters for the conference.

Regina Myrick, parent of a five year old daughter with special needs reported that information concerning resources is being shared through the Family Network. She reported that she was able to secure \$4400 to pay for a bed for her daughter. She has located resources in Virginia and other states. It has been her experience and that of other parents that social workers, the health department and other agencies are unaware of the resources that are available. The Family Network is putting together an information packet about financial resources.

Marti Blythe, Regina's Service Coordinator, stated that Regina has been very helpful to her in locating resources. Marti is also a Waiver Coordinator. Marti distributed newsletters from the Children's Center in Franklin. She reported that Children's Center staff and families they serve were greatly affected by Hurricane Floyd. The Franklin area was devastated. Two hundred homes were lost, and 182 businesses were affected. She expressed thanks to all who called and expressed concern and a willingness to help. The community has pulled together. Their CSB was essential in providing crisis services. Service Coordinators helped families get the resources they needed. Current needs are household goods (furniture) and money. The Salvation Army and the American Red Cross have helped with transporting donated furniture to Franklin. While the situation in Franklin is better now than it was immediately after the flooding, families remain under a great amount of stress.

### **VICC Responses to Public Comments**

In response to the column by Thomas Sowell in the Monday, December 6, 1999 edition of the Times Dispatch, Cherie Takemoto made a motion that "*the philosophy of the VICC and the very name of our early intervention system, Virginia Babies Can't Wait! necessitates that the VICC write a letter in response to Mr. Sowell's column.*" Helen Bessent Byrd seconded the motion. The motion passed. Terry Izzo suggested that parents write because the criticism was directed to professionals; responses from professionals would not have the same impact as responses from families. Wanda Pruett said she would organize a response from parents.

A letter will be sent from the VICC to Rhonda Stees, whose letter was read by Cori Hill. Anne Lucas reported that she has spoken with Ms. Stees and would be happy to speak with her again.

Discussion followed concerning the appeals process. It was reported that some families have gone through the process and have not had any changes in their fees. Anne Lucas repeated her request to refer all families experiencing difficulty to her (first) and to the DMHMRSAS Office of Reimbursement (if services are provided by or paid through CSBs). Anne will provide families with information about the appeal process, their rights, due process and administrative complaints. She stated that she will let the families who call know that she is contacting the local council (with the family's permission) as part of the resolution process.

Cherie Takemoto stated that the current system is not working for families. Anne Lucas responded that the goal is to develop a system with affordable fees up front so that appeals are not routinely required. Wanda Pruett stated the appeals process (what families have to go through, being judged about how they spend their money) is offensive and that it is offensive that a choice not to go through the appeals process is considered a choice not to receive services. Shirley Ricks stated that a goal with resolution of the fees/inability-to-pay issue is to change the process so that an extensive appeals process is unnecessary.

Cherie Takemoto made the following motion: *"Based on the findings of the ATP Workgroup which included information from the Family Surveys, the Family Focus Groups and conversations with and letters from families, VICC has heard evidence that families are opting out or reducing services; there is a lack of insurance coverage for some services; families are willing to pay something, but it must be affordable; families are forced to make difficult financial choices; the current appeals processes are invasive; and there are inequities between different localities. Be it resolved, we are requesting the Lead Agency and the ATP Workgroup move now to identify solutions to eliminate barriers to access to services based on ability-to-pay."* Jim Blackman asked that possible solutions be considered during the VICC retreat (May). Discussion followed about whether a resolution was necessary. Rose Singleton seconded the motion made by Cherie. Jim Blackman called the question. Six voted for; 7 voted against the motion. Cherie requested discussion. Glen Slonneger stated he was concerned about inclusion of the themes reported by Emily in the motion. He asked if these were developed by the ATP workgroup. Emily reported that she and Carmen Sanchez developed them. He expressed concern that we not disrupt things that are working now (as requested during public comment) and he questioned if we have all the information that is needed to make such a resolution. Liz Hutton reported that she is hearing another request; she is hearing a request that representatives from the ATP committee be included in the internal workgroup. She also stated that the Management Team is working to find solutions. Helen Bessent-Byrd stated that while VICC has "interagency" as part of its name, the current workgroup is not an interagency group. She suggested that we use the Net to let people know when meetings are scheduled so they can participate and that specific times be set for reporting by the various workgroups. She stated that resolutions are made to speak to the public, not to direct bodies associated with the council to take action. Helen made the following motion: *"I move that the schedules of the committees working on the ability-to-pay issue be posted on the net and that those committees, which are the VICC Ability-to-Pay Workgroup, the Early Intervention Interagency Management Team and the DMHMRSAS internal workgroup, report recommendations at the March 2000 VICC meeting."* Liz Hutton seconded the motion. The motion passed.

