

2025 -- H 5462

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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2025

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A N A C T

RELATING TO HEALTH AND SAFETY -- MATERNAL AND CHILD HEALTH SERVICES  
FOR CHILDREN WITH SPECIAL HEALTHCARE NEEDS-EARLY INTERVENTION  
PROGRAM FOR DEVELOPMENTALLY DISABLED INFANTS

Introduced By: Representatives Tanzi, Casimiro, Donovan, McGaw, Ajello, Knight,  
Giraldo, Felix, Batista, and Cruz

Date Introduced: February 12, 2025

Referred To: House Finance

It is enacted by the General Assembly as follows:

1 SECTION 1. Legislative findings.

2 The general assembly finds and declares the following:

3 (1) Rhode Island has long been committed to delivering high-quality services to support  
4 positive early childhood development and learning of children with developmental delays and  
5 disabilities under Part C and Part B, Section 619 of the federal Individuals with Disabilities  
6 Education Act ("IDEA") from infancy to kindergarten entry.

7 (2) Early identification and delivery of high-quality early childhood IDEA services to  
8 children with developmental challenges, developmental delays, and disabilities can improve  
9 educational outcomes, reduce long-term costs of special education, and maximize the long-term  
10 potential of children succeeding in school and life.

11 (3) Effective early childhood IDEA services can help children make substantial  
12 developmental progress. In Rhode Island, two (2) out of three (3) children with disabilities who  
13 entered preschool below age expectations substantially increased their acquisition of knowledge  
14 and skills to close or narrow the gap with same-age peers.

15 (4) The Rhode Island Early Intervention program established pursuant to § 23-13-22,  
16 managed by the RI Executive Office of Health and Human Services, is the state's comprehensive,  
17 coordinated, multidisciplinary, interagency system that provides early intervention services for  
18 infants and toddlers with developmental delays and disabilities and their families, as described and

1 partially funded through Part C of the federal Individuals with Disabilities Education Act.

2 (5) The Rhode Island Department of Education oversees the state's early childhood special  
3 education services providing free, appropriate, public education to all eligible children ages three  
4 (3) to five (5) with developmental delays and disabilities, partially funded through a preschool  
5 formula grant under Part B, Section 619 of the IDEA.

6 (6) Currently in Rhode Island, there is a strict cut off at a child's third birthday of Part C  
7 Early Intervention services. For children enrolled in Early Intervention who have spring or summer  
8 birthdays, this cutoff can lead to a gap of services before they start the early childhood special  
9 education services in September. Gaps are also created when a child's transition from Part C to Part  
10 B services is delayed for other reasons.

11 (7) Federal law allows states to create an option for families to extend Early Intervention  
12 services beyond a child's third birthday. See 34 C.F.R. § 303.211.

13 (8) Six (6) states (CO, CT, IL, MD, MO, TN) and the District of Columbia (DC) have  
14 implemented federally-approved frameworks to allow families to extend Early Intervention beyond  
15 the child's third birthday. This helps ensure continuity of services, fewer gaps in services and more  
16 students starting school in September with services in place.

17 (9) Under 34 C.F.R. § 303.734, the federal government reserves fifteen percent (15%) of  
18 any Part C appropriations in excess of four hundred sixty million dollars (\$460,000,000) for states  
19 with federally-approved Early Intervention extension options. In Federal Fiscal Year 2023, the  
20 federal government appropriated five hundred forty million dollars (\$540,000,000) for Part C,  
21 meaning that the funds reserved for Early Intervention extension states totaled twelve million  
22 dollars (\$12,000,000).

23 SECTION 2. Section 23-13-22 of the General Laws in Chapter 23-13 entitled "Maternal  
24 and Child Health Services for Children with Special Health Care Needs" is hereby amended to read  
25 as follows:

26 **23-13-22. Early intervention program for developmentally disabled infants.**

27 (a) The ~~director~~ secretary of the ~~department of human services~~ executive office of health  
28 and human services (EOHHS) shall ensure that all developmentally disabled infants from birth to  
29 three (3) years of age shall be enrolled in the early intervention program. Beginning July 1, 2025,  
30 EOHHS shall create a plan to allow children to remain in early intervention until the September  
31 after their third birthday, as allowed by federal law 20 U.S.C. § 1435(c), including seeking any  
32 federal approvals necessary or desirable to implement this new policy. By January 1, 2028, EOHHS  
33 shall begin allowing children who turn three (3) years old between April 1, 2028, and August 31,  
34 2028, to remain in early intervention until September 1, 2028. Beginning January 1, 2029, EOHHS

