Commission on Equitable Early Childhood Education and Care Funding

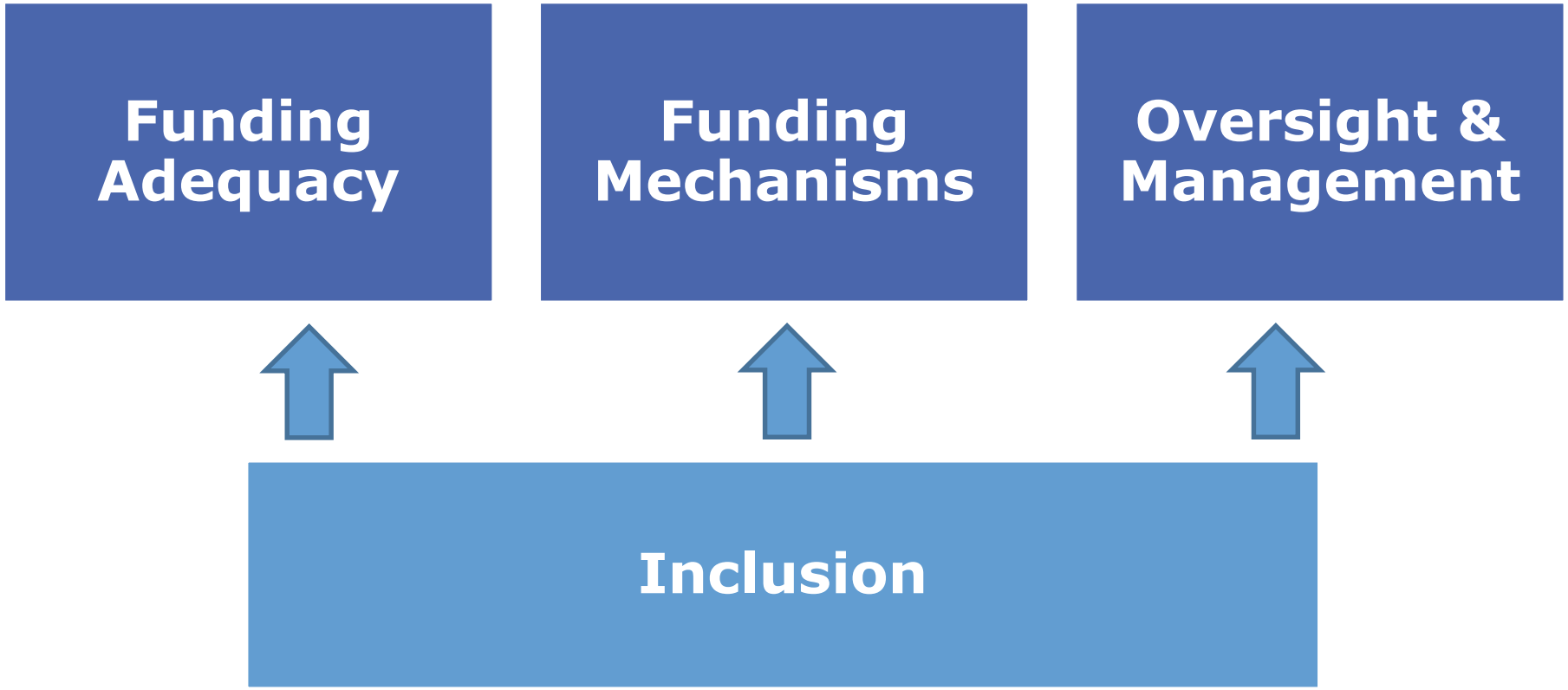
Inclusion Working Group

Meeting 4 – 6/4/2020

Inclusion Meeting 4 Agenda

Item	Time
Working Group timeline and path forward	1:00 – 1:10
Understand M&O and Mechanisms direction and implications on our work	1:10 – 1:40
Visioning future mechanisms for EI and ECSE	1:40 – 2:30
EI and ECSE Adequacy Updates	2:30 – 2:50
Next Steps	2:50 – 2:55
Public Comment	2:55 – 3:00

Commission Working Groups



Inclusion Charge

Goal: *Inform the work of other Working Groups and the full Commission as it relates to children receiving special education and early intervention services, in alignment with the Commission's guiding principles*

Key Questions to Answer:

- What is the cost for identifying students in need of special services and for serving children in inclusive environments? (Funding Adequacy)
- How should funding sources particular to Special Education / Early Intervention interact with other funding sources? (Funding Mechanism)
- How will funding particular to Special Education/ Early Intervention move from various sources to recipients? (Funding Mechanism)
- How do we ensure funding promotes seamless supports from identification to receiving services? (All three working groups)
- How do we ensure transparency, efficiency, effectiveness, and greater coordination in the system to enable state-level and community-level planning and accountability?

