

Early Intervention Coordinating Council

June 18, 2026



Solutions that Matter

Agenda

- EI-Hub System Updates
 - Full Release 2
 - Editing Closed Individualized Family Service Plans
 - Rate Increases
- Review of Child and Claims Data
- Call Center Update

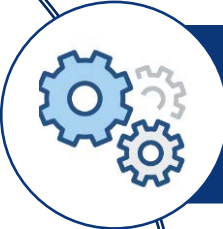


System Updates – Full Release 2



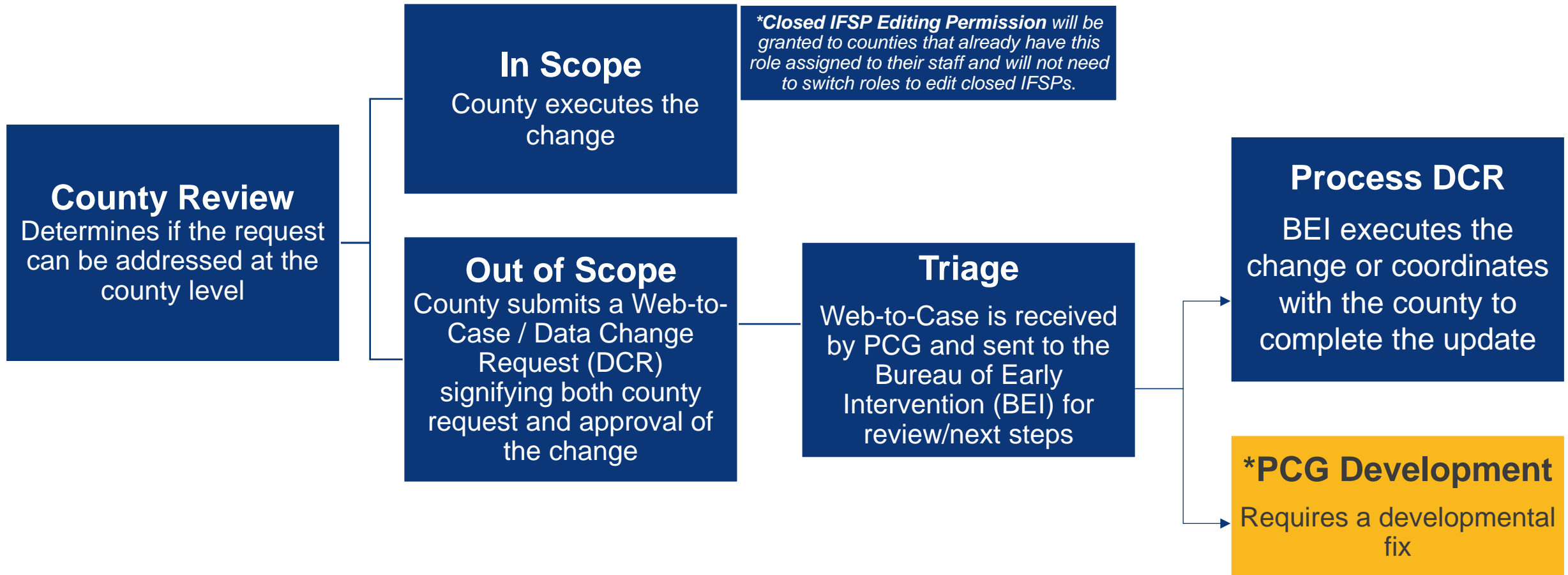
Work on the next Full Release is underway and currently in the State testing phase. The full release is targeted for Summer 2026.

- ✔ Initial Quality Assurance (QA) testing by Public Consulting Group (PCG)
- ✔ Prepare environment for State testing
- ✔ State testing of the release
- Performance testing
- Deploy the release to live production system

Key Enhancements – Full Release 2

-  Editing Closed Individualized Family Service Plans (IFSPs)
-  Usability Updates
-  Cancel (Delete) Draft IFSPs

Overview Process for Editing Closed Individualized Family Service Plans (IFSP)



Child Outcomes Summary Form (COSF)



Child Outcomes Summary Form (COSF) functionality was implemented on March 30, 2026, enabling the transition from Personal Electronic Response Data System (PERDS) to EI-Hub.

- A job aid is available on the Learning Management System (LMS) to support users in entering COSF data in the EI-Hub. The job aid reflects current state with information about upcoming changes in the system.
- Counties provided feedback on functionality, and reported issues were reviewed, addressed, and resolved.



- Additional cosmetic updates in Full Release 2 (FR2) will streamline the data entry process.
- FR2 will enable entry of a “Date Assessed” before the initial Individualized Family Service Plan date for COS entry forms.

System Updates: Rate Increases

✓ 4% Rate Increase

Fully implemented by April 2026
(prospectively and retrospectively)

5% Rate Increase

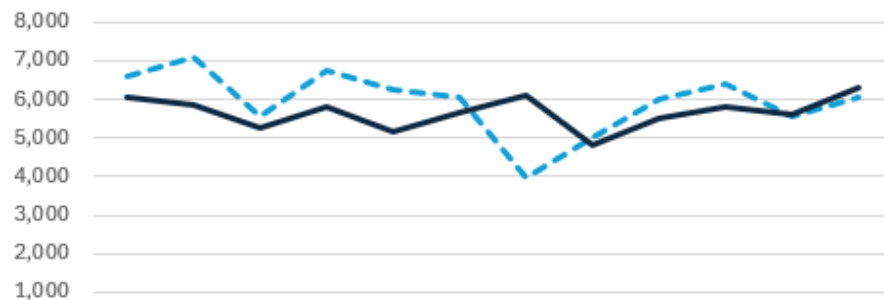
Full implementation planned by July 2026
(prospectively and retrospectively)

Month/Year	Update
December 2025	4% Rate Increase EI-Hub system updates implemented
January 2026	4% Rate Increase Prospective Escrow payments begin
March 2026	4% Rate Increase Escrow retroactive payments completed Medicaid system updates implemented
April 2026	4% Rate Increase Medicaid retroactive corrected claims submitted and payments completed
	5% Rate Increase EI-Hub and Medicaid system updates implemented
May 2026	5% Rate Increase Prospective Escrow and Medicaid payments begin Medicaid retroactive payments completed (Cycle 2543)
June–July 2026	5% Rate Increase Escrow retroactive payments completed in two phases: <ul style="list-style-type: none"> • New York City: June • Rest of State: June – July

