

March 30, 2026

The Honorable Susan R. Donovan  
Chairwoman  
Health & Human Services  
Rhode Island House of Representatives  
State House  
Providence, RI 02903

**RE: In Support of H7627 – Early Intervention Extension Option**

Chairwoman Donovan and Members of the House Health and Human Services Committee,

On behalf of the Rhode Island Coalition for Children and Families (RICCF), I am writing in strong support of **H7627**, which would create an option to extend Early Intervention (EI) services for eligible children beyond age three until the start of the school year.

RICCF comprises 44 member organizations dedicated to advancing child well-being and strengthening family stability across Rhode Island. Our members provide a broad range of services, including behavioral health care, early childhood supports, education, and family stabilization programs.

Early Intervention is one of the most effective tools we have to support infants and toddlers with developmental delays. Each year, more than 4,000 children in Rhode Island receive EI services through a network of community-based providers. These services are delivered in natural settings and are essential to helping children build the skills they need to succeed.

However, when children turn three, they must transition from EI to preschool special education. This transition is often not seamless. Children with spring and summer birthdays, in particular, can experience gaps in services lasting several months before school-based supports begin. These gaps occur at a critical stage of development and can lead to delays that impact long-term outcomes.

H7627 offers a practical, family-centered solution by allowing eligible children to continue receiving EI services until September following their third birthday. This ensures continuity of care with trusted providers and allows children to transition into preschool alongside their peers without interruption in services.

This approach is not new or untested. At least six states (CO, CT, IL, MD, MO, TN) and Washington, D.C. have already implemented similar policies to successfully bridge this gap.

This proposal is also a smart investment. Early Intervention in Rhode Island is currently funded through a combination of approximately 60% Medicaid and 40% private insurance. For every \$1 the state invests, Rhode Island draws down roughly \$3 in federal and private funding. The estimated state cost (between \$300,000 and \$400,000 annually when fully implemented) is modest, particularly when weighed against

the long-term benefits of improved developmental outcomes and reduced need for more intensive services later.

H7627 would also establish an Implementation Advisory Board to help ensure the program is rolled out effectively for families, providers, and school districts.

Ensuring a seamless transition for young children with developmental delays is both a moral and practical imperative. By closing this gap, Rhode Island can better support children during a critical developmental window and set them up for success in school and beyond.

We respectfully urge your support for H7627.

Thank you for your consideration and your continued commitment to Rhode Island's children and families.

Sincerely,

A handwritten signature in cursive script, appearing to read "Tanja Kubas-Meyer".

Tanja Kubas-Meyer  
Executive Director