Working Group Decision Points

Anticipated Key Topics	**Full Commission**	**Funding Adequacy**	**Management & Oversight**	**Funding Mechanisms**	**Inclusion**
June	M&O and/or Funding Mechanism initial recommendations	Cost Model Validation	State Agency: Consolidation vs. Creation	Mechanisms appropriate for key services	Mechanisms Input
July	Funding Adequacy initial recommendations	Cost Model Validation Process to periodically re-evaluate adequacy	State vs. Regional Capacities	Full Mechanism System Build-out	M&O / Mechanisms Inputs Funding Adequacy Input
August	Inclusion, M&O, and/or Mechanism recommendations	Funding sources	Future M&O / Mechanisms System Build-out		
Sept/Oct		*Iterations and responding to Commission feedback as needed*			

Workplan and Timeline (revised)

Approximate Timeline	Meta-Topics
February (completed)	• Validate Work Plan and Timeline • Review current modeling and understand current mechanisms, structures
~~March~~ April - June	• Develop future M&O / funding mechanism system requirements • Develop process for cost modeling
July - Aug	• Analyze future system options • Make M&O / mechanisms recommendations • Gather and analyze cost modeling data
Sep - Oct	• Finalize cost of adequacy • Discuss interdependencies with other working groups and validate potential recommendations

Toward this timeline, today is successful if we:

- Understand where M&O and Mechanisms Working Groups are heading and implications for our thinking
- Understand our current state in enough detail to envision a better future M&O and Mechanism system
- Establish recommendations for mechanism improvements to inform Mechanisms Working Group
- Move forward in our plan to calculate adequacy for EI and ECSE

M&O and Funding Mechanisms Working Group Updates

Management & Oversight Charge

Goal: *recommend improved ECEC management structures and responsibilities, in alignment with Guiding Principles*

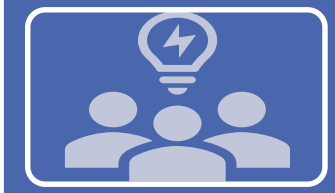
Key Questions to Answer:

- Who sets the vision and maintains and updates policies and priorities for the overall ECEC system in Illinois?
- Who allocates funds and distributes them?
- Who holds recipients accountable for what they do with funding?

Management & Oversight Capacities

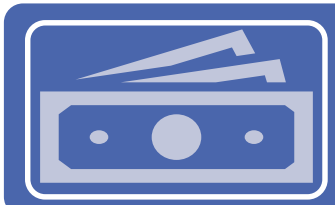
Inclusion has recommended a focus on transitions across services

What are the state and regional capacities that a successful ECEC management and oversight system must possess?



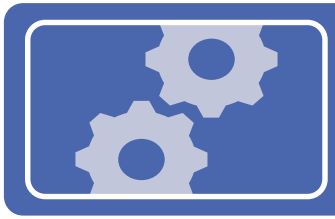
Policy Leadership

- Set & maintain statewide vision, goals, and priorities
- Set quality and early learning standards and guidelines
- Develop and implement system policies, rules, and regulations (including budget) based on family, community, and provider perspectives and needs in response to gaps
- Engage policymakers
- Partner and coordinate with other child- and family-serving state agencies and ECEC system advisory bodies



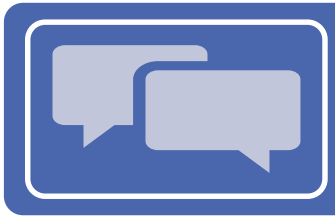
Funding & Oversight

- Use data and community perspectives to inform the budgeting process
- Make funding allocation decisions
- Administer funding distribution
- Conduct monitoring and compliance oversight



Infrastructure

- Develop leadership capacity to implement improvements to the ECEC system
- Collect, analyze, and evaluate systemwide data
- Manage system level continuous quality improvement
- Administer professional development and workforce development



Communications

- Report systemwide data
- Provide stakeholders with clear information and engage stakeholders in the decision-making process
- Create opportunities for input from families and providers

Management & Oversight Objectives

Inclusion has recommended a focus on transitions across services

A management and oversight structure that possesses the previously described capacities will meet the following objectives:

Plan Cohesively for Sustainable ECEC	• Unify vision, decision making, communication • Unify the definition of quality • Design program models and funding streams to respond to family and community needs and system gaps and inequities • Meet regulatory requirements • Navigate political and administrative changes
Improve Access to High Quality & Ensure Equitable Outcomes	• Ensure sufficient capacity at regional/local level • Use data to inform decisions on resource allocation to meet system and community goals, and prioritize resource distribution to achieve equitable outcomes for children • Fund and incentivize high quality ECEC services
Improve System Transparency, Accountability & Efficiency	• Unify monitoring, data collection & reporting • Send funding allocations to providers with time to plan • Implement systems to support simplified funding distribution and reduce duplication of effort
Respond to Family Need and Earn Public Trust	• Unify family engagement and community systems strategies • Implement accountability that is focused on family perspectives and data

Reminder: anything we create for recommendations will be assessed using these objectives.

