

By: Senator(s) Boyd, Williams

To: Public Health and Welfare

SENATE BILL NO. 2329

1 AN ACT TO RECONSTITUTE THE EARLY INTERVENTION TASK FORCE WITH  
 2 A GOAL TO COLLABORATE WITH THE STATE AGENCY COORDINATING PART C OF  
 3 IDEA TO DESIGN A NEW SERVICE DELIVERY MODEL AND MAKE CHANGES TO  
 4 THE EARLY INTERVENTION PROGRAM; TO SET THE TASK FORCE'S DUTIES; TO  
 5 REQUIRE THE TASK FORCE TO PREPARE A FINAL REPORT TO THE  
 6 LEGISLATURE; TO REQUIRE THE STATE AGENCY COORDINATING PART C OF  
 7 IDEA TO PREPARE AND DELIVER A REPORT THAT PROVIDES FOR POSSIBLE  
 8 SOLUTIONS; TO DISSOLVE THE TASK FORCE UPON PRESENTATION OF THE  
 9 REPORT; TO AMEND SECTION 41-87-9, MISSISSIPPI CODE OF 1972, TO  
 10 CONFORM TO THE PROVISIONS OF THE ACT; AND FOR RELATED PURPOSES.

11 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

12 **SECTION 1.** (1) To complete the work it commenced in 2023,  
 13 the Early Intervention Task Force created by Chapter 487, Laws of  
 14 2023, and dissolved December 1, 2023, is hereby reconstituted to  
 15 serve in an advisory capacity to assist the state agency  
 16 coordinating Part C of IDEA in implementing a new service delivery  
 17 model. The goal of the task force shall be to collaborate with  
 18 the state agency coordinating Part C of IDEA to design a new  
 19 service delivery model and make changes to the Early Intervention  
 20 Program.

21 (2) The members of the task force shall be as follows:



22 (a) The Chairmen of the Education Committees of the  
23 Mississippi Senate and the Mississippi House of Representatives,  
24 or his or her designee from their respective committee membership;

25 (b) The Chairmen of the Appropriations Committees of  
26 the Mississippi Senate and the Mississippi House of  
27 Representatives, or his or her designee from their respective  
28 committee membership;

29 (c) The Chairmen of the Public Health Committees of the  
30 Mississippi Senate and the Mississippi House of Representatives,  
31 or his or her designee from their respective committee membership;

32 (d) One (1) member of the Mississippi State Senate, to  
33 be named by the Lieutenant Governor; and one (1) member of the  
34 Mississippi House of Representatives, to be named by the Speaker  
35 of the House of Representatives, who are interested in early  
36 intervention issues;

37 (e) The State Health Officer of the Mississippi  
38 Department of Health or a designated deputy;

39 (f) One (1) designee who is a direct service provider  
40 in the First Steps Early Intervention Program, to be named by the  
41 State Health Officer;

42 (g) One (1) faculty member from the Social Science  
43 Research Center (SSRC) at Mississippi State University, to be  
44 named by the Director of the SSRC;

45 (h) One (1) developmental-behavioral pediatrician with  
46 expertise in early childhood systems building, to be named by the



47 Vice Chancellor of the University of Mississippi Medical Center;

48 (i) One (1) general pediatrician, to be named by the  
49 Mississippi Chapter of the American Academy of Pediatrics;

50 (j) One (1) clinical psychologist with expertise in  
51 social-emotional health of infants and toddlers, to be named by  
52 the Vice Chancellor of the University of Mississippi Medical  
53 Center;

54 (k) One (1) school psychologist employed by a school  
55 district, to be named by the Mississippi Association of  
56 Psychologists in the Schools;

57 (l) One (1) early interventionist/development  
58 therapist, to be named by the State Health Officer;

59 (m) The Executive Director of the Mississippi Early  
60 Learning Alliance;

61 (n) One (1) family advocacy representative to be  
62 appointed by the Executive Director of the Mississippi Coalition  
63 for Citizens with Disabilities;

64 (o) One (1) parent representative with current  
65 experience with early intervention to be appointed by the  
66 Executive Director of the Mississippi Coalition for Citizens with  
67 Disabilities;

68 (p) One (1) faculty member from the College of Health  
69 Sciences at Jackson State University, to be named by the president  
70 of such university;



71 (q) One (1) pediatrician, to be named by the  
72 Mississippi Region of the National Medical Association;

73 (r) The Executive Director of the Division of Medicaid,  
74 Office of the Governor, or the executive director's designee; and

75 (s) The Director of the State Department of Education's  
76 Early Childhood Education Office, or such director's designee.

