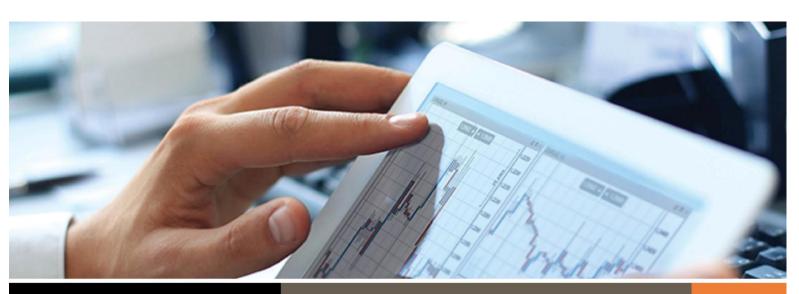


Health and Human Services

<u>Early Childhood Intervention</u> <u>Advisory Committee</u>

August 20, 2025

This summary contains supplemental information from reliable sources where that information provides clarity to the issues being discussed. Power Point tables used in the presentations may also be used in this summary. Names of individuals may be misspelled but every attempt has been made to ensure accuracy. Tables and Text have been used from executive and legislative agencies and departments' presentations and publications.





<u>Early Childhood Intervention Advisory Committee</u> advises the HHSC Early Childhood Intervention (ECI) Services program on developing and implementing policies that constitute the statewide ECI system.

The Early Childhood Intervention Advisory Committee, which is required by Part C of the Individuals with Disabilities Education Act, advises the Texas Health and Human Services Commission Division for Early Childhood Intervention Services on development and implementation of policies that constitute the statewide ECI system. The governor appoints the committee members.

The federal law establishing the system of early intervention programs for infants and toddlers with developmental delays or disabilities is Part C of the Individuals with Disabilities Education Act. In Texas, the Part C program is Early Childhood Intervention. ECI is a division of the Texas Health and Human Services Commission. Each state that operates a Part C program must include as a part of its program an advisory council. Part C of the IDEA calls that council the Interagency Coordinating Council. The HHSC/ECI ICC is the ECI Advisory Committee. The function of the Advisory Committee is to advise and assist HHSC/ECI in its operation of the statewide system of providing ECI services to eligible children and families in Texas. The multidisciplinary and multi-constituency representation on the Advisory Committee contributes to making it an important part of the ECI system. It is ECI's major source of stakeholder input.

Members

Chasey Sanchez, Ph.D., Chair

Program Representative

Texas City

Catherine Carlton, Vice-Chair

Program Representative

Arlington

Guillermo Lopez

Program Representative

Austin

Pattie Rosenlund

Program Representative

Mission

Lori Gabbert Charney

Department of State Health Services -

Maternal and Child Health

Austin

David H. Goff, M.D.

Physician/Pediatrician Representative

Strawn

Audrey K. Jackson

Head Start Representative

San Marcos

Stephanie Klick

State Legislative Representative

Fort Worth



Deborah A. "Debbie" Cohen, Ph.D.

Parent Representative

Austin

Hannah Holmes English

Parent Representative

Houston

Kristina Borenstein Otterstrom

Parent Representative

Houston

Stephanie Perry

Parent Representative

Denton

Patricia Kay Reedy

Parent Representative

Texarkana

Kathryn Shields

Parent Representative

Arlington

Lizzeth Saldana

Parent Representative

San Antonio

Rachel Cerkovnik Bowden

Texas Department of Insurance (TDI)

Representative

Austin

Cynthia (Cindy) Dawn Lee

Public Provider Representative

Wylie

Cynthia (Cal) Azenneth Lopez

Texas Education for Homeless Children and Youth (TEHCY) Representative

Austin

Felicia A. Penn

Department of Family and Protective

Services – Foster Care/Child Protective

Services

San Antonio

Rosalba A. Calleros Ramirez

Advocate Representative

Buda

Ryan David Van Ramshorst, M.D.

