

**STATE OF HAWAII**  
**DEPARTMENT OF HEALTH**  
P. O. Box 3378  
Honolulu, HI 96801-3378  
doh.testimony@doh.hawaii.gov

**Testimony COMMENTING on H.B. 918 H.D. 1**  
**RELATING TO EARLY INTERVENTION**

REPRESENTATIVE SYLVIA LUKE, CHAIR  
HOUSE COMMITTEE ON FINANCE

Hearing Date: March 1, 2017

Room Number: 308

1 **Fiscal Implications:** This bill proposes a general fund appropriation for the Early Intervention  
2 Section (EIS) of the Department of Health (DOH) for procurement of a web-based early  
3 intervention (EI) data system and for the maintenance and training required to support the web-  
4 based data system.

5 **Department Testimony:** We appreciate the intent of this bill proposing a general fund  
6 appropriation for the EI web-based data system, but defer to the Governor's Executive Budget  
7 request and to the DOH's appropriations and personnel priorities.

8 EIS provides EI services for children age 0-3 years with developmental delays or at  
9 biological risk for developmental delays, as mandated by the federal law Part C of the  
10 Individuals with Disabilities Education Act (IDEA). Approximately 3,500 children each year  
11 receive EI services through 20 EI Programs that are State-operated or contracted providers for  
12 specified geographical areas. Services include care coordination; family training, counseling,  
13 home visiting; nutrition; occupational therapy; physical therapy; psychology; social work;  
14 special instruction; speech therapy; and other services. Studies have shown the benefits of EI  
15 services to children and families and the economic advantages of quality EI services.

16 The original data system was developed for New Mexico's EI system in 2000, and  
17 modified by EIS in 2007 for Hawaii use. The current EIS database is out-of-date by national  
18 standards, with lack of a web-based data system. Other statewide EI programs in 34 states have  
19 web-based data systems.

1           The proposed data system will support children/families in receiving timely EI services  
2 that are needed to support the child's development. The data system will have a complete child  
3 record for planning and provision of services in a single data system, instead of the current  
4 fragmented record in separate databases or paper records. A child's services will be tracked as to  
5 when services are due, which will support service delivery; the current database does not have a  
6 tracking system. The proposed data system will allow for more frequent or timely monitoring  
7 which may include review for appropriate services; this will improve the current annual  
8 monitoring by an external EIS team that reviews paper records onsite at each EI program.

9           The proposed database will increase the efficiency and quality in providing EI services,  
10 through streamlining program and administrative processes, automating processes that are  
11 currently done by paper or manually, and improving accountability. It will reduce inefficiencies  
12 in areas that include: troubleshooting and working around operational problems, time-consuming  
13 process of consolidating data from 20 EI programs into a single central database, duplicate data  
14 entry in different databases, manual labor-intensive Medicaid reimbursement process, and  
15 cumbersome contract tracking and billing reconciliation.

16           EIS has conducted a software assessment and feasibility study to examine the existing  
17 software systems, provide insight into current operating procedures, and identify ways to  
18 modernize the existing software and systems. The assessment identified issues, challenges, and  
19 constraints of the current system, and provided macro recommendations for system  
20 improvements and desired outcomes. A next step is creation of a traceability matrix to prioritize  
21 requirements. Funding will be needed for the procurement of a data system that will meet EIS  
22 needs for timeliness, quality, and efficiency in the provision of EI services.

23           Thank you for the opportunity to testify.



**STATE OF HAWAII**  
**Executive Office on Early Learning**  
1390 Miller Street, Room 303  
HONOLULU, HAWAII 96813

February 28, 2017

**TO:** Representative Sylvia Luke, Chair  
Representative Ty Cullen, Vice Chair  
House Committee on Finance

**FROM:** Lauren Moriguchi, Director  
Executive Office on Early Learning

**SUBJECT: HB 918, HD1 – Relating to Early Learning**  
**Hearing Date:** March 1, 2017  
**Time:** 1:00 p.m.  
**Location:** Conference Room 308

**Purpose of Bill:** Appropriates funds for the procurement of, and maintenance and training for, a web-based data system in the department of health's early intervention section.

**EXECUTIVE OFFICE ON EARLY LEARNING'S POSITION:** The Executive Office on Early Learning (EOEL) **supports** HB 918, HD1 with comments for consideration.

The Infants and Toddlers with Disabilities Program (Part C) of the Individuals with Disabilities Education Act (IDEA) was created in 1986 to **enhance the development** of infants and toddlers with disabilities, **minimize potential developmental delay**, and reduce educational costs to our society by minimizing the need for special education services as children with disabilities reach school age. A web-based data system will minimize time spent on completing paperwork, provide more efficiency, and most importantly will enable providers to maximize time spent in providing direct services to clients.

Part C is not intended to be a stand-alone program. The intent is to **build interagency partnerships** among state agencies and programs in health, education, human services and developmental disabilities. It is for this reason EOEL recommends that the data system should have the capacity to interact with other data systems within the state, which contains information on services and outcomes for young children. The ability to have a connection between data systems will enable us to evaluate the long-term impact of these services on child outcomes.

Thank you for the opportunity to testify on this bill.



**STATE OF HAWAII**  
STATE COUNCIL  
ON DEVELOPMENTAL DISABILITIES  
919 ALA MOANA BOULEVARD, ROOM 113  
HONOLULU, HAWAII 96814  
TELEPHONE: (808) 586-8100 FAX: (808) 586-7543  
March 1, 2017

The Honorable Sylvia Luke, Chair  
House Committee on Finance  
Twenty-Ninth Legislature  
State Capitol  
State of Hawaii  
Honolulu, Hawaii 96813

Dear Representative Luke and Members of the Committee:


SUBJECT: HB 918 HD1 – Relating to Early Intervention.


