Rhode Island’s Early Intervention program provides special education services to infants and toddlers who have developmental delays or disabilities. Early Intervention is the front door to the state’s public education system and the foundation of the special education system implemented by public schools for children from age 3 to high school graduation. Researchers have found that about one-third of infants and toddlers who received Early Intervention no longer had a developmental delay, disability, or special education need in kindergarten.

Under Part C of the *Individuals with Disabilities Education Act (IDEA)* “Child Find” mandate, states must identify, locate, and evaluate all infants and toddlers with developmental delays or disabilities to determine eligibility for Early Intervention as early as possible. States must serve all eligible infants and toddlers. Rhode Island’s Child Find program is the First Connections home visiting program.

Rhode Island’s Early Intervention program is experiencing a major financial and staffing crisis that is limiting access for infants and toddlers with developmental delays and disabilities. The Rhode Island Early Intervention program has not received a rate increase in 20 years. In fact, Early Intervention programs received rate cuts in 2009 that have not been restored. In 2015, two agencies stopped providing Early Intervention services due to the very low rates that were not sufficient to staff the program. In 2019, a statewide survey of Early Intervention staff, showed that only 28% of staff reported high job satisfaction, 82% planned to leave their jobs if wages did not improve, and 52% had looked for another job in the past six months. In November 2021, a statewide waiting list for Early Intervention was established. As of April 2022, approximately 400 infants and toddlers were on the waiting list for Early Intervention.

Rhode Island’s First Connections program is also experiencing a significant financial and staffing crisis that limits services for children and families. The First Connections program has not received a rate increase in 22 years. Several agencies that provide First Connections services plan to terminate their contract with the state due to lack of funds to adequately staff the program. First Connections programs have an average operating loss for programs of $136.70 per visit. Each year, approximately 60% of all babies born in Rhode Island are identified as being at-risk for poor health and development and are referred to First Connections. In 2020, about 30% of babies received at least one visit from First Connections.

The Early Intervention & First Connections Act will:

1) **Provide a 70% Medicaid rate increase for Early Intervention services.** This increase is needed to offer competitive wages to Early Intervention specialists (family educators, service coordinators, and licensed therapists) so the program can be adequately staffed, and the waiting list can be eliminated. We estimate that $4 million in additional state general revenue would be needed to raise rates to this level.

2) **Provide a 123% Medicaid rate increase for First Connections services.** This increase is needed to offer competitive wages to First Connections staff (nurses, social workers, and community health workers). We estimate that $500,000 in additional state general revenue would be needed to raise rates to this level.
“It has been incredible to see the progress our son has made across the last year! He has grown from a very shy boy at his first visit when he would not even go near our educator to hugging her at his last few meetings! We could not be more thankful for our educator’s care and LOVE for our son and our entire family! It has been a JOY to see our son’s language development progressing!”

Comment on the 2020 Rhode Island Early Intervention Family Survey

“From the start since my son was 18 months old, I believe the lack of consistency in people involved with my son’s case has caused him to not be able to get the most out of this program before he ages out. He would see the same people for a few visits and then be assigned someone new on multiple occasions for various reasons. The new people would essentially have to “start over” to get to know him, in order to help him the best way they knew how. Which would delay the progression that he could have been making.”

Comment on the 2020 Rhode Island Early Intervention Family Survey