Child Data

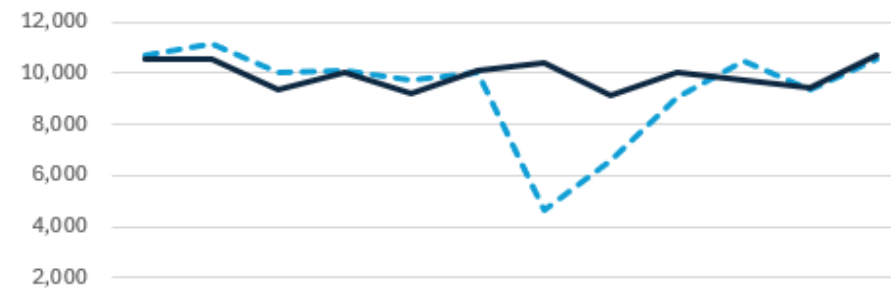


Referral - by Referral Date 12-months ending Mar 2025 vs. Mar 2026



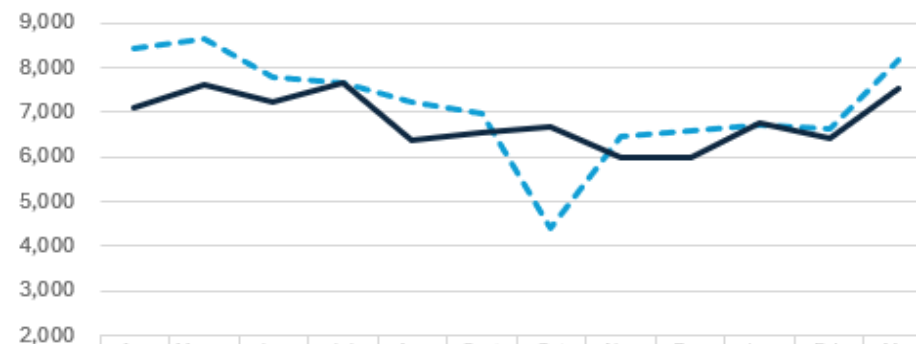
	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
Referrals Ending Mar 2025	6,616	7,072	5,536	6,737	6,247	6,042	3,954	4,987	6,015	6,421	5,531	6,068
Referrals Ending Mar 2026	6,061	5,872	5,257	5,810	5,165	5,654	6,092	4,820	5,481	5,800	5,613	6,310

Evaluations - by Evaluation Date 12-months ending Mar 2025 vs. Mar 2026



	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
Evaluations Ending Mar 2025	10,696	11,140	10,068	10,086	9,707	10,047	4,619	6,596	9,049	10,477	9,371	10,566
Evaluations Ending Mar 2026	10,563	10,580	9,385	10,004	9,193	10,086	10,398	9,105	10,010	9,748	9,470	10,698

IFSP - by IFSP Start Date 12-months ending Mar 2025 vs. Mar 2026



	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
IFSP's Ending Mar 2025	8,413	8,654	7,792	7,674	7,242	6,964	4,413	6,461	6,577	6,731	6,625	8,161
IFSP's Ending Mar 2026	7,099	7,616	7,209	7,643	6,360	6,548	6,671	5,971	6,003	6,751	6,406	7,544

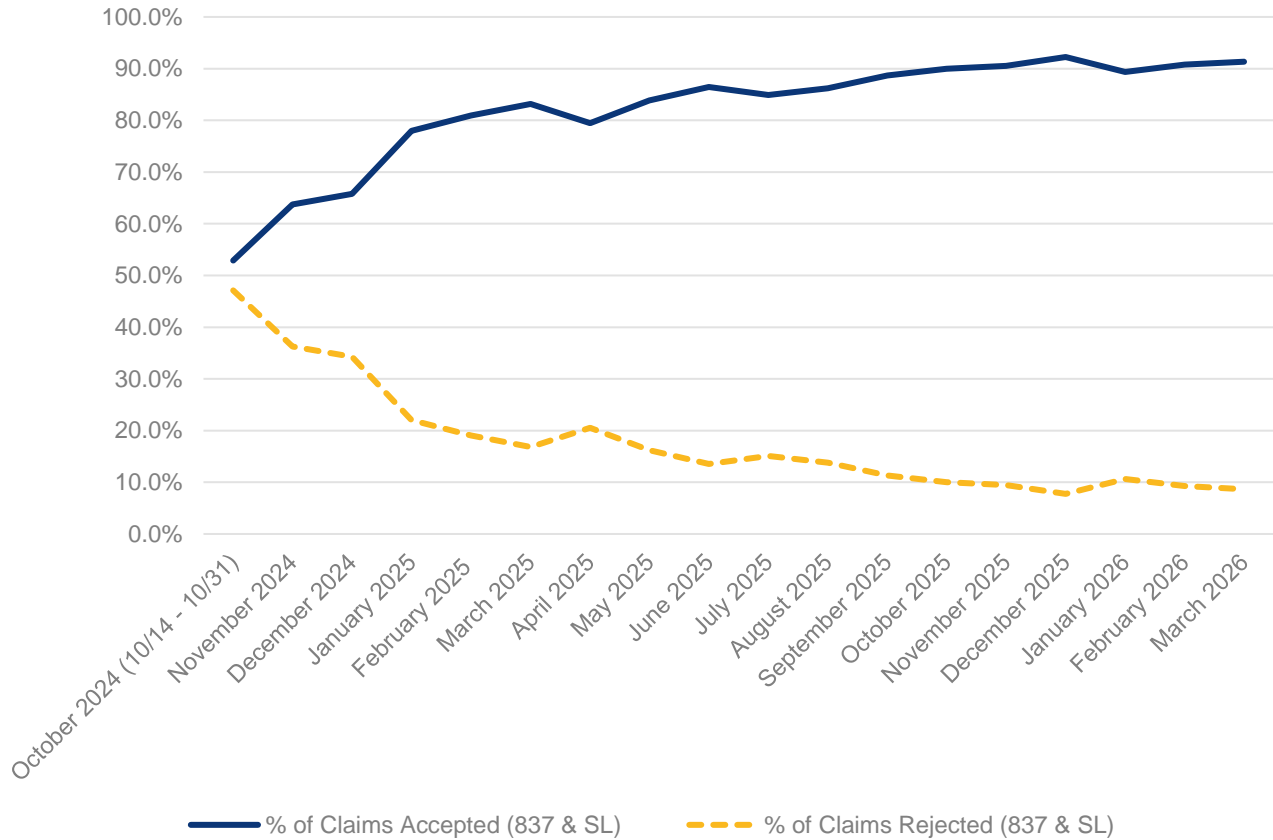
Data Sources
 NYEIS: Apr 2024 - Oct 2024
 EI-Hub: Oct 2024 - Mar 2026
 Sources combined for Oct 2024



Claim Acceptance Rate



% Accepted / Rejected Claims



Billing Provider
 85% have reached an acceptance rate of at least 90%, and 75% have surpassed the 96% mark