77 (3) A faculty member from each of the universities within  
78 the institutions of higher learning with an early childhood  
79 development program or early intervention program may be named by  
80 the president of each university to assist the task force. In  
81 addition, the Executive Director of the Center for Mississippi  
82 Health Policy shall aid the task force.

83 (4) The task force shall meet within forty-five (45) days of  
84 the effective date of this act and shall commence its  
85 responsibilities set out in subsection (5) of this section.

86 (5) Specifically, in collaboration with the state agency  
87 coordinating Part C of IDEA, the task force shall:

88 (a) Review billing and reimbursement processes and  
89 rates for early intervention services in Mississippi and in other  
90 states, to ensure a timely receipt of payment to providers. In  
91 performing this function, a recommendation shall be made to the  
92 Legislature by January 1, 2025, on a more efficient system for  
93 providing compensation to providers and for billing and collecting  
94 from third-party payors;



95           (b) Evaluate early intervention service delivery  
96 models, including a hub or hybrid model involving university  
97 participation and determine how this model may impact the training  
98 of students and delivery of services to members of the eligible  
99 population. In performing this function, a recommendation shall  
100 be made to the Legislature that will offer a service delivery  
101 structure to enhance the efficient and effective delivery of  
102 quality services to the eligible population; and

103           (c) Review any other matters related to the above  
104 issues or related to early intervention services.

105           (6) The state agency coordinating Part C of IDEA and the  
106 task force may request the assistance of the Social Science  
107 Research Center at Mississippi State University, the Mississippi  
108 Early Learning Alliance or any other related entity or  
109 organization with expertise in early intervention services.

110           (7) The members of the task force shall elect a chair from  
111 among the members. The task force shall develop and report its  
112 findings and recommendations for proposed legislation to the  
113 Legislature in response to the proposal of the state agency  
114 coordinating Part C of IDEA to make changes to the service  
115 delivery structure for the program and changes to the way the  
116 state pays service providers and recoups payments from third-party  
117 payors, which shall be due to the task force and Legislature by  
118 December 1, 2024. A quorum of the membership shall be required to  
119 approve any final report and recommendation. Members of the task



120 force shall be reimbursed for necessary travel expense in the same  
121 manner as public employees are reimbursed for official duties from  
122 any available funds and members of the Legislature shall be  
123 reimbursed in the same manner as for attending out-of-session  
124 committee meetings.

125 (8) The Joint Legislative Committee on Performance  
126 Evaluation and Expenditure Review shall provide necessary clerical  
127 support for the meetings of the task force and research support as  
128 needed for the preparation of the report. Proposed legislation  
129 shall be prepared by the Legislative Services Offices of the  
130 Senate and House as requested.

131 (9) The task force shall be dissolved upon presentation of  
132 its report.

133 **SECTION 2.** Section 41-87-9, Mississippi Code of 1972, is  
134 amended as follows:

135 41-87-9. (1) A statewide system of coordinated,  
136 comprehensive, multidisciplinary, interagency programs providing  
137 appropriate early intervention services to all eligible infants  
138 and toddlers and their families, including eligible Indian infants  
139 and toddlers and their families on reservations, shall include the  
140 following minimum components:

141 (a) Eligibility criteria and procedures including a  
142 definition of the term "developmentally delayed" that will be used  
143 by the state in carrying out programs under this chapter;



144 (b) Timetables for ensuring that appropriate early  
145 intervention services will be available to all eligible children  
146 in the state, including Indian infants and toddlers on  
147 reservations;

148 (c) A timely, comprehensive, multidisciplinary  
149 evaluation of the functioning of each infant and toddler with a  
150 disability in the state, and a family-directed assessment of the  
151 resources, priorities and concerns of the family and the  
152 identification of the supports and services necessary to enhance  
153 the family's capacity to meet the developmental needs of their  
154 infant or toddler with a disability;

155 (d) For each eligible child, an individualized family  
156 service plan including service coordination (case management)  
157 services in accordance with such service plan. The individualized  
158 family services plan shall be in writing, done in accordance with  
159 Part C regulations, and contain a statement of the natural  
160 environments in which early intervention services shall  
161 appropriately be provided, as well as all components listed in the  
162 Part C regulations;

163 (e) A comprehensive interagency child find system that  
164 includes a system for making referrals to service providers that  
165 includes timelines and provides for participation by primary  
166 referral sources;

167 (f) A public awareness program focusing on early  
168 identification of infants and toddlers with disabilities,