State level M&O – a framework

A Framework for Choosing a State-Level Early Childhood Governance (BUILD 2013):

1. **Coordination among agencies**, where administrative authority is vested in multiple agencies that are expected to collaborate with each other
2. **Consolidation**, in which multiple programs are administered by the same agency, particularly state education agencies; and
3. **Creation**, the creation of a new agency focused on early education and care

Regarding administration of ECEC M&O capacities:

At the state level, should this capacity be coordinated or centralized for all ECEC services?

If centralized, within a current agency or a creation of a new one?

Outcomes of most recent meeting M&O meeting

- **Centralization of ECEC management & oversight** has greater potential to fulfill the capacities of a successful management & oversight system than coordination across multiple agencies

- Having **ECEC centralized enables deeper collaboration** across other areas of the early childhood ecosystem, public and private

Next Steps

- Consider state role in implementing capacities and corresponding regional/local role
- Analyze centralization in the context of agency creation or consolidation into an existing agency
- Determine and discuss implementation phase-in priorities

What input will we need to give to the M&O Working Group?

- Should EI and ECSE management & oversight be centralized?
- If Management & Oversight Working Group chooses consolidation of ECEC services within an existing state agency or creation of a new state agency, should EI and ECSE join other ECEC services there and what would be the implications?
- What capacities of EI and ECSE management & oversight should any regional/local ECEC entities fulfill? To what extent is this already being fulfilled by existing regional/local entities, and to what extent should that be consolidated within any created regional/local ECEC entities if they are to be created?

Funding Mechanism Working Group Charge

Goal: *recommend improved funding mechanisms to move funding from various sources to recipients, in alignment with Guiding Principles*

Key Questions to Answer:

- **How will funding move** from various sources to recipients?
- How will **recipients of funding be determined**?
- How do funding systems/structures **interact with accountability systems/structures**?
- How can **funding mechanisms be improved** to support the Commission's guiding principles?
- What **funding innovations** could increase efficiency of existing funding?

Funding Mechanism Objectives

Inclusion has recommended a focus on transitions across services

Stability and sustainability

- Support long term planning with funding allocation commitment durations
- Release funds to service providers predictably with consideration to annual planning
- Build and use state, regional, and local infrastructural capacity to support ECEC services
- Create conditions for all types of providers in the mixed delivery system to sustain high quality services

Equitable access to high quality ECEC

- Structure allocation methods to prioritize equitable distribution of and access to services
- Support and incentivize high-quality, effective service delivery
- Ensure specific consideration for program start-up, maintenance, and innovation
- Include resources to support Continuous Quality Improvement at the program and system levels

Transparency, accountability, and efficiency

- Simplify access to funding for families and providers and reduce administrative burden
- Create clear, accessible communication on allocation process across the ECEC system
- Make clear how mechanisms are monitored and overseen
- Unify or sync funding distribution timelines

Responsiveness to community and family need

- Ensure Funding allocation considers individual community needs and context
- Incentivize flexible use of funds to meet community needs and context
- Continue support across the birth-5 continuum and a mixed delivery system

Likely no option will meet all these objectives; the working group will prioritize what matters most during its evaluation of potential funding mechanism options.

Key Discussion

What are the advantages and disadvantages of leaving blending funding sources to providers as opposed to the system level?

The Working Group believes there is value to blending funding sources upstream at the system level.

Where is the Funding Mechanism Working Group now?

We have **identified attributes and most appropriate use of primary funding mechanisms** in use today:

- **Formula** may be most stable and sustainable, but if not fully funded, it may be difficult to disburse equitably. It may be useful to fund fully operating providers (i.e., graduating from start-up to a level where formula is appropriate). It may be difficult to implement in a mixed delivery system.
- **RFP/competitive bid** seems most appropriate for incubation and start-up purposes. It is also appropriate for differentiating between varying levels of quality among providers. It could help get providers into a formula.
- **Certificates and vouchers** seem to work best when there is not an intent to support all children and families in the state (e.g., Family, Friend, and Neighbor care)
- **Tuition/fees** seem appropriate to use in tandem with the above three mechanisms

Intended purpose and use of funds should be considered when selecting a funding mechanism.

Based on Mechanisms Working Group's next steps, what input do we need to provide?

- **TODAY:** What future mechanism(s) should be considered for "controllable" EI and ECSE funding and why?
  - Should the existing mechanism for EI state appropriations be changed?
  - What mechanism can best support a mixed delivery system for ECSE? Should this remain within EBF?

- **NEXT MEETING:** Should EI and/or ECSE state funding be blended with other ECEC funds?

Why focus on EI State Appropriations and EBF?

