

Governor's Autism Council

MEETING MINUTES

Thursday, October 9, 2014
12:00 PM to 2:00 PM
Department of Health Services
1 W. Wilson Street, Room B155
Madison, WI 53707

Council Members: Nissan Bar-Lev, Wendy Coomer, Vivian Hazell, Glen Sallows, Pam Lano
Council Members Absent: Rose Helms, Milana Millan, Michael Williams
DHS Staff: Julie Bryda, Rachel Currans-Henry, Dan Kiernan, Autumn Knudtson, Susan Larsen, Bill Murray, Camille Rodriguez
Public Attendees: None

The meeting commenced at 12:07 PM

1. Welcome and Introductions

Bill Murray, DHS staff to the Autism Council, welcomed members of the Council and Department of Health Services (DHS) staff. Attendees introduced themselves.

2. Public Testimony

No public testimony was provided.

3. Operational

- Council members reviewed minutes from the meeting held on July 10, 2014.
- Nissan made a motion to approve the July 10th meeting minutes with a slight change under Bullet 9 clarifying the county wait lists to be non-autism and correcting Pam's name to read Lano; Pam seconded the motion; motion carries.

4. Scope of the Council

Wendy provided an update on her conversations with the Governor's office pertaining to the potential expansion of the scope of the Council:

- Wendy confirmed that in the immediate future there will be no changes and the Council's scope will remain as is.
- There is a meeting in mid-November to discuss this in greater detail.
- Ensuring the Council's work does not overlap with the work of other existing Council's is important.
- There remains a need to increase Council membership and interested parties can follow the link and directions on the Governor's web page at <http://walker.wi.gov/governor-office/apply-to-serve/boards-commissions>

5. Centers for Medicare and Medicaid Services bulletin dated July 7, 2014

- Rachel Currans-Henry introduced herself to the Council in her role as Bureau of Benefits Management Director in the Division of Health Care Access and Accountability, and Camille Rodriguez re-introduced herself. A discussion regarding the [CMCS bulletin](#) dated July 7, 2014 pertaining to changes in the funding of autism treatment then occurred.

- On July 7th, 2014 the Centers for Medicaid and Medicare Services (CMS) released an Informational Bulletin to State Medicaid Agencies providing guidance on the treatment of children with autism spectrum disorders (ASD). CMS also issued an FAQ document regarding this Bulletin in September 2014.
 - In the Bulletin and clarified in the FAQs, CMS issued guidance on the types of ASD treatment services available for federal Medicaid funding, and this Bulletin signals to states that some treatment modalities for ASD may be approvable as a part of the 1905(a) regular Medicaid State Plan authority as opposed to a waiver authority.
- A brief review of the current autism treatment structure under the Children’s Long Term Support waivers was provided, as well as an overview of autism treatment services as provided through the 2009 Autism Insurance Mandate was given.
- CMS is not endorsing or requiring state coverage of any one particular treatment modality, such as Applied Behavior Analysis (ABA). State agencies must determine what services are medically necessary and adhere to Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) obligations to provide medically necessary services to children from birth to age 21.
- CMS guidance means that states covering ASD treatment through a waiver process, including Wisconsin, will need to transfer coverage of at least some ASD treatment services from waiver to 1905(a) Medicaid State Plan authority.
 - Wisconsin will need to seek federal authority to change the way it covers ASD treatment, must work with CMS on how to do this, and this will take time.
- DHS intends to comply with CMS guidance and is reviewing its current program and policy requirements.
 - DHS has a workgroup in place to define ASD treatment services as a Medicaid benefit under its regular Medicaid plan in accordance with guidance from CMS.
 - Development of a new benefit structure will take time. While DHS is designing this benefit, DHS will comply with federal EPSDT requirements.
- Council members asked a number of questions and shared several thoughts based on past experience with autism treatment being covered under Medicaid prior to 2004:
 - Nissan asked about budget considerations.
 - Pam reminded the Council that treatment costs prior to the waiver were on a “runaway budget” and that there is a need for cost containment.
 - Pam mentioned some states limit eligibility by narrowing the eligibility under the Katie Beckett program, though this can impact other disability populations.
 - Vivian encouraged DHCAA to consider telemedicine and other options that promote both cost-savings and quality care.
 - Nissan mentioned telehealth speech services that currently occur in some states via Presence Learning.
 - Glen asked how this will be administered and how to give input to the Department.
 - Rachel responded that DHCAA will administer the benefit and wants to ensure member, provider, and family input through discussions such as the one at the Council today.

6. Division of Long Term Care (DLTC)/Bureau of Long-Term Support (BLTS) Updates – Susan Larsen

- Children’s Services Section (CSS) Programs Quarterly Data Report (Q2 2014)
 - Data report includes information on the Birth to 3 Program, CLTS Waivers, Family Support Program, Functional Screen, CompassWisconsin: Threshold, Katie Beckett Program, Fair Hearings and Appeals.
 - Report contains program enrollment numbers, trends, services, and wait list numbers.
 - Sue requested additional suggestions or edits to document prior to Departmental review and approval.

7. Meeting Adjournment

- The Council meeting adjourned at 2:00 PM
- The next Autism Council meeting is scheduled for February 12, 2015.