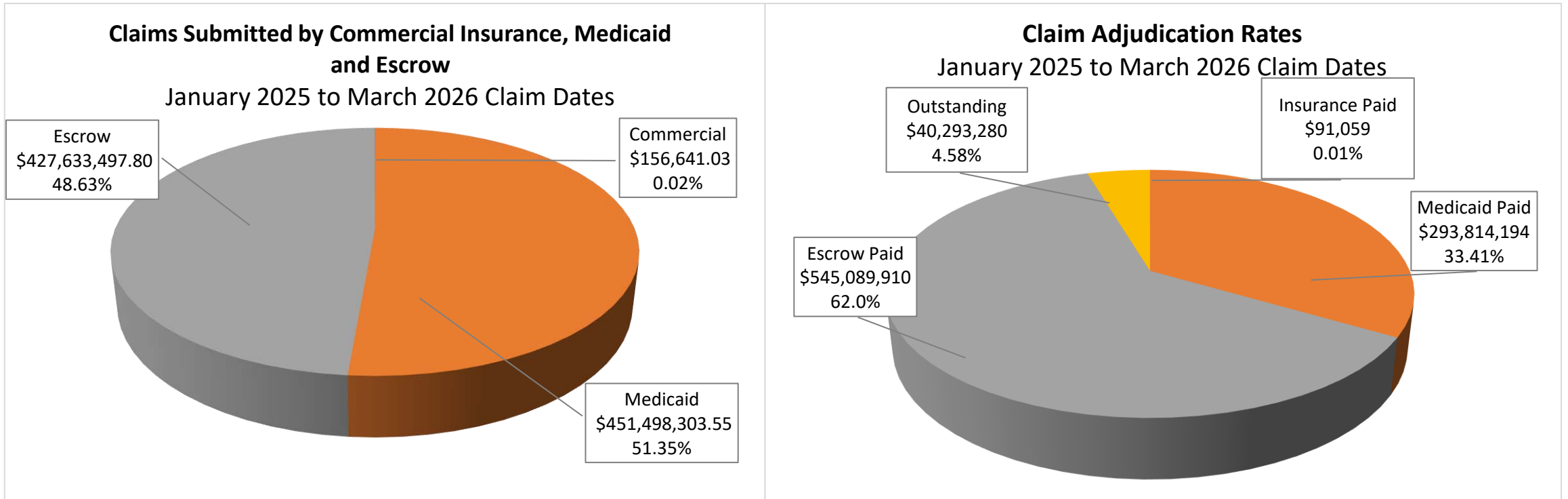
Date Range	% of Claims Accepted (837 & SL)	% of Claims Rejected (837 & SL)
October 2024 (10/14 - 10/31)	52.9%	47.1%
November 2024	63.7%	36.3%
December 2024	65.7%	34.3%
January 2025	78.0%	22.0%
February 2025	80.9%	19.1%
March 2025	83.2%	16.8%
April 2025	79.5%	20.5%
May 2025	83.8%	16.2%
June 2025	86.5%	13.5%
July 2025	84.9%	15.1%
August 2025	86.2%	13.8%
September 2025	88.7%	11.3%
October 2025	90.0%	10.0%
November 2025	90.5%	9.5%
December 2025	92.2%	7.8%
January 2026	89.4%	10.6%
February 2026	90.8%	9.2%
March 2026	91.4%	8.6%



State Fiscal Agent Billing and Claiming Statistics



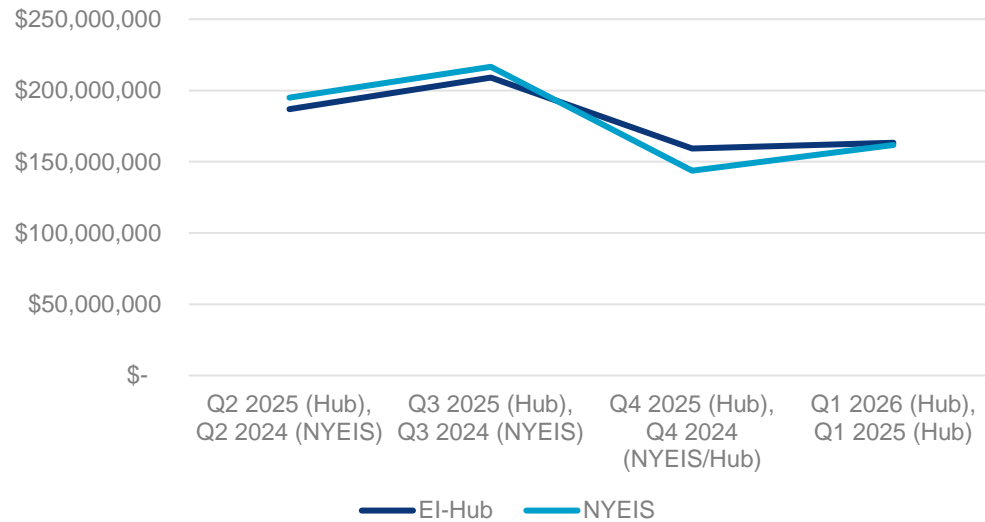
- For the period from January 1, 2025, to March 31, 2026, the State Fiscal Agent has billed \$879.3 million in claims. Providers have received \$839.0 million in payments with \$40.3 million outstanding for that period. Since 4/1/13, over \$8.4 billion claims have been processed and 98.8% paid.



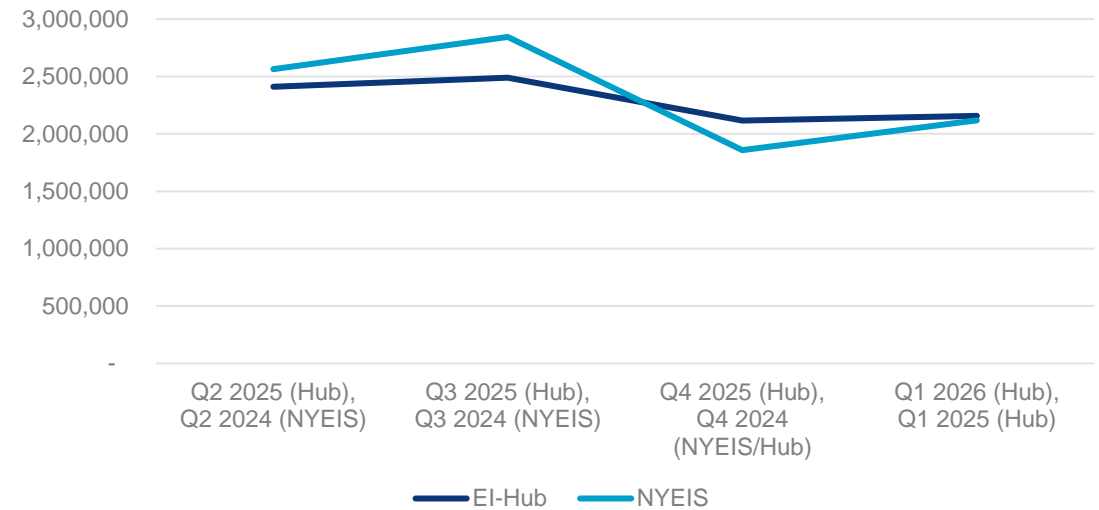
Claims Data



Combined (Medicaid & Escrow)
Total Amount Billed



Combined (Medicaid & Escrow)
Total Count of Claims



Percentage Difference

Q2 2025 (Hub), Q2 2024 (NYEIS)	Q3 2025 (Hub), Q3 2024 (NYEIS)	Q4 2025 (Hub), Q4 2024 (NYEIS/Hub)	Q1 2026 (Hub), Q1 2025 (Hub)
-4.2%	-3.5%	10.8%	1.0%

Q2 2025 (Hub), Q2 2024 (NYEIS)	Q3 2025 (Hub), Q3 2024 (NYEIS)	Q4 2025 (Hub), Q4 2024 (NYEIS/Hub)	Q1 2026 (Hub), Q1 2025 (Hub)
-6.0%	-12.5%	13.9%	1.8%





