



## **Support Early Steps, Florida's Part C/Early Intervention Program**

**The Council supports current per-child funding as a minimum for the Early Steps Program which serves over 45,000 children who will receive those services in 2013-2014, plus additional funding for those who need services for Autism Spectrum Disorder.**

Early Steps is administered by Children's Medical Services (CMS) in accordance with the Individuals with Disabilities Education Act (IDEA), Part C. The Early Steps Program provides Florida's infants and toddlers, from birth to 36 months, who have a developmental delay, or a condition that places them at risk for developmental delay, with early intervention services and supports that improve a child's chances to develop to their full potential by achieving their developmental milestones. Research shows that achieving these milestones is essential to developing a child's ability to learn, speak, and move at optimal levels later in life.

In 2010-11 Florida provided these essential early intervention services to 45,350 children. Florida's budget is about \$900 annually, per child, on average. This is low compared with other states of comparable size and characteristics like Pennsylvania, which budgets a total of \$5,268 per child. Florida's Early Steps program currently has a caseload ratio of 1:65. Nationally, the average caseload ratio is 1:38. The program is stretched to the limit with low per-child funding and high case loads.

Unfortunately, Early Steps will be stretched even further in the future by several factors, including a dramatic increase in children diagnosed with Autism Spectrum Disorder (ASD). In 2012, the Centers of Disease Control and Prevention reported that approximately 1 in every 88 children has an ASD diagnosis. In 2007, the ratio was 1 in 150. This number has dramatically risen. Estimates are that there will be 974 children with an ASD diagnosis who will need services from Florida's Early Steps this year, which is almost three times as many as those served in 2007.

In addition to the skyrocketing number of children diagnosed with ASD, the number, type, and length of recommended treatments has also increased. Analysis of claims data indicates that the Early Steps program pays \$3,000 more per child with an ASD diagnosis than other Part C eligible children.

At the same time that the needs of the ASD population have increased, the remaining Early Steps population continues to increase as well.

Cost-benefit analyses show that investing in early intervention services has measureable positive outcomes, with a rate of return as high as 16% each fiscal year. Many of the benefits from early childhood intervention can be translated into dollar figures and compared with program costs. For example, if school outcomes improve, fewer resources may be spent on grade repetition or special education classes. If improvements in school performance lead to higher educational attainment and subsequent economic success in adulthood, the government may benefit from higher tax revenues and reduced outlays for social welfare programs and the criminal justice system. As a result of improved economic outcomes, participants themselves benefit from higher lifetime incomes, and other members of society gain from reduced levels of delinquency and crime.

These services can make the difference between a lifetime of needs provided by the state, as opposed to minimal or no needed services later on. Ultimately, if Early Steps treatments are successful, the savings to the state could be significant.