HHSC Medicaid/CHIP Representative

San Antonio

Allison Pearce Wilson

Texas Workforce Commission

Representative

Austin

1. Call to order, logistical announcements, and roll call. The meeting was convened by Guillermo Lopez, presiding officer.

2. Consideration of April 30, 2025, draft meeting minutes. The minutes were approved as drafted.

3. Consideration of Officer Election Procedure and election of chair

and vice chair. Using the standard election procedures for all; advisory committees, previously approved, Catherine Carlton was elected chair and Guillermo Lopez was elected vice chair.

4. ECI program updates



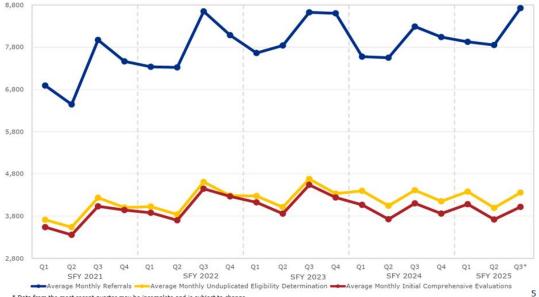
Quarterly data

Children Referred, Evaluated, and Served

	SFY 2021	SFY 2022	SFY 2023	SFY 2024	SFY 2025 Q1	SFY 2025 Q2	SFY 2025 Q3*
Average Monthly Referrals	7,193	7,848	8,046	7,864	7,927	7,852	8,748
Average Monthly Unduplicated Eligibility Determination	3,872	4,189	4,327	4,252	4,381	4,000	4,423
Average Monthly Initial Comprehensive Evaluations	3,735	4,099	4,191	3,939	4,081	3,654	4,018
Average Monthly Enrolled	27,860	30,835	31,980	32,310	32,653	32,322	32,863
Average Monthly Comprehensive Served	30,516	33,732	35,055	35,317	35,701	35,299	35,822
Cumulative Quarterly/Annual Children Served (unduplicated)	60,204	65,584	67,512	67,413	41,778	50,149	59,326

^{*}Data from the most recent quarter may be incomplete and is subject to change.

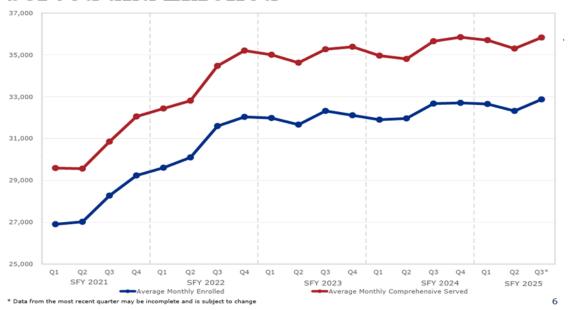
Referrals, Eligibility Determination, Evaluations



* Data from the most recent quarter may be incomplete and is subject to change



Served and Enrolled



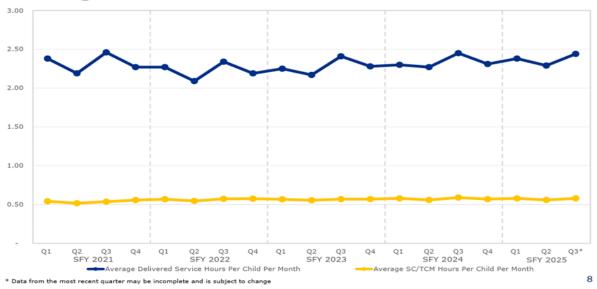
Delivered Services

	SFY 2021	SFY 2022	SFY 2023	SFY 2024	SFY 2025 Q1	SFY 2025 Q2	SFY 2025 Q3*
Average Monthly Delivered Service Hours (not parent-arranged)	70,999	74,954	79,708	82,589	85,071	80,755	87,438
Average Service Hours Per Child Per Month	2.33	2.22	2.27	2.33	2.38	2.23	2.44
Average Monthly Service Coordination (SC)/ Targeted Case Management (TCM) Hours	6,052	7,970	9,186	9,964	10,279	9,315	10,169
Average SC/TCM Hours Per Child Per Month	0.54	0.57	0.57	0.57	0.58	0.56	0.58

^{*}Data from the most recent quarter may be incomplete and is subject to change.



