

Autism Council Meeting
November 14, 2011

Council Members: Nissan Bar-Lev, Terri Enters, Vivian Hazel, Rose Helms, Glen Sallows, Pam Stoika, Brad Thompson, Mike Williams

Facilitator: Kris Freundlich

DHS Staff: Sue Larsen, Julie Bryda, Bill Murray, Tracey Brent

Guests: Lana Collet-Klingenberg, Ph.D., UW Whitewater; Sylvia Fredericks, MPA, Invited DHS staff

Members of the public: Jill Rudman (provider), Jessica Schroeder (provider)

I. Welcome

II. Introductions

III. Approval of Minutes

- a. Nissan Bar-Lev made a motion to approve the minutes.
- b. Terri Enters seconded the motion.
- c. All approved.

IV. Department of Health Services-Division of Long-Term Care Treatment Review Committee—Lana Collet-Klingenberg, Ph.D.

The Department of Health Services, Division of Long-Term Care, has formed a Treatment Review Committee to identify and review research on existing treatments and will report their findings pertaining to the level of evidence supporting the treatment. This effort is consistent with DHS 107.035. Council members asked a number of questions and were supportive of the formation of this committee.

V. Fiscal Impact of the Autism Insurance Mandate—Sylvia Fredericks

Pursuant to a request from Beth Swedeen (via Nissan Bar-Lev) at the Board for People with Developmental Disabilities, Sylvia gathered information relative to the impact of the mandate on autism services in WI.

- a. Currently 33 states and Washington DC have an insurance mandate in place to cover autism treatment.
- b. 20 states have Medicaid coverage for autism services.
- c. Private insurance premiums have risen very little, averaging between \$12-30 a year.
- d. While the budget has remained the same for autism services in WI, a greater number of children have access to services as a consequence of the mandate.

VI. Bureau Updates—Sue Larsen

- a. Gail Propsom has been named Director of the Bureau of Long-Term Support.
- b. The Children’s Long-Term Support (CLTS) waivers renewal continue to move forward, and is in the final stage of approval from the Center for Medicare and Medicaid Services (CMS).
- c. The Children’s Services Section recently had a website redesign. It can be found at: <http://www.dhs.wisconsin.gov/children/index.htm>
- d. During the July meeting, the Council discussed the pros and cons to becoming a Department Council versus a Governor’s Council. During that time, the Council lacked a quorum. Terri Enters made a motion to move the Council from a Governor’s Council to a Department Council. Vivian Hazell seconded the motion, and all approved. Mike Williams will draft a supporting letter on behalf of the Council to DHS Secretary Dennis Smith.
- e. Breakdown of numbers
 - i. As of November 14, 2011 there are 5,035 children enrolled in the CLTS waivers.
 - ii. 880 of these children are receiving intensive autism treatment services.
 - iii. 1,513 of these children are receiving ongoing waiver services.
 - iv. There are currently 355 children on the intensive in-home treatment waiting list.

VII. Highlights from the October Intensive Provider Meeting

Bill Murray gave an overview of the October 13th meeting of all the Intensive In-Home treatment providers, including several highlights and discussions that took place, including:

- Proposed changes in autism treatment
- What it means to be a “mandated reporter”
- Defining “intensive” when children have severe behavioral concerns were some of the topics

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VIII. Technology and Waiver Funding Requests

- a. The Children’s Services Section has seen an increase in requests for technology-related items such as the iPad. Requests for technology need to be thoughtful and should include at least one recommendation by a person qualified to address the child-specific goals (e.g., from a speech therapist if the goals are communication related), and should be based on successful trials of the item.
- b. Currently Medicaid will pay for some “apps” for the iPad, but will not fund the device itself as it is not solely a communication device.

IX. Proposed Changes in Autism Treatment Services

a. Services Outside of the Home

Intensive services will no longer be restricted to the child's home. The decision to provide services outside of the home however, will need to be clinically appropriate for each child. Consistent with existing policy, schools however, will not be an option as a location for treatment.

b. Waitlist Policy

Children's Services Section staff have looked at several options for how to follow up on previous Council discussions related to more rapid access to treatment for the youngest children, consistent with the research relative to early intensive behavioral intervention. With the continued implementation of the Third Party Administrator claims processing it will be easier to track children who have access to autism services through private insurance. Proper and thorough education on the choices a family will have may help sort out wait list issues. Families with older children may opt for less expensive treatment which in return may allow for more children to be served at an earlier age.

Brad Thompson made a motion to encourage DHS to develop an equitable process to prioritize waiver slots to maximize early intervention for preschool children. Vivian Hazel seconded the motion, five favored and one opposed.

The Council agrees that a collaborative partnership needs to take place in advising families on the best choice not only for the child, but the family as well.

** Note regarding reimbursement rates and new services

Council members initiated a discussion regarding the inclusion of the new "consultative" level of treatment, and there remains support for this new service based on the realities of the busy lives of children and families, especially once children begin mandatory schooling at the age of six. Concern was expressed regarding the rate of reimbursement for this new service within the context of having to decide if it would be a viable business option. Council members encouraged DHS to share rate decisions as soon as possible to assist both providers and families in making timely decisions about the level of service they may desire.

X. Future Meetings

The dates for the 2012 Autism Council Meetings will be as follows: February 13th, May 14th, August 13th, and November 12th.

XI. Adjourned at 2:45 PM