*Directional assessment of level of flexibility**

Service	Funding Source	Est Funding ($mils)	Funding Category	Associated State Agency	Funding Mechanism	Total Funding available	Funding recipients	Funding allocation amounts	Funding disbursement mechanism	Requirements for use of funds
ECSE	IDEA Part B Section 619	$18	Federal	ISBE	Formula	No	No	No	No	No
ECSE	Evidence-Based Funding (EBF)	$75	State	ISBE	Formula	Yes	Yes	Yes	Yes	Yes
ECSE	Medicaid Reimbursements	unknown	Federal	HFS	Reimbursement	No	No	No	No	No
ECSE	Local Funding	unknown	Local	ISBE	N/A	No	No	No	No	Partial
EI	State Appropriations	$108	State	IDHS	Contracts with providers (blended with	Yes	Yes	Yes	Yes	Yes
EI	IDEA Part C	$17.5	Federal	IDHS	Contracts with Providers	No	TBD	TBD	TBD	No
EI	Medicaid Reimbursements	$50	Federal	HFS	Reimbursement	No	No	No	No	No
EI	Family Participation Fees (Private or Public Insurance, Family Fees)	$5	Private	IDHS	Direct Billing	No	No	No	No	No
EI/ECSE	Headstart	TBD	Federal	IDHS (Head Start Office)	Federal Contracts	No	No	No	No	No

*Under development

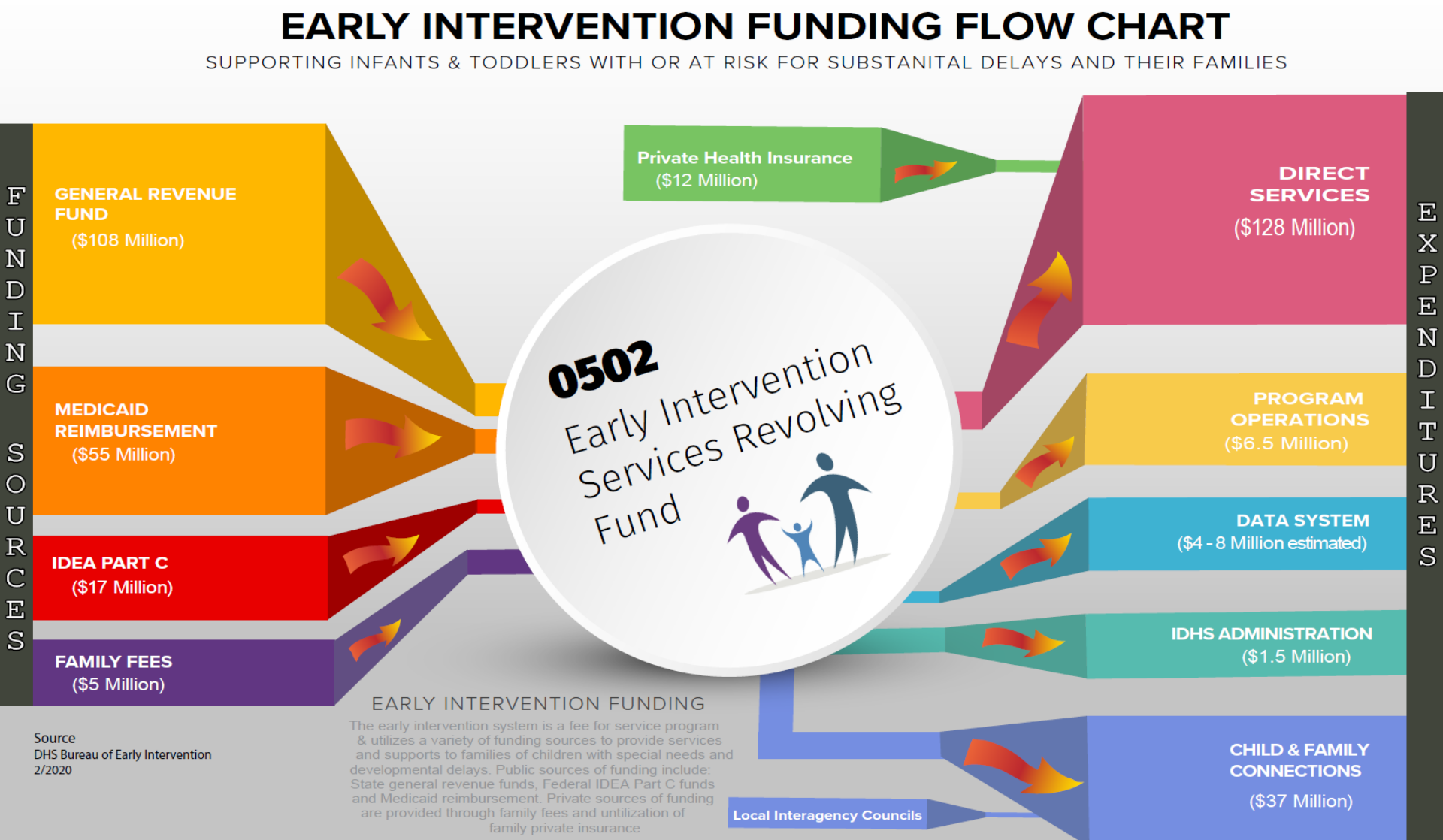
Funding Mechanisms for Early Intervention and Early Childhood Special Education

Getting to a vision for funding mechanisms

- Reminder: How does the funding flow today?
- Recap: What are the major system challenges for families and providers?
- What are the priorities for the future system?
- How can funding mechanisms be used to incentivize those priorities?
- What federal requirements will constrain our recommendations?