Average Service Hours Per Child Per Month



ECI Children with Medicaid Coverage

	SFY 2025 Q1	SFY 2025 Q2	SFY 2025 Q3*	SFY 2025 Year-to-Date
Average Monthly Medicaid-Enrolled	22,005	21,580	22,013	21,883
Average Monthly Comprehensive Served	35,701	35,299	35,822	35,653
Percent Medicaid	61.64%	61.13%	61.45%	61.38%

^{*}Data from the most recent quarter may be incomplete and is subject to change.

Highlights of the presentation included:

• 5% increase in referrals compared to last year, but a slight dip (1-2%) in eligibility determinations and evaluations.



- Average monthly service hours are up 1.7% year-over-year; case management hours remain stable at about 0.5 hours per child per month.
- Highlights of Medicaid enrollment: year-to-date, about 61.4% of children served also had Medicaid coverage.

Training and outreach

SMILE Webinars Series for Meaningful Interagency Learning and Education (SMILE) webinar most recent: July 2025: Texas Homeless Network. HHSC hosted bi-monthly SMILE webinars to build interagency learning, with recent sessions focusing on homelessness and relevant supports.

Coaching the Coach training Coaching the Coach is a full-day workshop facilitated by the state office Quality Assurance team. To date, the QA team has:

- Conducted 10 workshops at nine venues
- Reached 31 programs and hundreds of providers

There is a post-workshop survey, and final workshops and recorded webinars are available.

"Coaching the Coach" workshops were held statewide with positive feedback; the last 4 workshops are to wrap up by September 30 with recordings planned for FY26.

Recently Attended Conferences

Name	Date	Location
Texas Speech-Language-Hearing Association 69th Annual Convention & Exhibition	May 1 – 3	San Antonio
Low Vision Conference 2025	May 16	Austin
Texas Family Medicine	June 6 – 8	San Antonio
2025 Texas Collaborative for Healthy Mothers and Babies Summit	June 16 - 17	Austin
Texas Rising Star Early Educator Conference	June 30 – July 2	Houston



Texas Newborn Screening Summit	July 15	Dallas
2025 Texas System of Care and Community Resource Coordination Groups Conference	July 15 – 16	Austin
20 th Annual Statewide Parent to Parent Conference	July 18 – 19	San Marcos
Work Force Solutions: Child Care Directors and Teachers Symposium	July 25 – 26	Round Rock
Texas Rising Star Early Educator	July 30 – August 1	Dallas

Upcoming Conferences

Name	Date	Location
2025 Texas Child Care Administrators Conference	August 25 – 27	San Antonio
2025 Texas Conference on Ending Homelessness	September 17 – 19	Austin
Texas Nurse Practitioner Annual Conference	September 25 – 28	Dallas
Texas Pediatric Society Annual Meeting	October 16 – 19	Round Rock
48 th Annual National Association of Social Workers Texas State Conference	October 16 – 18	Virtual
Texas Association for the Education of Young Children Annual Conference	November 6 – 8	Round Rock
2025 Southwest Orientation and Mobility Conference	November 7 – 8	Virtual
Texas Occupational Therapy Association Annual Conference	November 14 – 15	San Marcos
2025 Partners in Prevention Conference	November 18 – 20	Austin



These upcoming conference participation will further strengthen ECI's relationships and awareness efforts especially through fall.

July Child Find Forum Occurred on July 16, 2025, and included: Presentation: Partnering with Families: Navigating Difficult Conversations about Developmental Delays, Jessica Mueller, Region 4 Education Service Center and Parent panel: Susana Perez, Joanna Adame, Catherine Carlton. The Child Find Forums continue to share best practices and include impactful parent panels.

