



“The Voice of Local Public Health in New York State”

October 22, 2013

**Testimony to Joint Legislative Committees
on Health, Insurance, and Oversight, Analysis, and Investigations
Regarding Early Intervention Fiscal Agent Implementation**

NYSACHO’s MISSION:

To support local health departments
in their work to prevent disease, disability and injury
and promote health and wellness
throughout New York State.

*NYSACHO is incorporated as a not-for-profit, non-partisan
charitable organization with 501(c)(3) tax exempt status.*

Lawrence Eisenstein, M.D., F.A.C.P.

**President of the New York State Association of County Health Officials
(NYSACHO)**

& Commissioner of Health, Nassau County

Kind regards from our state's Local Health Officials to Assemblymen Gottfried, Cahill, Hevesi, and distinguished committee members of the New York State Assembly.

My name is Lawrence Eisenstein, Commissioner of Health for Nassau County, and I currently serve as the President of the New York State Association of County Health Officials (NYSACHO). Thank you for the opportunity to present input to this public hearing on the Implementation of the state's Early Intervention Fiscal Agent on behalf of NYSACHO's members at all 58 local health departments in New York State.

Local health departments provide essential, population-based health services that protect all New Yorkers. Examples include but are not limited to control of communicable and vaccine-preventable diseases, prevention of lead poisoning,

maternal child health services, tobacco control efforts, restaurant and camp inspections, and chronic disease prevention.

In most, but not all, of the counties in New York State, responsibility for the local administration of the federally mandated Early Intervention Services Program rests with local health departments. While Early Intervention is not a core public health service, it is a crucial service needed by children between the ages of 0-3 years who have developmental delays or disabilities.

Along with the children and families who need these services, and the providers and State Health Department that partner to provide, administer, and pay for those services, NYSACHO shares the commitment to an Early Intervention system in New York State that is both high quality and viable.

We also believe it is essential that insurers and service providers fulfill their obligations to maximize third party insurance coverage for these services, to relieve the ever increasing fiscal burden that has strained local governments beyond their capacity.

We remain hopeful that a centralized system utilizing a carefully selected fiscal agent will realize significant economies of scale and maximize the collective leverage needed to reduce an unfair burden on taxpayers.

NYSACHO and its members in local health departments stand ready and willing to continue to share with the New York State Department of Health (NYSDOH) and its fiscal agent, PCG, their expertise and knowledge of Early Intervention Program operations in order to more fully implement the transition of certain administrative and fiscal responsibilities from counties to the state, a transition that became effective six months ago.

We know that every level of government has had constraints on their capacity in recent years. Therefore, NYSACHO urges the State Executive and Legislative Branches to ensure that the NYSDOH is provided adequate resources to complete the transition and to sustain its fiscal and administrative infrastructure as the lead agency providing families in our state with the Early Intervention services that they need.

Conclusion

NYSACHO appreciates the challenges that families, providers, insurers, counties, and the NYSDOH have faced during this transition.

As always, NYSACHO and its member local health departments are committed to working with the governor, the legislature, and our local

governments to ensure access to necessary health services for our residents while meeting our obligations to provide core public health services to our communities.