Early Intervention Mechanisms

EI Funding Flow



Overview of the EI system

EI system challenges: *what have we heard?*

For families

- Multiple providers in homes
- Lack of collaborative team planning and service delivery
- Difficulty getting providers in high needs neighborhoods
- Transitions to receiving programs can be challenging

For providers

- Low funding levels for services, especially indirect services
- For CFCs, timing of payments
- Heavy administrative burden and issues with provider payment consistency

For the system

- More families need services
- Equitable distribution of services across diverse populations
- 1/3 of providers (800+) received <$2500 from July 2019 – February 2020

What else?

What are the potential priorities for an EI Funding Mechanism?

*The Commission's role is **not to propose service delivery change**. However, **we can incentivize known priorities** through our mechanism recommendations.*

System improvement priorities in the Illinois Interagency Council on Early Intervention's Service Delivery Approaches Workgroup recommendations report: **accessible, accountable, collaborative, developmentally- focused, and family-centered.**

Specific recommendations related to funding:

- Incentivize effective training, collaboration, and smooth family service delivery
- Incentivize recruitment and retention of qualified service providers
- Incentivize providers to serve in high needs neighborhoods
- Incentivize smooth transitions between early intervention and receiving programs

Reactions?

What funding mechanism(s) for EI will best meet objectives and incentivize priorities?

- Early Intervention General Revenue Funds
- Medicaid Reimburse-ment (EI)
- IDEA Part C federal funds
- Family Fees
- Private Health Insurance

What mechanism(s) for EI funding can best meet the objectives of a funding mechanism done well?

Should the EI funding mechanism change – and if so, to what? Or should rules for reimbursement change?

- Incentivize effective training, collaboration, and smooth family service delivery
- Incentivize recruitment and retention of of qualified service providers
- Incentivize providers to serve in high needs areas
- Incentivize smooth transitions between early intervention and receiving programs

What are some potential options for EI funding mechanism?

We have **identified attributes and most appropriate use of primary funding mechanisms** in use today:

- **Formula** may be most stable and sustainable, but if not fully funded, it may be difficult to disburse equitably. It may be useful to fund fully operating providers (i.e., graduating from start-up to a level where formula is appropriate). It may be difficult to implement in a mixed delivery system.
- **RFP/competitive bid** seems most appropriate for incubation and start-up purposes. It is also appropriate for differentiating between varying levels of quality among providers. It could help get providers into a formula.
- **Certificates and vouchers** seem to work best when there is not an intent to support all children and families in the state (e.g., Family, Friend, and Neighbor care)
- **Tuition/fees** seem appropriate to use in tandem with the above three mechanisms

Intended purpose and use of funds should be considered when selecting a funding mechanism.

Early Childhood Special Education Mechanisms

ECSE Funding Flow

Purpose	• Supports educational services for children with disabilities ages 3 to 5 so that they may receive a high-quality education
Population served	• Ages 3-5 with IEPs • # of children served = ~24,000 (2018)
Governance	• ISBE
Funding Sources	• IDEA Part B Section 619 = ~$18M through formula • Evidence-Based Funding (EBF) = ~$75M* through formula • Federal Medicaid Reimbursements = ??? • Grant & Local Funding = ???

*Adequacy amount; not funding. Each LEA receives a different portion of state funding vs local contributions based on their ability to pay (property tax value)

ECSE system challenges: *what have we heard?*

For children and families

- Not served where they are
- Challenging transitions

For providers

- Inadequate targeted funding
- No direct funding outside of districts
- Funding not aligned with needs of children served

For the system

- Confusing accountability for children in CBOs outside of their home district boundaries
- Lack of understanding of true costs

What else?

What are the priorities for an ECSE Funding Mechanism?

- Promote serving children at their location
- Equitably allocate resources based on individual student needs
- Promote equitable child find practices
- Promote continuity of services
- Must NOT increase burden on providers
- Provide transparency on true cost of services vs funding available
- Support family engagement

Reactions? What else?

What funding mechanism(s) for ECSE will best meet objectives and incentivize priorities?

Evidence-Based Funding

IDEA Part B Sec. 619 federal funds

Medicaid Reimburse-ment (ECSE)

Local Funds

What mechanism(s) for ECSE funding can best meet the objectives of a funding mechanism for ECSE?

Should this continue to be a funding formula?

If so, should it remain a part of EBF?

- Promote serving children at their location
- Equitably allocate resources based on individual student needs
- Promote continuity of services
- Must NOT increase burden on providers
- Provide transparency on true cost of services vs funding available

Do we agree that this should be done via formula?

We have **identified attributes and most appropriate use of primary funding mechanisms** in use today:

- **Formula** may be most stable and sustainable, but if not fully funded, it may be difficult to disburse equitably. It may be useful to fund fully operating providers (i.e., graduating from start-up to a level where formula is appropriate). It may be difficult to implement in a mixed delivery system.
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Intended purpose and use of funds should be considered when selecting a funding mechanism.

Should ECSE remain in EBF and be revised, or should ECSE be allocated through a separate formula?