HHSC and TEA Joint Guidance Effective July 30, 2024, Texas Education Agency amended rules in the Texas Administrative Code, Title 19, Part 2, Chapter 89 related to eligibility of children under age 3 who are deaf or hard-of-hearing or have a visual impairment. These new rules impact both ECI and local school district staff. •HHSC ECI is working with TEA to create several joint guidance resources including a document, flow charts and a joint training.

- "Coaching the Coach" workshops held statewide with positive feedback; last 4 workshops to wrap up by September 30, recordings planned for FY26.
- Active outreach through appearing at multiple conferences for healthcare, family medicine, and childcare professionals.
- Upcoming conference participation will further strengthen ECI's relationships and awareness efforts especially through fall.
- Child Find Forums continue to share best practices and include impactful parent panels.
- Joint guidance with TEA on eligibility for children under 3 with hearing or vision impairments, with resources and joint training coming next fiscal year.

Updated qualifying and related degree requirements for early intervention specialist credentialing. HHSC ECI convened EIS Credentialing Workgroup in fiscal year 2024. The workgroup recommended HHSC ECI add new qualifying and related degrees that meet the minimum requirements to be eligible for EIS credentialing. HHSC ECI has conducted research on existing curricula for the recommended degrees.



Definitions

A qualifying degree: Directly focuses on early childhood development and provides a strong foundation in understanding infant and toddler growth, learning, and development.

A related degree: Provides a useful background for working with children and families but may not specifically focus on infants and toddlers.

HHSC ECI designated a degree as "qualifying" or "related" if at least three universities that offered the degree met the following standards:

- Qualifying Degree: 15 semester course credit hours of coursework relevant to early childhood intervention and three semester course credit hours specific to early childhood development or early childhood special education
- Related Degree: 15 semester course credit hours of coursework relevant to early childhood intervention.

Approved Degrees

Qualifying Degrees:

- Child Life
- Infant and Toddler Studies
- Infant and Toddler Development

Related Degrees:

- Child Development
- Early Childhood Education (EC-6 or Pre-K-grade 3)
- Family Sciences
- Family Studies
- Nursing
- Rehabilitation Therapy

Changes were made to EIS qualifying and related degrees and the list was moved to HHS site, allowing easier updates. There were added qualifying degrees of Child Life, Infant and Toddler Studies, Infant and Toddler Development. New related degrees include Child Development, Early Childhood Education, Family Sciences, Nursing, Rehabilitation Therapy. These new degrees are effective immediately and listed on the credentialing website.

Fiscal year 2025 Family Outcomes Survey



Every year, ECI surveys a sample of enrolled families. The survey focuses on the perspective of the family and how helpful ECI services have been for them. Topics include:

- Knowing your rights.
- Communicating your child's needs.
- Helping your child develop and learn.

Survey results are part of our federal annual performance report and inform program improvement efforts.

Family Selection

- Includes a stratified random sample of families from all 40 programs and all geographic regions.
- Families with a child enrolled in ECI services for at least six months may be included in the random sample.
- The number of families who receive the survey is proportionate to the size of the program.

Survey Process

- Survey has been provided online since 2020.
- Families were given the option to receive their survey directly from the ECI state office by email or from local programs staff via text or QR code.
- Survey available in both English and Spanish.
- The FY 2025 survey period was June 9 to July 21.

Survey Infographic Flyer

The state office has created flyers since 2021.

Goal is to help families understand why we want them to take the survey.

We add family comments to infographic to show how families feel about their services.



ECI WANTS TO
HEAR FROM
FAMILIES
Why does ECI need to hear from families?

Every year, Texas Health and Human Services Early Childhood Intervention (ECI) asks enrolled families to give feedback on how bes

What do we want?