The State Council on Developmental Disabilities (DD) **supports HB 918 HD1**. The purpose of this bill is to appropriate funds for the procurement of, and maintenance and training for, a web-based data system in the department of health's early intervention section.

Based on the mandated responsibilities under Part C of the Individuals with Disabilities Education Act and Sections 321-352, Hawaii Revised Statutes, relating to early intervention services for infants and toddlers with special needs, and the numerous State and purchase of services programs, it is imperative to have an updated data system that will contribute to the overall efficiency of the early intervention services program under DOH. A web-based data system would enhance the current system in entering data for Medicaid reimbursement, personnel and contract tracking, and state and federal reporting.

Thank you for this opportunity to submit testimony in **support of HB 918 HD1**.

Sincerely,

  
Waynette K.Y. Cabral, MSW  
Executive Administrator

  
Josephine C. Woll  
Chair



February 27, 2017

To: Rep. Sylvia Luke, Chair  
Rep. Ty J.K. Cullen, Vice Chair  
House Committee on Finance

From: Karen Worthington, Project Coordinator  
Early Childhood Action Strategy

Re: HB918-HD1 – Relating to Early Intervention  
**Hawaii State Capitol, Room 308, March 1, 2017, 1:00 PM**

**Position: Action Strategy supports HB918-HD1 – Relating to Early Intervention**

Dear Representative Luke, Representative Cullen, and Committee Members:

Thank you for the opportunity to provide testimony on behalf of Hawaii's Early Childhood Action Strategy, a public-private collaborative that recognizes the strength of communities and works across sectors to increase the number of young children in Hawaii who are born healthy, developing on track, ready for school when they enter kindergarten, and proficient learners by third grade.

Action Strategy supports HB918-HD1, which appropriates state funds for the procurement of a web-based data system in the Early Intervention section of the Department of Health and for the maintenance and training required to support the web-based data system. Providing tools such as a web-based data system for Early Intervention is important to Action Strategy because of our goal of increasing the number of children with health and development on track. Strategies to achieve this goal are primarily developed and implemented through our Team 3 "On Track Health and Development Team." A significant portion of that Team's work focuses on screening and referrals of young children who have or are at risk of having developmental delays.

A modern, efficient data system is a critical piece of Hawaii's early childhood system that is missing. The proposed EI data system would be a great start to meeting the state's need to be able to track and monitor what is happening with our most vulnerable children.

Approximately 3,500 children receive services each year through the Early Intervention Section of the Department of Health. These children and the children of the future who will be served by EI deserve the best tools and services available to help them, including tools to track and monitor

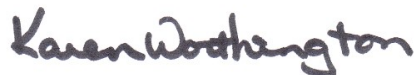
how the system is doing and tools to ensure the system operates efficiently and effectively.

The existing data system, which is now ten years old, has many flaws, including that it is not a web-based system and does not support the tracking of referrals and services accessed. A new data system will reduce inefficiencies and automate many functions, and therefore may allow more resources to be directed to helping children and families rather than expending such resources on billing, data entry, and matching and reconciliation of records.

Action Strategy is committed to ensuring Hawaii's young children are healthy, safe and ready to learn and HB918-HD1 supports that vision. We ask you to pass this bill to allocate funds for a modernized data system for Early Intervention.

Please feel free to contact me for additional information. I can be reached at 808-214-9336 or [karen@clnhawaii.org](mailto:karen@clnhawaii.org).

Sincerely,

A handwritten signature in dark ink that reads "Karen Worthington". The signature is written in a cursive, slightly slanted style.

Karen Worthington, JD



**LATE**

February 27, 2017

To: Representative Sylvia Luke, Chair  
Representative Ty J.K. Cullen, Vice Chair  
Committee on Finance

From: Deborah Zysman, Executive Director  
Hawaii Children's Action Network

Re: HB 918 HD 1 – Relating to Early Intervention  
Hawaii State Capitol, Room 308, March 1, 2017, 1:00 PM

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On behalf of Hawaii Children's Action Network (HCAN), we are writing to strongly support HB 918 HD 1 – Relating to Early Intervention.

HCAN supports the intention to develop an electronic system to track and monitor the progress of early intervention services for infants and toddlers who have a developmental delay or at biological risk for developmental delays.

By providing a system that can track the services and progress of each child being served, better coordinated services need to be provided to help generate better outcomes for the children and families, such as improvements in verbal abilities and overall cognitive performance as well as community benefits such as fewer arrests and lower school dropout rates. Many of these children and their families will require a lifetime of care and support.

The current tracking system is paper-based, outdated, and lacks web-based capability for retrieving/updating real-time data, accessibility from multiple locations, and generating reports and billing. Web-based systems have become the norm around the country, currently 34 states have implemented them.

To be able to coordinate statewide the 20 service providers and approximately 3,500 children each year receiving services, a web-based system is vital for efficiency and delivery of quality services.

For these reasons, HCAN respectfully requests that the committee pass this bill.

HCAN is committed to building a unified voice advocating for Hawaii's children by improving their safety, health, and education. Last fall, HCAN convened input in person and online from more than 50 organizations and individuals that came forward to support or express interest for a number of issues affecting children and families in our state that resulted in the compilation of 2017 Hawaii Children's Policy Agenda, which can be accessed at <http://www.hawaii-can.org/2017policyagenda>.