## **Public Awareness Update**

The RFP for the public awareness marketing plan went out on October 29<sup>th</sup>. December 13 is the deadline for responses. A committee consisting of representatives from the Public Awareness Committee, the Family Support and Advocacy Committee and the Part C staff will review the proposals on December 20. The artwork is to be done by DMHMRSAS Office of Graphic Designs.

## **Bylaws**

Proposed revisions to the VICC Bylaws were sent to VICC members on November 29. According to the bylaws, members are to receive suggestions for changes 10 days in advance. Liz Hutton made a motion that the VICC act on the proposed changes even though the suggested changes were received by members only 9 days in advance. Anne Stewart seconded that motion. The motion passed.

Liz Hutton made a motion to accept the changes as proposed. Helen Bessent Byrd seconded the motion. The proposed changes include the addition of two members: an additional provider and a private third party payor representative. The proposed changes also include a change in terminology from "Chairman" and "Vice-Chairman" to "Chair" and "Vice-chair" in keeping with current practice. The motion passed.

Beth Tolley reminded the VICC that the bylaws require that the chair or co-chair of each of the standing committees be a VICC member and that the chair is to be elected annually. After extensive discussion, a recommendation was made that committees that do not have a VICC member as chair or co-chair elect or select a VICC member as co-chair, even if it means there will be three co-chairs. Pam Johnson offered to serve as co-chair of the Family Support and Advocacy Committee. Brenda Crockett will check to see if Brenda Laws is willing to co-chair the Local Regional Direct Services Committee. Pat Abrams offered to co-chair the Public Awareness Committee. It was also stated very strongly that complying with this requirement in no way diminishes the work that has been done by the current chairs and co-chairs.

## **Central Directory**

Lisa Bilik presented an overview of the services provided by United Way as part of the Central Directory contract. She reported that data has been merged from different regions across Virginia so that information can be accessed about any area in Virginia. Information can be obtained by calling the state central point of entry number, 1-800-234-1448 or by searching the website at [www.irissoft.net](http://www.irissoft.net). The system is set up to provide information about services in locations specified by the person making the inquiry. Lisa reported that they ask callers if they can make a referral. If the callers says yes, they make the referral, then follow up in two weeks. They will receive a new phone system this month which will allow them to transfer calls immediately to the locality (if desired by the caller).

Lisa Bilik requested information from attendees about changes and additions they would like to see on the central directory menu. She said it would be helpful to have standardized names of the local programs. United Way is recording the number of calls received; they will provide information to the Part C Office about the needs expressed by callers. She asked for input about how the needs should be organized for reporting. Lisa distributed packets of information that included information about training of the persons answering the phones as well as one-page guides that are distributed widely across the state and are updated every six months. She requested that corrections or additions be sent to her.