- In 2024, nearly 90% of families said ECI helped them:
- Know their rights and their child's rights while enrolled in ECI.
 Learn how to communicate their child's needs and family priorities
- Discover ways to help their child learn and grow every day.

Take the ECI Family Outcomes Survey.
Scan or click the QR code to fill out a short survey.
If you need help or have questions, please call
512-424-6580.





Impact of the Family Outcomes Survey

Fiscal Year	Surveys Received	Surveys Completed	Response Rate
2023	5,385	2,551	47%
2024	4,804	2,649	55%
2025	4,172	2,386	57%

Early Intervention Personnel Retention Grant project--The grant period ends on October 31, 2025. Upcoming activities include:

- Connected with ECI subrecipients who received stipends to ensure all funds will be expended.
- Planning for sustainability of evidence-based retention strategies.
- Evaluating the success of the grant.
- Reporting on all grant activities to the Office of Special Education Programs.

Professionalism, Engagement, Empowerment, and Resource Network -- There are 300 members in the PEER Network. The PEER Network recently:

- Hosted the first webinar in a two-part series on the Battelle Developmental Inventory – 3rd Edition.
- Held a discussion on coaching families in virtual settings.
- Held a discussion on documentation of services.

HHSC ECI is coordinating the transition of PEER Network leadership to committee participants. The PEER Network planning committee has asked that all ECI programs designate at least one participant.

Evaluation The University of Texas El Paso is developing an evaluation survey to measure success of the grant. The survey aims to identify how this grant supported ECI subrecipients and personnel in:

- Implementing evidence-based retention strategies.
- Increasing their knowledge of evidence-based practices and policy for retention.
- Identifying ways this project will positively benefit children and families receiving ECI services.

The final report on all grant activities is due on December 31, 2025. The final report must cover the entire grant period (November 1, 2020 – October 31, 2025) and include:



- An executive summary of all grant activities.
- Complete data supporting the project objectives.
- Actual budget expenditures

Preschool Development Grant

- In January, ECI was awarded \$2.3M for CY25.
- \$1M was awarded to 36 ECI programs for use in FY25.
- In July, ECI was awarded an additional \$1.8 million (\$4.1M total for CY25).
- \$1.8M is allotted to 38 ECI programs for use in FY26.
 - o Staff recruitment, retention, and mentoring stipends
 - Training for childcare and early learning programs
 - o ASQ kits for childcare programs
 - o New DAYC-2 tools for ECI programs
 - New Live, virtual training workshops
 - New ECI statewide recruitment marketing campaign

Preschool Development Grant supports workforce efforts, trainings, ASQ screenings, and provider recruitment initiatives; also funds resource kits and training tools for ECI programs.

Texas Early Learning Council 2024-2026 Texas Early Learning Strategic Plan has four focus areas

- Family access, navigation, and engagement
- Workforce recruitment, retention, and support
- Local systems and partnership building
- Data and system coordination

Texas Early Learning Strategic Plan

Action 2.4.4: HHSC ECI will continue the Professionalism Engagement Empowerment Resources (PEER) Network for early intervention specialists and service coordinators.

- The PEER Network has 300 active members.
- HHSC ECI continues to host quarterly PEER Network meetings.

Texas Early Learning Council Home

Action 2.4.6: HHSC ECI will continue to develop and make available trainings on children with special needs, including autism, and on managing challenging behavior in young children.



- Since April 2023, ECI programs have provided 85 trainings on creating classrooms for children of all abilities.
- Since May 2024, HHSC ECI continues to offer four trainings on engaging children with autism and managing challenging behavior.
- Trainings are located on the ECI Archived Webinars webpage . 39ECI Request for Applications...: Learning Stream ::..

Timeline for ECI request for applications HHS0014626 and HHS0015907

RFA Timeline

- The ECI Request for Applications (RFA HHS0014626) Notices of Award were sent in June 2025.
- The ECI Targeted Request for Applications (RFA HHS0015907) Notice of Award was sent in July 2025.
- HHSC is on track to have contracts executed by September 1, 2025.