Keep within EBF	Separate from EBF
PROS • Aligns with mandate for LEA responsibility • "Forces" local contribution from LEAs • Simplicity for LEAs • Formula approach has predictability	PROS • Providers don't "see" funding explicitly for Students with IEPs in EBF – bring attention to the true cost by separating • Opportunity to be more specific in accounting for variety of student needs • May be better able to accommodate CBOs with a new approach
CONS • Would need to revise EBF adequacy target to incorporate true cost of IEP services (formula does not currently capture the costs accurately)	CONS • Would add complexity to how LEAs receive funding

Adequacy: Progress and Path Forward

Our understanding of "Adequacy" for Early Childhood Care and Education (ECEC)

- ECEC is not adequate today
  - Too few served and not enough capacity
  - Under-resourced programmatic offerings compared to student needs
  - Underpaid staff

- Adequate $\neq$ All things for all children

- ECEC Adequacy = *the funding standard for quality that allows programs to meet children and family needs*

$360M is included specifically for ECSE in CBOs, about 3% of the draft cost model

TOTAL STATEWIDE COST		
Center-based		$5,085,236,569
Infants	$638,217,659	
Toddlers	$1,117,696,797	
Two year olds	$1,071,763,574	
Preschool	$2,257,558,540	
School-based Settings (3-and 4-year olds only)		$2,393,401,283
Additional Costs for Dual Language Learners (in CBOs)		$48,270,065
Additional Costs for Special Needs/Inclusion (in CBOs)		$359,385,413
Licensed Family Child Care		$1,746,786,704
Relative Care		$292,074,395
Direct Services Total		$9,925,154,429
Infrastructure (8% of direct service costs)		$794,012,354
Home Visiting*		$531,217,701
TOTAL COST		**$11,250,384,485**

**Home Visiting model already incorporates infrastructure costs.*

What do we know is missing or needs to be refined?

- Incremental costs for ECSE in District settings – *discuss today and next meeting*
- Validation of incremental ECSE costs in CBOs – *discuss today and next meeting*
- Early Intervention Services – *in upcoming two meetings*

Volunteers from this Working Group (thank you!) have helped move adequacy costing work forward

Plan to produce a cost of adequacy - ECSE

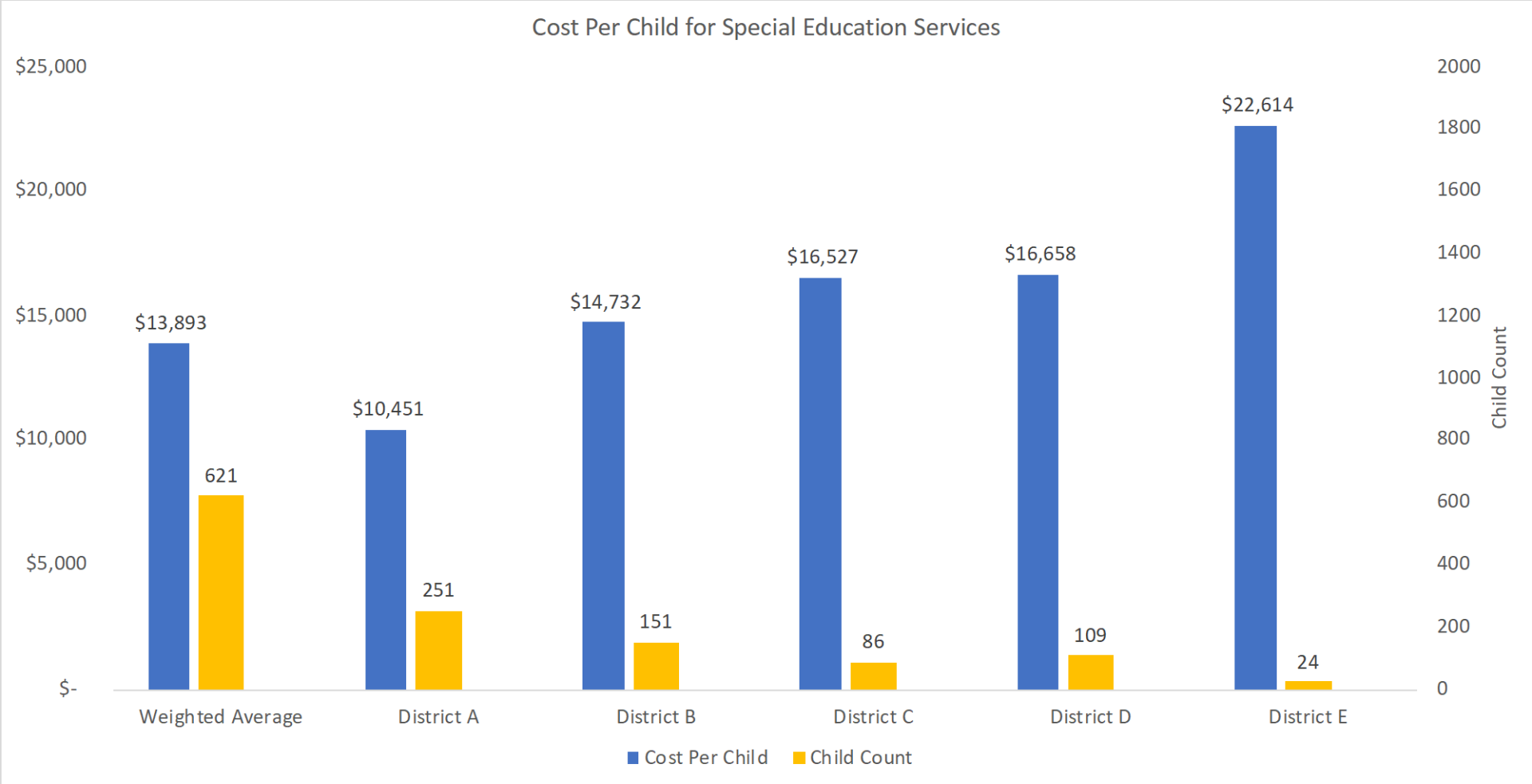
Develop incremental costs for ECSE in Districts