Claims Data - Details

Combined – NYEIS/Hub	Q2 2024 (4/1/24 to 6/30/24)	Q3 2024 (7/1/24 to 9/30/24)	Q4 2024 (10/1/24 to 12/31/24)	Q1 2025 (1/1/25 to 3/31/25)
Total Amount Billed	\$194,899,303	\$216,589,966	\$143,692,035	\$161,655,967
Total Count of Claims	2,562,670	2,844,605	1,858,311	2,117,621

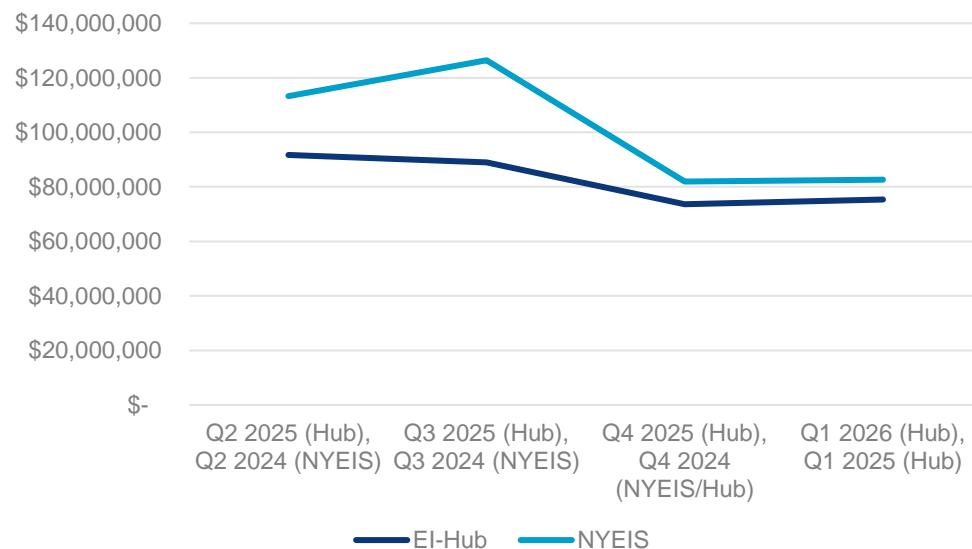
Combined - Hub	Q2 2025 (4/1/25 to 6/30/25)	Q3 2025 (7/1/25 to 9/30/25)	Q4 2025 (10/1/25 to 12/30/25)	Q1 2026 (1/1/26 to 3/31/26)
Total Amount Billed	\$186,803,871	\$209,034,252	\$159,258,246	\$163,344,954
Total Count of Claims	2,409,727	2,489,568	2,115,995	2,155,840



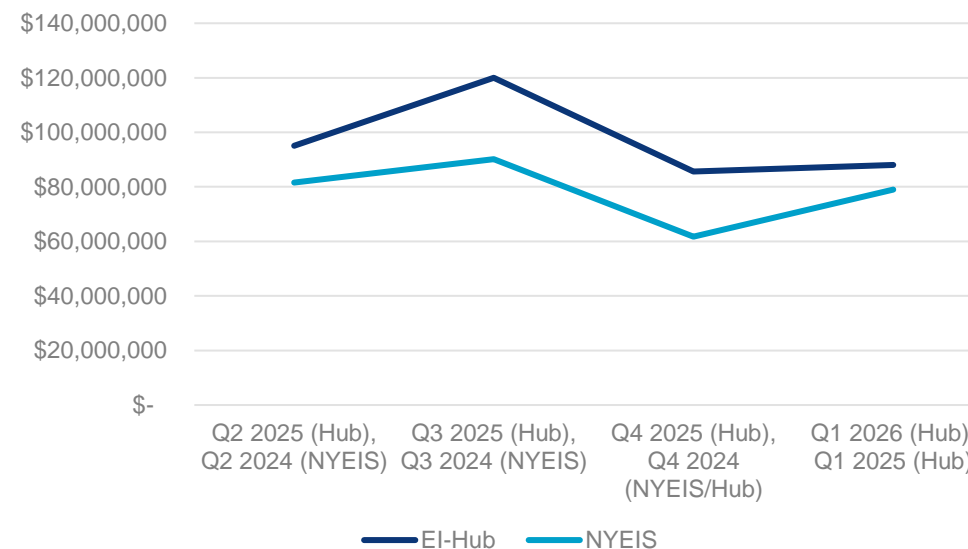


Medicaid/Escrow Claims Billed

Medicaid - Total Amount Billed



Escrow - Total Amount Billed



Percentage Difference

Q2 2025 (Hub), Q2 2024 (NYEIS)	Q3 2025 (Hub), Q3 2024 (NYEIS)	Q4 2025 (Hub), Q4 2024 (NYEIS/Hub)	Q1 2026 (Hub), Q1 2025 (Hub)
-19.0%	-29.6%	-10.2%	-8.8%

Q2 2025 (Hub), Q2 2024 (NYEIS)	Q3 2025 (Hub), Q3 2024 (NYEIS)	Q4 2025 (Hub), Q4 2024 (NYEIS/Hub)	Q1 2026 (Hub), Q1 2025 (Hub)
16.5%	33.1%	38.7%	11.3%



Update to Medicaid Claims Processing for Name Mismatches

- As of April 2026, name-related mismatches are no longer held in the Workable queue
- Date of birth or gender mismatches will continue to require correction
- Providers should continue ensuring accurate member demographics to support successful billing



Medicaid Denials

Top 10 denials by billed amount for March 2026

- March's Medicaid Denials total \$10.1m with a decrease of \$4m from February's total of \$14.1m.
- Most denied claims for March 2026 were due to denial code 97, 200, and 22.
- CO200 denials have decreased from \$2.2m in March 2025 to \$1.8m in March 2026. A \$419.0k and 19.0% decrease.
- CO200 were \$18.8m from October 2024 to March 2025 and \$6.8m from October 2025 to March 2026.