169 including preparation and dissemination by the lead agency to all  
170 primary referral sources of information materials for parents on  
171 the availability of early intervention services, and procedures  
172 for determining the extent to which primary referral sources,  
173 especially hospitals and physicians, disseminate information on  
174 the availability of early intervention services to parents of  
175 infants with disabilities;

176 (g) A central directory which includes early  
177 intervention services, resources and experts available in the  
178 state and research and demonstration projects being conducted in  
179 the state;

180 (h) A comprehensive system of personnel development,  
181 including the training of paraprofessionals and the training of  
182 primary referral sources respecting the basic components of early  
183 intervention services available in the state, that is consistent  
184 with the comprehensive system of personnel development described  
185 in Part B of IDEA and that may include:

186 (i) Implementing innovative strategies and  
187 activities for the recruitment and retention of early intervention  
188 service providers;

189 (ii) Promoting the preparation of early  
190 intervention providers who are fully and appropriately qualified  
191 to provide early intervention services under this chapter;

192 (iii) Training personnel to work in rural areas;

193 and





194 (iv) Training personnel to coordinate transition  
195 services for infants and toddlers with disabilities from an early  
196 intervention program in the early intervention system to a  
197 preschool program under Section 619 of IDEA;

198 (i) A single line of responsibility in the lead agency  
199 for carrying out:

200 (i) The general administration and supervision of  
201 programs and activities receiving assistance under Part C of IDEA,  
202 and the monitoring of programs and activities used by the state to  
203 carry out this chapter, whether or not such programs or activities  
204 are receiving assistance made available under Part C, to ensure  
205 that the state complies with Part C;

206 (ii) The identification and coordination of all  
207 available resources within the state from federal, state, local  
208 and private sources;

209 (iii) The assignment of financial responsibility  
210 in accordance with state and federal law to the appropriate  
211 agencies;

212 (iv) The development of procedures to ensure that  
213 services are provided to infants and toddlers with disabilities  
214 and their families in a timely manner pending the resolution of  
215 any disputes among public agencies or service providers;

216 (v) The resolution of intra- and interagency  
217 disputes; and



218 (vi) The entry into formal interagency agreements  
219 that define the financial responsibility of each agency for paying  
220 for early intervention services (consistent with state law) and  
221 procedures for resolving disputes and that include all additional  
222 components necessary to ensure meaningful cooperation and  
223 coordination;

224 (j) A policy pertaining to contracting or making  
225 arrangements with service providers to provide early intervention  
226 services in the state as a part of the early intervention system  
227 in accordance with state law, state regulation and Part C of IDEA;

228 (k) A procedure for timely reimbursement of funds used  
229 in accordance with Section 41-87-15;

230 (l) Procedural safeguards with respect for programs  
231 participating in the early intervention system;

232 (m) Policies and procedures relating to the  
233 establishment and maintenance of standards to ensure that  
234 personnel necessary to implement the early intervention system are  
235 adequately and appropriately prepared and trained including:

236 (i) The establishment and maintenance of standards  
237 which are consistent with any state-approved or recognized  
238 certification, licensing, registration or other comparable  
239 requirements which apply to the area in which such personnel are  
240 providing early intervention services; and

241 (ii) To the extent such standards are not based on  
242 the highest requirements of the state applicable to a specific



243 profession or discipline, the steps the state is taking to require  
244 the retraining or hiring of personnel that meet appropriate  
245 professional requirements in the state;

246 (n) A system for compiling data on the number of  
247 infants and toddlers with disabilities and their families in the  
248 state in need of appropriate early intervention services, the  
249 numbers of such infants and toddlers and their families served,  
250 the types of services provided, and other information required by  
251 the U.S. Secretary of Education, or state regulation.

252 (2) By December 1, 2024, the state agency coordinating Part  
253 C of IDEA shall prepare and deliver to the Mississippi Legislature  
254 and Early Intervention Task Force a plan for service delivery of  
255 IDEA Part C services that shall (a) recommend to the Legislature a  
256 more efficient system for providing compensation to providers and  
257 for billing and collecting from third-party payors; and (b)  
258 recommend a service delivery model which includes a hub or hybrid  
259 model that could include university participation and evaluate how  
260 this model may impact the training of students and delivery of  
261 services to members of the eligible population. In performing  
262 these functions, the agency shall collaborate with the Early  
263 Intervention Task Force in developing the recommendations required  
264 by this subsection.

265 This subsection (2) shall stand repealed on December 1, 2024.

266 **SECTION 3.** This act shall take effect and be in force from  
267 and after July 1, 2024.