- Develop survey template
- Gather real cost data from volunteer sample districts
- HERE → Analyze and summarize
- Focus group for "high quality"
  (Is current spending "adequate"? If not, what are the gaps?)

Validation of incremental ECSE costs in CBO's

- Utilize district data
- Review with focus group of CBOs

ESCE costs – what are we seeing in data?



In what models should **ECSE services** be provided?

Current Cost Model Assumptions:

- Comprehensive CBO + additional funding at a flat rate of $15K for moderate or severe needs
- Note: no assumption was made on model but current approach would imply full day supports, as all children in CBOs are in full-day, full-year programs. The district pre-k cost estimate, therefore, may have to be increased.

Eligibility Factors

Child age	Family income level
Geography	Pre-determined criteria for IEP/IFSP
Family work schedule	Other?

State-Funded Program Models

Part-day School-year	School-day School-year	Full Work-day Full-year
Intensive home visit	Comprehensive / wraparound services	Services to support special needs

DRAFT plan to produce a cost of adequacy - EI

Identify categories of providers

- Independent direct-service providers (sole proprietors, individual contractor)
- Small practice/business providers (small business likely with 1099 contractors)
- Large practice/providers (such as Easter Seals or Lurie; likely W2 employees)

Use available data to estimate the count of providers by type and count of children served by each

HERE

Build cost categories (pro forma) by provider type

Gather cost information via survey of sample providers

Consolidate survey responses and analyze to estimate cost

Next Steps

Next Steps

- Prepare update for June 16th Commission Meeting
- Next Meeting:
  - Solidify funding mechanism initial recommendations for EI and ECSE following Mechanism Working Group decisions
  - Consider management & oversight structure for EI and ECSE in light of M&O Working Group decisions
  - Report back on adequacy findings
- Adequacy
  - ECSE – further analysis of data and implications
  - Move forward with EI surveys

THANK YOU

Appendix: Supplemental Slides

ECSE Services

- Services provided by school districts and cooperatives for Pre-K students with IEPs
  - CBOs provide services under the purview of districts

- Various program formats
  - Blended classrooms
  - Self-contained classrooms
  - Itinerant services
  - Therapeutic play groups
  - Child care
  - Walk-in therapy

- Types of personnel providing services
  - Teachers
  - Teacher Assistants
  - Clinicians

- Other service aspects
  - Transportation requirements
  - 70/30 blended requirement

ECSE Funding Sources

Purpose	• Supports educational services for children with disabilities ages 3 to 5 so that they may receive a high-quality education
Population served	• Ages 3-5 with IEPs • # of children served = ~24,000 (2018)
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ECSE funding oversight

2020 allocations

IL State Board of Education
Total Budget: $12.6B

- $615M
  - Early Childhood Block Grant
    - Preschool for All (PFA)
    - Preschool for All Expansion
    - Prevention Initiative (PI)
  - Early Childhood Special Education (ECSE)
- $12B
  - K-12 Evidence Based Funding
  - Special Ed.
  - Student Assessments
  - Nutrition
  - Title I CACFP / School Lunch

IL Dept. of Human Services
Total Budget: $6.8B

- $740M
  - Child Care Assistance Program (CCAP) for 0-5 y.o.
  - Migrant & Seasonal Head Start
  - Healthy Families
  - Parents Too Soon
- $6B
  - Early Intervention
  - Better Birth Outcomes
  - Family Case Mgmt.
  - High Risk Infant Follow Up
  - Refugee & Immigrant Services
  - SNAP
  - WIC
  - TANF
  - Etc.

IL Dept. of Child & Family Services
Total Budget: $1.3B

- $27M
  - Licensing
- $1.2B
  - Child Protective Services
  - Adoption & Guardianship
  - Institution and Group Home Services
  - Investigative Services

Federal Sources

- $380M
  - Head Start & Early Head Start
  - MIECHV

Within ECEC funding scope

Source: IL FY 2017 Budget; assuming funding spread evenly across 0-5 y.o., 6-12 y.o.