CARCode	CARDescription	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26	Total Billed	Total %
97	The benefit for this service is included in the payment/allowance for another service/procedure that has already been adjudicated.	\$8,771,579	\$12,628,732	\$7,685,994	\$6,013,617	\$10,563,306	\$6,417,487	\$52,080,717	70.1%
200	Expenses incurred during lapse in coverage	\$2,127,436	\$0	\$45,408	\$1,276,649	\$1,516,356	\$1,790,420	\$6,756,269	9.1%
22	This care may be covered by another payer per coordination of benefits.	\$820,565	\$805,655	\$791,152	\$498,852	\$798,534	\$584,238	\$4,298,996	5.8%
96	Non-covered charge(s).	\$450,646	\$568,309	\$674,025	\$272,473	\$698,979	\$553,637	\$3,218,069	4.3%
16	Claim/service lacks information which is needed for adjudication.	\$271,829	\$316,072	\$259,785	\$142,266	\$142,258	\$354,528	\$1,486,738	2.0%
242	Services not provided by network/primary care providers.	\$209,410	\$171,481	\$158,593	\$119,901	\$222,253	\$212,513	\$1,094,152	1.5%
29	The time limit for filing has expired.	\$132,719	\$75,848	\$55,920	\$36,675	\$33,261	\$80,889	\$415,313	0.6%
183	The referring provider is not eligible to refer the service billed.	\$96,383	\$76,051	\$68,287	\$53,242	\$43,694	\$59,798	\$397,456	0.5%
9	The diagnosis is inconsistent with the patient's age.	\$23,126	\$43,639	\$27,721	\$19,672	\$32,064	\$26,801	\$173,023	0.2%
6	The procedure/revenue code is inconsistent with the patient's age.	\$28,395	\$281,499	\$52,887	\$8,968	\$11,767	\$6,549	\$390,064	0.5%
Top 10 denials		\$12,932,087	\$14,967,287	\$9,819,773	\$8,442,317	\$14,062,472	\$10,086,859	\$70,310,796	94.7%
Other denials		\$353,399	\$1,900,667	\$1,423,932	\$272,040	\$6,775	\$1,434	\$3,958,247	5.3%
Total denial amount		\$13,285,485	\$16,867,954	\$11,243,705	\$8,714,358	\$14,069,247	\$10,088,293	\$74,269,042	100.0%
Total Amount Billed to Medicaid		\$32,868,645	\$38,068,434	\$33,665,889	\$22,910,474	\$32,052,223	\$28,587,229	\$188,152,893	
Denial Rate		40.4%	44.3%	33.4%	38.0%	43.9%	35.3%	39.5%	



Medicaid Sweep Process

For the period from January 1, 2025, through March 31, 2026, there have been 1.1m claims totaling \$74.1 million processed in Medicaid Sweeps. Medicaid has paid 41.4% totaling \$30.7 million.

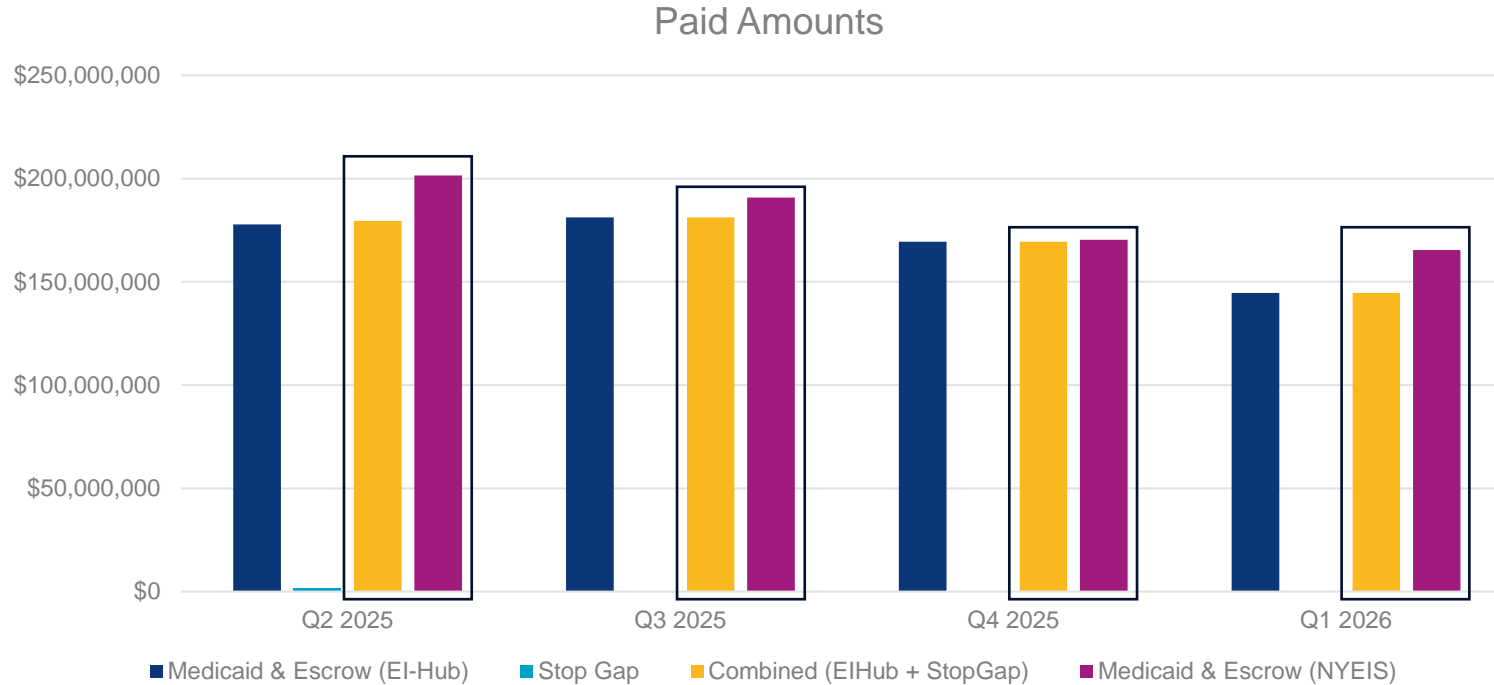
This monthly sweep (3rd Wednesday of the month) includes:

- Claims that had Medicaid Code 35 errors that have been correctly assigned by State Fiscal Agent
- Claims initially paid from escrow where the child is later identified to have Medicaid coverage

Sweep Date	Process	# of Services	Billed Amount	Paid Amount
Q1 2026 (01/1/26 to 03/31/26)	Code 35	61,137	\$ 1,478,998.23	\$ 1,052,875.65
	Medicaid Recoup	147,498	\$ 12,494,443.52	\$ 4,469,667.59
2025 Q4 Total		208,635	\$ 13,973,441.75	\$ 5,522,543.24
Q4 2025 (10/1/25 to 12/31/25)	Code 35	60,044	\$ 1,651,544.93	\$ 1,231,801.62
	Medicaid Recoup	262,194	\$ 21,681,000.62	\$ 9,613,316.51
2025 Q4 Total		322,238	\$ 23,332,545.55	\$ 10,845,118.13
Q3 2025 (07/1/25 to 09/30/25)	Code 35	46,792	\$ 1,367,103.61	\$ 427,855.08
	Medicaid Recoup	124,078	\$ 10,029,453.00	\$ 3,899,561.49
2025 Q3 Total		170,870	\$ 11,396,556.61	\$ 4,327,416.57
Q2 2025 (04/1/25 to 06/30/25)	Code 35	34,556	\$ 1,128,870.71	\$ 390,765.55
	Medicaid Recoup	141,613	\$ 11,134,135.14	\$ 4,312,317.89
2025 Q2 Total		176,169	\$ 12,263,005.85	\$ 4,703,083.44
Q1 2025 (01/1/25 to 03/31/25)	Code 35	34,101	\$ 1,225,295.91	\$ 350,934.79
	Medicaid Recoup	140,526	\$ 11,913,344.94	\$ 4,961,339.76
2025 Q1 Total		174,627	\$ 13,138,640.85	\$ 5,312,274.55
Total		1,052,539	\$ 74,104,190.61	\$ 30,710,435.93