1 [shall allow children who turn three \(3\) in between January 1, 2029, and August 31, 2029, to remain](#)  
2 [in early intervention until September 1, 2029. Beginning September 1, 2029, EOHHS shall allow](#)  
3 [all eligible children to remain in early intervention until the September 1 following the child's third](#)  
4 [birthday.](#) Regulations governing the delivery of services under this program, including eligibility  
5 criteria, shall be promulgated by the department of human services, with the advice of the  
6 interagency coordinating council; provided, however, that all regulations promulgated by the  
7 department of health shall remain in full force and effect until the time they are replaced by  
8 regulations promulgated by the ~~department of human services~~ [EOHHS](#). The regulations shall  
9 stipulate, at a minimum, the following provisions that are consistent with the intent of this chapter:

10 (1) The ~~director~~ [secretary](#) shall develop and maintain a procedure for the earliest possible  
11 identification and efficient referral of all developmentally disabled infants;

12 (2) The ~~director~~ [secretary](#) shall ensure that every infant identified and referred to this  
13 program is enrolled as soon as possible after birth; and further, that for infants placed on a waiting  
14 list for facility based group programming, an early intervention program shall be made available  
15 within a thirty (30) day period from the time a need is identified in the individual program plan;

16 (3) Unless parents refuse the service, the home visiting component of the program shall  
17 commence as soon as the infant has been identified as having a possible developmental disability;

18 (4) Any parent(s) who is/are dissatisfied with decisions or termination of service or with  
19 practices and procedures of a particular agency or the ~~department of human services~~ [EOHHS](#) shall  
20 notify the ~~director of the department of human services~~ [secretary of EOHHS](#) in writing within thirty  
21 (30) calendar days and the complaint shall be reviewed in accordance with ~~department of health~~  
22 [EOHHS](#) policy and procedures, as amended, and the Administrative Procedures Act, chapter 35 of  
23 title 42.

24 (5) An early intervention program for purposes of this section shall mean a comprehensive  
25 array of educational, developmental, health, and social services provided on a calendar year basis  
26 to eligible infants, children, and their families as specified in program regulations.

27 (b) Within ninety (90) days after October 1, 2004, an evaluation plan describing outcome  
28 measures that document the program's successes and shortcomings from the previous fiscal year  
29 shall be submitted to the speaker of the house of representatives, the president of the senate and the  
30 house oversight committee and the governor and the interagency coordinating council.  
31 Development of the plan shall be made in consultation with the entities with expertise in this area  
32 and the interagency coordinating council. The plan shall include a memorandum of understanding  
33 between the department of health, department of human services and the department of elementary  
34 and secondary education that demonstrates coordination and continuity of early intervention

1 services among these departments.

2 (c) Within six (6) months after January 1, 2005 where prescribed outcomes documented in  
3 the evaluation plan have not been accomplished the responsible agencies shall submit written  
4 explanations for the shortfalls, together with their proposed remedies. The report shall also include  
5 evaluation of the progress of the coordination efforts between the department of health and the  
6 department of human services and the department of elementary and secondary education and the  
7 interagency coordinating council and shall include any recommendations regarding modifications  
8 of the reimbursement mechanisms of this chapter.

9 (d) Within twelve (12) months after August 1, 2005 a final report shall include the progress  
10 of the coordination efforts between the department of health and the department of human services  
11 and department of elementary and secondary education, interagency coordinating council and shall  
12 include any recommendations regarding modifications to the comprehensive array of educational,  
13 developmental, health and social services provided on a calendar year basis to eligible infants,  
14 children and their families as specified in an early intervention system.

15 (e) All reports or documents required to be produced pursuant to 20 U.S.C. § 1471 et seq.,  
16 shall be submitted to the speaker of the house, president of the senate and the chairpersons of the  
17 appropriate house of representatives and senate oversight committees and the governor and the  
18 interagency coordinating council. Adherence to such plans and reporting requirements, and budgets  
19 and the timely achievement of goals contained therein shall be considered by the oversight  
20 committees of the house of representatives and senate, among other relevant factors, in determining  
21 appropriations or other systemic changes.

22 SECTION 3. This act shall take effect upon passage.

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EXPLANATION  
BY THE LEGISLATIVE COUNCIL  
OF

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RELATING TO HEALTH AND SAFETY -- MATERNAL AND CHILD HEALTH SERVICES  
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- 1           This act would provide that the early intervention program for developmentally disabled
- 2 infants be under the jurisdiction of the executive office of health and human services (EOHHS).
- 3           The act would also extend eligibility for early intervention services.
- 4           This act would take effect upon passage.

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