Update on 89th Texas Legislature Regular Session, 2025: House Bills 117, 426, 1052, 2310, 3963, 4099, 5629; Senate Bills 1 and 1044

General Appropriations Act (S.B. 1)

The Legislature approved full ECI funding request: \$200M+ for FY26, \$209M+ for FY27, supporting growth and introducing new caseload targets. To keep up with projected caseload growth, HHSC requested additional funding as an exceptional item.

	FY 2026	FY 2027
ECI Services	\$200,344,681	\$209,590,683
ECI Respite	\$400,000	\$400,000

The Legislature also set performance targets for ECI.

	FY 2026	FY 2027
Average Monthly Number of Children Served	36,841	37,482
Average Monthly Cost Per Child – State and Federal Expenditures	\$440.54	\$440.54
Average Monthly Number of Hours of Service Delivered Per Child Per Month	2.35	2.35



Passed Bills with Direct Impact

- H.B. 117: Relating to the establishment of the governor's task force on the governance of early childhood education and care.
- H.B. 2310: Relating to developing a strategic plan for the improvement and expansion of early learning and educational opportunities for young children with disabilities.
- H.B. 3963: Relating to an early childhood integrated data system.
- H.B. 5629: Relating to the occupational licensing of military service members, military veterans, and military spouses

Passed Bills with Indirect Impact dystrophy.

- H.B. 1052: Relating to health benefit plan coverage of telemedicine, teledentistry, and telehealth appointments with an originating site or distant site located outside this state.
- H.B. 426: Relating to Medicaid and child health plan program coverage and reimbursement for childhood cranial remolding orthosis.
- H.B. 4099: Relating to the treatment of a patient by a physical therapist without a referral.

Federal fiscal year 2025 Individuals with Disabilities Education Act Part C Grant award and federal determination—Texas meets federal requirements and purposes of IDEA Part C. and was awarded \$52,273,960 in Part C funding for federal fiscal year 2025, up slightly from \$51,405,881 in federal fiscal year 2024.

Discussion. No discussion

5. <u>Presentation: Autism in ECI from Referral through Transition</u>. The ECI process begins with a referral. Anyone can refer a child to ECI and a diagnosis is not required, but when present should include ICD-10 code to four characters (e.g. F84.0 autistic disorder). ECI will then reach out to the family.

Eligibility Determination Every child who is referred to ECI has the right to a comprehensive evaluation. Eligibility is determined by an interdisciplinary team. ECI



does not diagnose autism spectrum disorder but help identify concerns and support families seeking diagnosis.

Some diagnoses are automatic qualifiers. No formal evaluation tool is needed, which speeds up the enrollment process. Autism is a qualifying diagnosis for Texas ECI.

Children without an autism diagnosis may qualify based on developmental delay. Administration of the state-approved evaluation tool, or qualitative determination of delay.

When the Child Does Not Qualify ECI staff makes appropriate referrals for supports and services. Families can re-refer at any time and the program staff may follow up with the family.

Autism Risk Identification

Autism Spectrum Disorder (ASD) Risk Identification	All enrolled children
Child is 18 months or older and has not been screened for ASD by another entity, and at least one of the following applies: □ There is a family history of ASD	18 months or older.
 □ Child has lost previously acquired speech or social skills □ Child has social, emotional, or behavior concern with □ Language delay or atypical speech and/or □ Cognitive delay □ No risk factors are indicated at this time 	ldentifies risk factors for autism.
□ Risk factors are present: Discuss early screening and recommend autism screening by physician □ Refer to physician for ASD Screening OR □ ECI provider will complete M-CHAT-R Date M-CHAT-R completed Results Referral for ASD evaluation indicated? □ Yes □ No	Complete autism screening or refer to physician.