Paid Amounts



**NYEIS Q2 included an additional escrow payment compared to EI-Hub Q2

Percentage Difference

	Q2 2025 (Hub), Q2 2024 (NYEIS)	Q3 2025 (Hub), Q3 2024 (NYEIS)	Q4 2025 (Hub), Q4 2024 (NYEIS/Hub)	Q1 2026 (Hub), Q1 2025 (Hub)
With Stop Gap	-10.9%	-5.0%	-0.6%	-12.6%
Without Stop Gap	-11.8%	-5.0%	-0.6%	-12.6%



Paid Amounts - Details

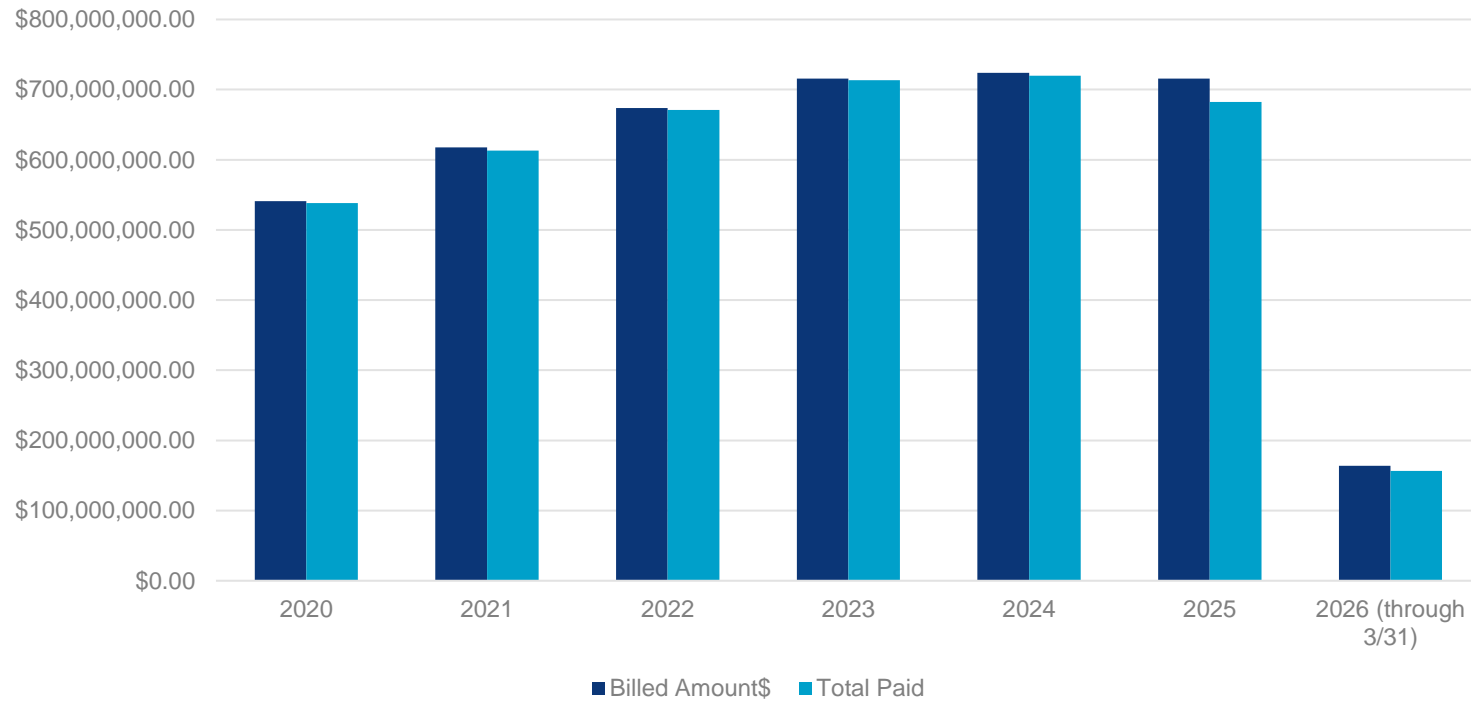
EI-Hub Paid Amounts	Q2 2025 (4/1/25 - 6/30/25)	Q3 2025 (7/1/25 - 9/30/25)	Q4 2025 (10/1/25 - 12/31/25)	Q1 2026 (1/1/26 - 3/31/26)
Medicaid Paid	\$60,557,685	\$65,760,521	\$63,008,586	\$50,338,142
Escrow Paid	\$117,300,017	\$115,500,569	\$106,358,735	\$94,293,001
Stop Gap	\$1,699,820	\$0	\$0	\$0
Total Payments	\$179,557,522	\$181,261,090	\$169,367,321	\$144,631,143
<i>Medicaid %</i>	33.7%	36.3%	37.2%	34.8%
<i>Escrow %</i>	65.3%	63.7%	62.8%	65.2%
<i>Stop Gap %</i>	0.9%	0.0%	0.0%	0.0%

NYEIS Paid Amounts	Q2 2024 (4/1/24 - 6/30/24)	Q3 2024 (7/1/24 - 9/30/24)	Q4 2024 (10/1/24 - 12/31/24)	Q1 2025 (1/1/25 - 3/31/25)
Medicaid Paid	\$83,365,221	\$79,415,556	\$57,862,543	\$57,882,927
Escrow Paid	\$118,215,031	\$111,345,653	\$104,303,642	\$98,239,118
Stop Gap	\$0	\$0	\$8,194,144	\$9,313,103
Total Payments	\$201,580,252	\$190,761,209	\$170,360,328	\$165,435,147
<i>Medicaid %</i>	41.4%	41.6%	34.0%	35.0%
<i>Escrow %</i>	58.6%	58.4%	61.2%	59.4%
<i>Stop Gap %</i>	0.0%	0.0%	4.8%	5.6%

Claims Processed



Amounts Billed v. Amounts Paid



Percentage Paid

2020	2021	2022	2023	2024	2025	2026 (through 3/31)
99.5%	99.3%	99.6%	99.7%	99.4%	95.4%	95.7%

2024 (Pre-Go Live - Prior to 10/14) – 99.8%; 2024 (Post-Go Live - After 10/14) – 97.6%





Claims Processed - Details

Year	Billed		Paid					
	#Claims	Billed Amount \$	#Claims	Insurance Paid	Medicaid Paid	Escrow Paid	Total Paid	%Paid
2020	7,292,131	\$540,932,027	7,249,939	\$9,844,430	\$225,609,860	\$302,663,696	\$538,117,985	99.5%
2021	8,119,344	\$617,833,921	8,058,720	\$11,045,580	\$267,374,505	\$334,886,190	\$613,306,274	99.3%
2022	8,861,005	\$673,890,293	8,816,817	\$1,206,202	\$297,424,354	\$372,306,873	\$670,937,428	99.6%
2023	9,422,130	\$715,895,386	9,384,892	\$62,459	\$313,271,854	\$400,267,315	\$713,601,628	99.7%
2024 (Pre-Go Live - Prior to 10/14)	7,911,013	\$602,117,517	7,882,362	\$35,007	\$240,461,525	\$360,473,671	\$600,970,203	99.8%
2024 (Post-Go Live - After 10/14)	1,565,583	\$121,812,648	1,538,464	\$8,451	\$45,266,961	\$73,580,429	\$118,855,841	97.6%
2025	9,092,665	\$715,565,164	8,930,222	\$69,166	\$242,175,392	\$440,266,417	\$682,510,976	95.4%
2026	2,152,798	\$163,740,763	2,066,209	\$21,892	\$51,885,762	\$104,849,849	\$156,757,503	95.7%
Total	54,416,669	\$4,151,787,719	53,927,625	\$22,293,187	\$1,683,470,212	\$2,389,294,440	\$4,095,057,839	98.6%