EI Services

- Access:
  - Families access the Part C EI Program through one of 25 local Child and Family Connections (CFC) offices
  - They are assigned a Service Coordinator (sometimes called a Case Manager in other social service programs)
- Services:
  - The EI Program provides 16 EI services and other family supports through a variety of individual and agency providers, some not-for-profit and some for-profit
  - The providers enroll and sign provider agreements with DHS
  - The most frequently provided services are speech therapy and developmental therapy

EI funding sources

Purpose	• The Early Intervention (EI) program provides screening and treatment for developmental disabilities for children from birth to age 3
Population served	• Ages 0-3 • # of children served = ~42,000 (2018)
Governance	• IDHS
Funding Sources	• State Appropriations = ~$108M • IDEA Part C = ~$17.5M • Medicaid Reimbursements = ~$50M • Family Participation Fees = ~$5M

EI funding oversight

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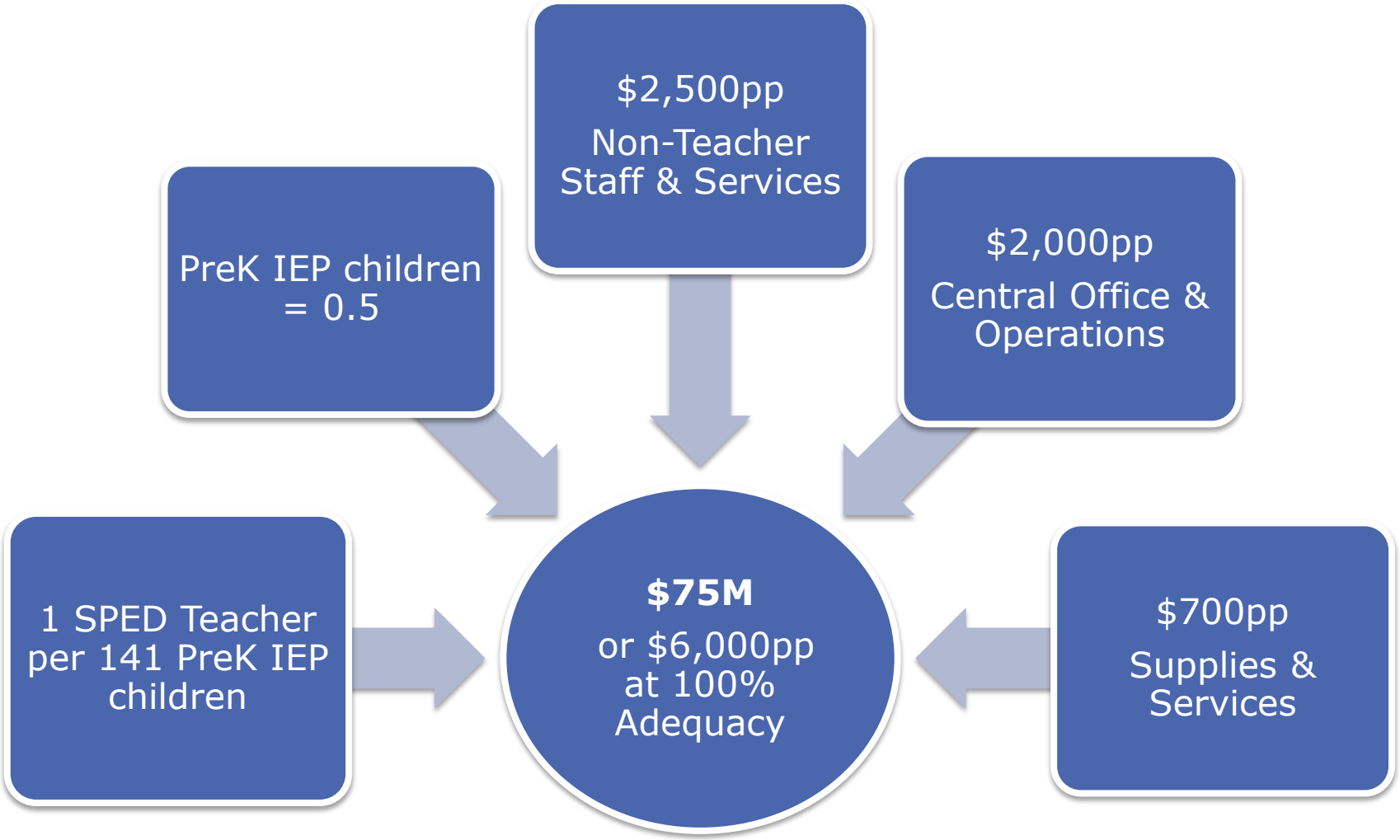
Within ECEC funding scope

Source: IL FY 2017 Budget; assuming funding spread evenly across 0-5 y.o., 6-12 y.o.

First stop: Evidence Based Funding

The K12 Funding Formula (EBF) includes Pre-K students with IEPs. What is included in EBF for ECSE services?



Cannot possibly represent adequacy