(From the ECI Needs Assessment, Identification, and Referral Form)

Modified Checklist for Autism in Toddlers - Revised (MChat.pdf)

- State-approved autism screening tool
- Parent interview format
- For toddlers 16-30 months
- Positive screen refer for diagnostic testing
- The service coordinator supports the family throughout the process.



Individualized Family Service Plan (IFSP) ECI professionals ask family about:

- Routine daily activities.
- Child's participation in activities.
- Developmental strengths and needs.
- Family concerns and priorities.
- Case management needs.

Developmental goals are based on this information. Services are recommended to meet goals, not based on a diagnosis.

Service Delivery

- Family-centered.
- Services provided in the natural environment.
- Intervention provided through typical family routines using the coaching approach.
- ECI supports the parent-child relationship.

ECI Services and Providers (ECI services are provided by licensed or credentialed professionals)

- Naturalistic Developmental Behavioral Interventions
- Service coordination
- Specialized skills training
- Occupational and speech therapy
- Behavioral intervention
- Nutrition services
- Counseling
- Family education

Ongoing Monitoring When new autism needs are identified providers and staff:

- Develop new or modify existing goals.
- Modify services or add new services.
- Complete screenings or make referrals as needed.
- Document changes at an IFSP review.

Transition Children exit ECI services when they turn 3 years old. ECI assists families to locate support based on child needs and parent priorities. ECI identifies children with autism as potentially eligible for early childhood special education and works with local school districts to assist in transitioning to Part B services.



HHSC Webinars to Support ECI Service Providers

Practical Strategies for Working with Children with Autism Series

- Establishing Relationships and Effective Coaching
- Structuring the Environment
- Embedding Learning into Daily Routines

Genetics Series

- Supporting Individuals with Autism and Intellectual or Developmental Delays
- Autism Spectrum Disorder: The Diagnostic Journey
- The Role of Genetics in Autism Spectrum Disorder

Challenging Behaviors Series:

- Part 1: The Functions of Behavior
- Part 2: Teaching New Skills
- Part 3: Before and After Challenging Behavior

Best Practices for Including Children with Autism

SMILE Session: Children's Autism Program

Updates on Care and Research for Children with Autism Spectrum Disorders

Discussion. There was no discussion.

6. Member reports (Local program activities, , parent activities, Inter/intra-

agency partners' activities). Members did not inform listeners who they represented.

- Any Baby Can reported increased referrals, enrollments, and children served in Travis and Hays County through Q3 and Q4.
- Staff retention has improved, leading to more experienced clinicians and providers.
- Uptick in use of screening tools (M-CHAT) and telehealth requests noted by programs led by Dr. Sanchez, with telehealth especially useful during family illnesses.
- Referrals are up as expected in Q3.
- Easter Seals conducted its 47th Annual Telethon, increasing community visibility and generating referrals; highlighted the ongoing connection with graduated ECI families.



- The upcoming third annual Help Me Grow summit will engage local businesses in early childhood systems, aiming to provide materials and resources for early service access.
- Parent representatives mostly expressed appreciation and positive feedback for ECI, with no major new updates shared.
- Several agency representatives gave brief updates:
 - Texas Department of Insurance: No updates.
 - City of San Antonio Head Start: Funding remains steady; one-time funds received for nutrition services allowing program expansion.
 - Department of Family and Protective Services: Working on compliance with HB 3963 and improving data sharing.
 - Medicaid CHIP: Highlighted upcoming advisory committee session focused on Medicaid-related legislation.
 - Texas Workforce Commission: Approved new funding allocations and targets for FY26, with funding increases but rising costs leading to slightly fewer children to be served. Launched a statewide RFA for professional development on inclusion of children with disabilities, including undiagnosed needs, and improving rate determination for providers requiring accommodations
- **7**, **Public comment**. No public comment was offered.
- **8. Planning for next meeting**. Next meeting scheduled for November 12, 2025 at 1:30.
- **9. Adjourn**. There being no further business, the meeting was adjourned.

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