*Note: Based on claim added date, No stop gap payments included



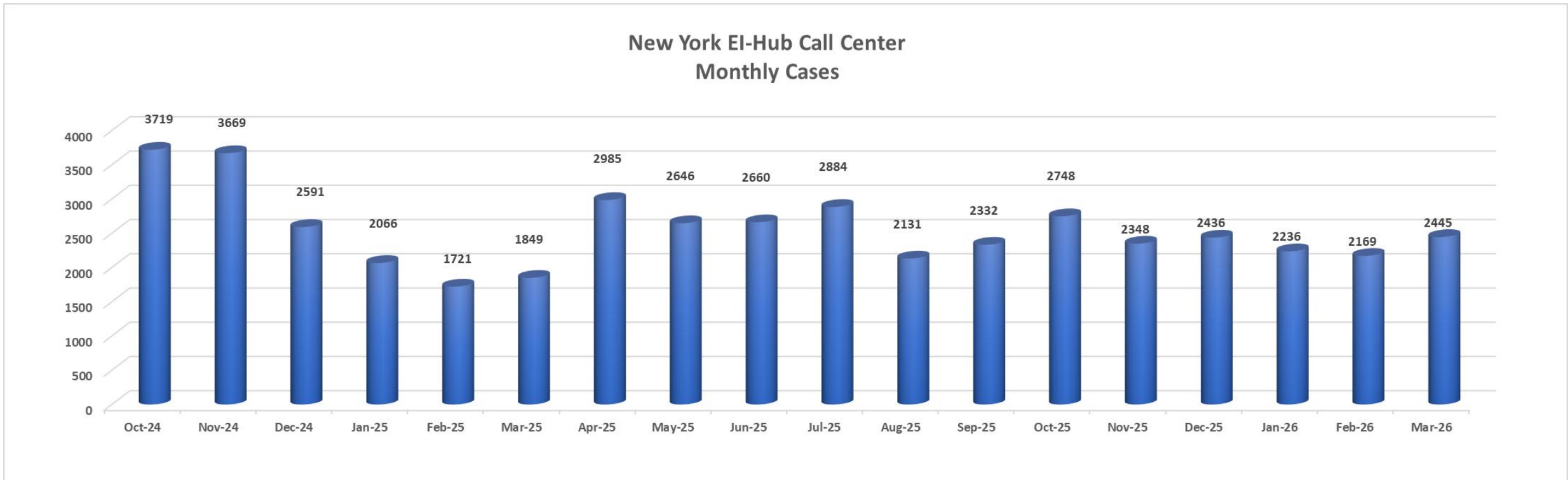
Call Center



- **Total Cases Opened (since 10/15/24): 45,469 (as of 3.31.26)**
 - **# of Cases Closed: 44,878 (98.70%)**
- **Ongoing Priorities:**
 - Accelerated case resolution through improved visibility and controls: Enhanced Power Business Intelligence (BI) reporting and structured case tracking drove faster identification and resolution of aging cases, contributing to improved closure rates and tighter control of active case % across the call center.
 - Operational performance review meetings and reporting enhancements: Documented ongoing improvements in agent metrics tracking, case evaluation, and reporting structure refinement, which supported better monitoring of case resolution performance.

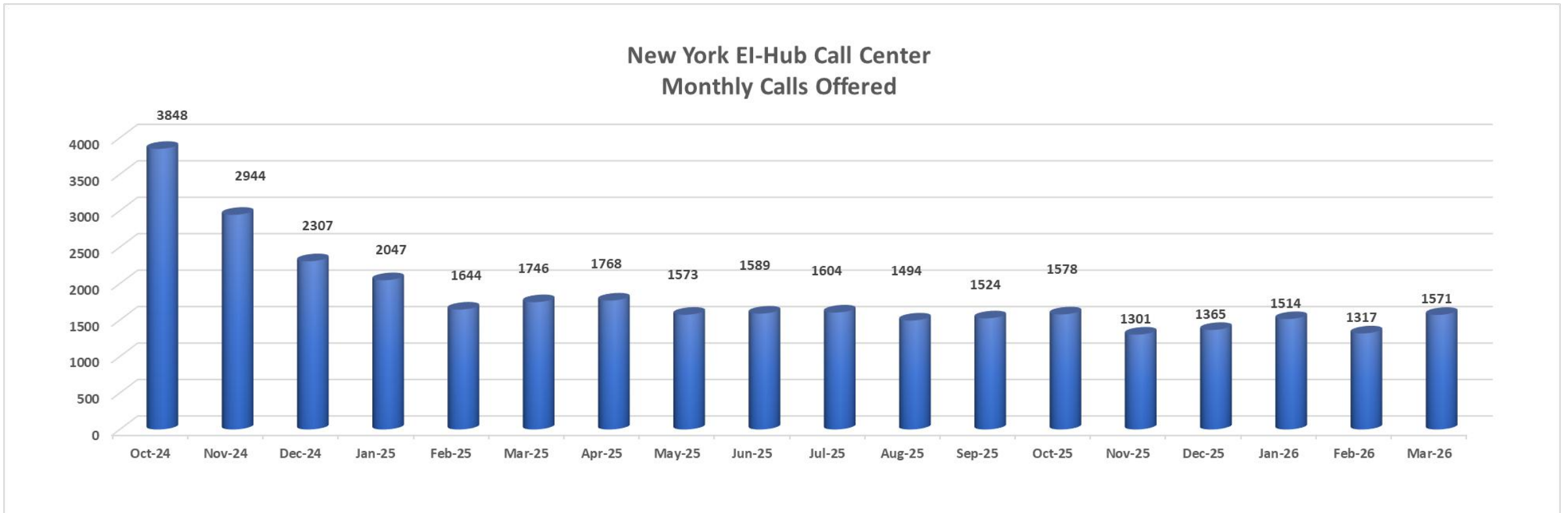
Case Totals by Month

Number of cases opened by month for requests received through phone and Web-to-Case.