A request was made that United Way provide a way to add an age criteria to the search for services so that only those agencies that provide services for infants and toddlers from birth to age three could be displayed upon request. Lisa will follow up with the developer. Lisa reported that the keywords for searching are being standardized. She will provide a list of the keywords. Deana Buck requested that persons calling the central point of entry number be given the parent contact information for their locality. Lisa said that can and will be done. Lisa told the group that the web site can be accessed in different languages. In addition, they have a list of things to consider to make it more accessible to persons with visual and other disabilities. Cherie Takemoto told Lisa she would send her information about a service that evaluates web sites for accessibility.

### **Annual Report**

The Annual Report was distributed to VICC members. Corrections or suggestions for changes should be sent to Mary Ann Discenza by Tuesday, December 14, 1999.

### **Personnel Training and Development Committee**

The Personnel Training and Development Committee continues to meet to develop the criteria and procedures for the early intervention assistant personnel category. The committee will meet following the VICC meeting today.

### **Location of VICC Meetings**

The group discussed pros and cons of various meeting locations. It was recommended that the March meeting be in Richmond because the General Assembly will be in session and agency representatives will need to stay in town. A request had been made that at least one meeting each year be held in the southern part of the state. The September meeting will be held in the Roanoke area. A request was made that there be a room for children wherever the meeting is held. (Families provide the child care worker; just the space is needed). Liability issues will need to be addressed when reserving a room for the children.

### **Announcements**

Dr. Blackman brought/distributed several copies of the Journal of Infants and Young Children.

### **Recognition of Cherie Takemoto**

Anne Stewart presented a "How Are the Children" certificate of appreciation to Cherie Takemoto in recognition and appreciation for all she has done for the children of Virginia especially in her role as the Chair of the VICC. Anne stated, "Cherie has been and will continue to be a mover and shaker and advocate for babies across the state." Cherie received a standing ovation.

### **Adjournment**

Anne Stewart closed the meeting by comparing the issues before Virginia's early intervention system to those facing a family: a possible move (consideration of change of lead agency), its identity (consideration of changing localities' names to include "Virginia Babies Can't Wait!") and finances. She asked that everyone stay open with each other as we work on these three critical issues. The meeting was adjourned at 1:30 PM.

To Whom It May Concern,

*I have an eleven-month-old son with Down syndrome. I don't know if I can tell you the range of feelings I had that night when my son was born and the pediatrician came in to tell us the news - I still feel those emotions just thinking of that moment. Life became full of concerns - immediate ones such as wondering would my child have a heart problem - to long range ones. The second day in the hospital a couple came to see us who had a twelve-year-old daughter with Down syndrome. They offered us support and encouragement. We felt especially encouraged by all the good things they had to say about our local early intervention program. One of the many wonderful things about the program was that it offered infant education at a minimal fee which meant we would not have the added concern of whether or not we could afford this important service for our child. We felt so appreciative that our community was there to support us through this time of need by subsidizing this program. It was like a light in the fog. We certainly had plenty of changes to deal with and many sudden financial concerns.*

*Our services started primarily with infant education in which the educator would come to our home once a week. We can't tell you what that person has come to mean to our whole family. The care, education and support she has provided has been invaluable.*

*Back in July we began to hear that there might be an increase in infant education fees. Although state code mandates that families be involved in changes in the program, we could not get any straight answers about this from our Community Services Board. When we finally did, after much probing on our part, we found that we were faced with a 500% increase in fees for this service. Our fee was going from \$5 a session to \$30. My husband is a professor at a state university but a \$100 a month increase feels devastating to us at this time. When our son was born with Down syndrome, we decided that I would leave my teaching job and stay home to care for our son. Of course this has created a number of challenges for us financially.*

*The increase in infant education fees also hit us very hard emotionally. What happened to that community support? What have you ever known to go up 500%? What has made it even harder for us to accept is that our Community Services Board stated that it is sound financially at the same meeting that they voted to raise the fees this amount! They have been able to financially support infant education but say that they are now mandated by state requirements to raise the fees so they match what it costs them to run it. It is hard for us to understand how they must now charge like private enterprise for a program that is offered by a community services board. In the past there has been plenty of money to support this program. Our community services board is now going to charge more and make money off of our child's disability all in the name of meeting state codes and mandates. This is very painful to us. Even the Executive Director of our CSB has said publicly that he would like to see this program offered without having to charge a fee!*

*Our CSB says the state is asking them to "maximize" fee collections in relation to infant education. Perhaps this seems like a reasonable goal when addressing other services such as speech therapy and physical therapy which are funded by insurance or Medicaid. There are amounts those agencies are prepared to pay for certain services. But in the case of infant education there is no such assistance available and this is entirely an out of pocket expense for our family. This means we will pay more for our weekly infant education session than we pay to see a doctor, even the pediatric cardiologist. This does not seem equitable to families.*

*We know there is an appeal process in place but it does not work in our locale for professional families.*

*The increase for infant education will go into effect in January and we are very concerned that we will have to decrease services for our child. As our child's needs have changed we are now receiving more services for speech and physical therapy for which we have co-payments. So our financial load continues to increase. As important as it is to us, we're not sure where we will find the money to keep our infant education service weekly. We struggle at this point to meet our current financial obligations. Infant education is so important for our child and other special needs children. We wish the state would choose to support rather than hinder us in our pursuit to help our child's development. It is our hope that perhaps you can be the first step towards this end.*  
Sincerely, Rhonda Stees

#### **ATTENDANCE - VICC Members**

**Cherie Takemoto - Parent**

**Rose Singleton - Parent**

**James Blackman - Personnel Preparation**

**Helen Bessent Byrd - Personnel Preparation**

**Anne Stewart - Personnel Preparation**

**Barbara Mease - Provider**

**Todd A. Bryant (For Y. Tennyson) -SCC**

**Pamela Johnson - DRVD**

**Forest Mercer - DSS**

**Liz Hutton - VDH**

**Pat Abrams - DOE**

**Glen Slonneger - DVH**

**Shirley Ricks, DMHMRSAS**

**Anita Cordill - DMAS**

#### **BCW STAFF**

Anne Lucas, Virginia Part C Coordinator

Bev Crouse, Julia Martin, David Mills, Mary Ann Discenza, Muriel Felder, Beth Tolley

#### **Parents, Council Coordinators, Providers and other Virginia EI stakeholders**

Mary Lou Hutton, Council Coordinator, Cumberland ICC

Katy McCullough, Council Coordinator, New River Valley ICC

Christa Shifflet, Council Coordinator, Shenandoah Valley ICC

Cori Hill, FSA Co-Chair/ PACE Director

Alison Standring, ICC Coordinator, Rappahannock ICC

Jean Odachowski, ICC Coordinator, Piedmont Regional Early Intervention Coalition

Allan Phillips, Director of Early Intervention, Fairfax

Kathy Phillips, Council Coordinator, Middle Peninsula-Northern Neck ICC

Carmen Sanchez, Parent, Fairfax Falls Church ICC

Emily Dreyfus, Regional Family Representative, ATP Co-Chair

Marie E. Louis-Jeune, Parent/PADDA

Regina A. Myrick, Parent/ Regional Family Representative

Dana Yarbrough, Parent to Parent of Virginia

Ann Cox, PTDC Co-Chair

Deana Buck, Council Coordinator, Richmond ICC

Marti Blythe, Service Coordinator

Julie Katz, Parent to Parent Coordinator- Arlington

Susan Shaw, Council Coordinator, Blue Ridge Infant and Toddler Council

Lynn M. Ruiz, Council Coordinator, Arlington ICC

Brenda Crockett, LRDS Committee Chair, Council Coordinator, Chesapeake ICC

Janie Shoup, Council Coordinator, Mount Rogers ICC

Terry Izzo, Infant Intervention Services

Darlene Warsing, Pie Program Coordinator

Mary Anne White, Council Coordinator, Goochland/Powhatan