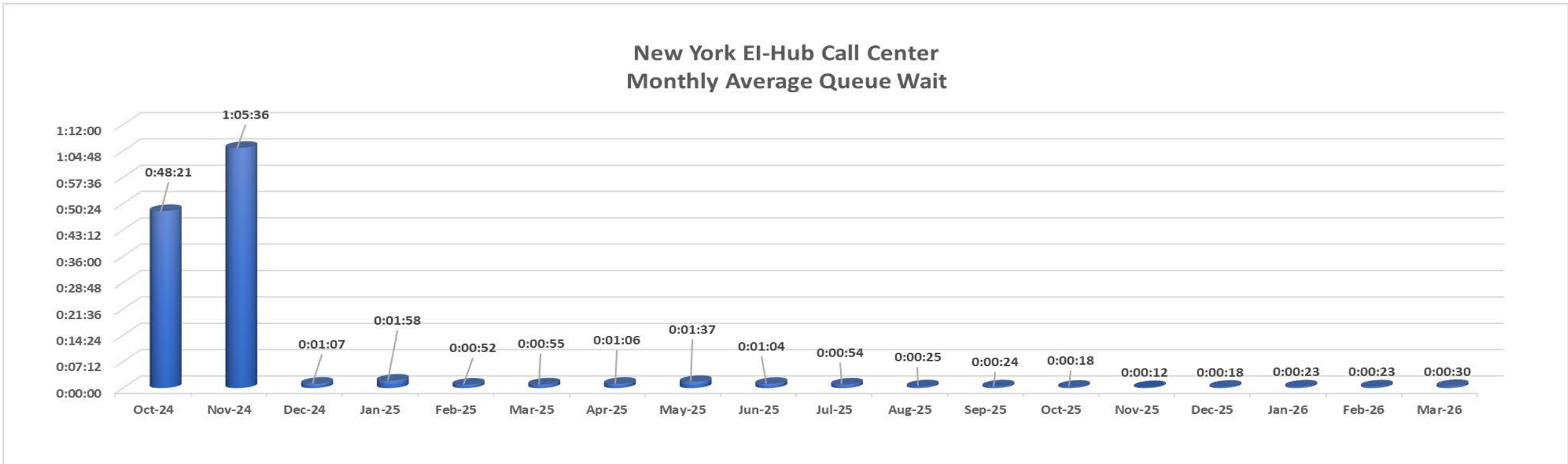
Call Totals by Month

Number of calls received each month.



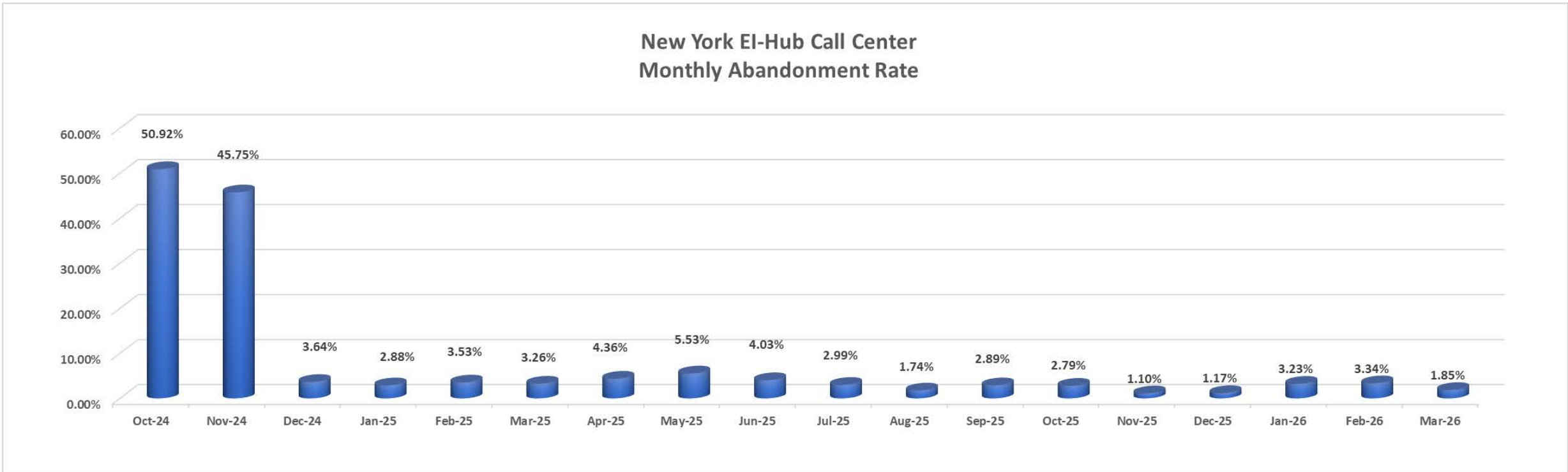
Average Queue Wait Time

Average time callers wait in queue before speaking to an agent.



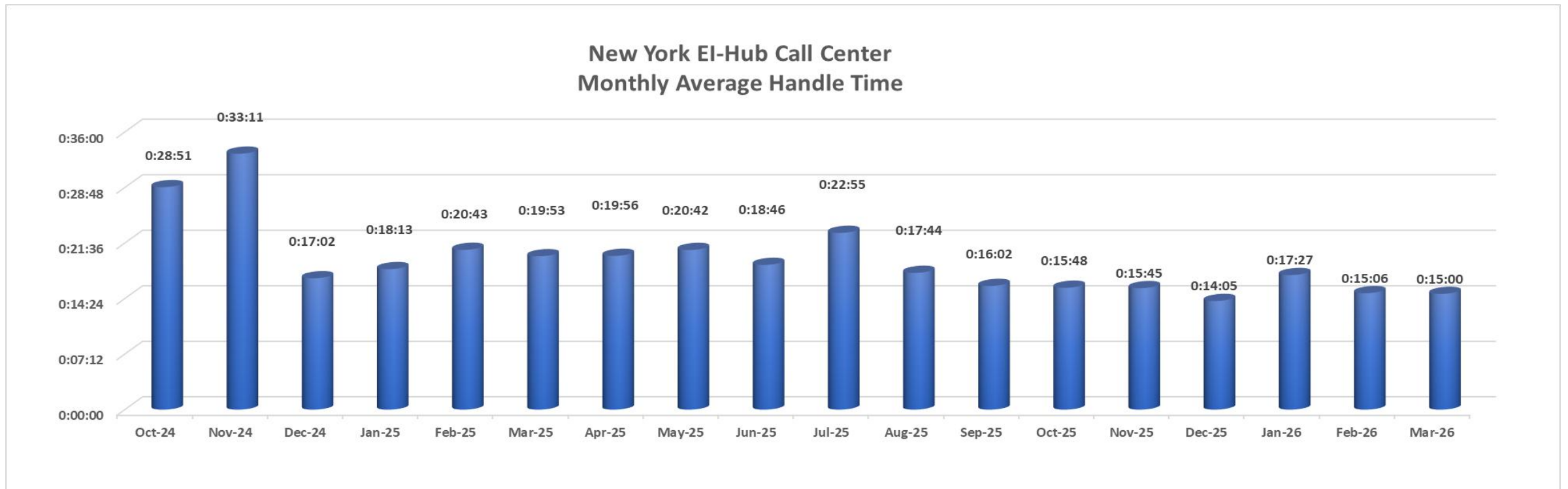
Abandonment Rate

The percentage of calls that disconnect before speaking to a Call Center agent.



Average Handle Time

Amount of time an agent spends on a case, which includes talking, placing the caller in queue, and wrapping up notes after the call.



Question and Answer





PUBLIC
CONSULTING GROUP

Solutions that Matter