



**JIM DOYLE**  
**GOVERNOR**  
**STATE OF WISCONSIN**

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February 7, 2005

Secretary Helene Nelson  
Department of Health & Family Services  
1 West Wilson Street  
Madison, WI 53702

Dear Secretary Nelson:

As you know, Wisconsin is the best state in the country in providing services to children with autism. I am happy to announce that my 05-07 budget will continue to fully fund autism services and will provide a \$9.5 million increase in all funds over the biennium. These funds will assure that the commitment to early and intensive intervention is maintained while also providing for ongoing services to children who have completed the intensive treatment phase. It is a priority to me that new children be able to begin intensive services in each year of the biennium and that any funds unexpended at the intensive level be committed to children receiving ongoing services.

Last year when the state was required to transition autism services from Medicaid fee-for-service to the Children's Waivers, families with autistic children reported significant challenges. In response, early last year I created a Governor's Task Force on Autism to develop strategies to improve services. The Task Force presented several recommendations to me in December.

One of the major recommendations of the Task Force was that the state reimburse only evidence-based treatment that is shown to be beneficial based on clinical trials or single subject design experiments published in peer reviewed journals. At this point, this definition would limit reimbursement to Social Communication and Applied Behavioral Analysis (ABA) therapies. I recognize how important ABA is, and I believe that it is the best treatment for most young children; however, I do not want to restrict access to other therapies that might work for children. The Task Force's goal of funding effective treatment is one with which I agree, therefore I will tighten up administration of the current program, but not at the exclusion of other therapies for children.

Another major recommendation of the Task Force was to change administration from a county to a state run system. I agree that it is essential that we have consistent standards, clear expectations and a strong statewide program; however, I do not want to put families through another transition. Instead, I want to streamline administration for providers and ensure that counties are disseminating information accurately. The Task Force is right that there needs to be strong statewide direction for this program.

In order to facilitate strong statewide leadership, I am creating a Council to advise the Department of Health and Family Services (DHFS) on the autism program. In addition, I am creating an ombudsman position to mediate disputes between families and DHFS, counties and providers. Many of the other Task Force recommendations outline further recommendations for the direction for the program, and I will direct the Department to advance many of the good ideas put forward by the Task Force. In addition, some items will be addressed in future legislation.

Immediately I direct DHFS to move forward with the following items to improve services to children with autism:

- Identify and pursue possible alternative funding sources for travel, especially funds that could be targeted to assist rural families and children in medically underserved areas.
- Develop travel options for rural and inner city families to consider when distance to a provider is an issue. Within the waiver requirements, and with parents and provider consent, allow flexibility in treatment delivery locations and modalities in order to reduce need for travel.
- Develop further policies to reinforce travel billing guidelines with counties.
- Create an ombudsman position within the office of program evaluation and audit services to mediate waiver service issues between families and DHFS, counties and service providers. Also, establish formal grievance procedures for families to use.
- Clarify policy to cap billing for collateral contact at no more than 20 percent of the child's calculated 6-month average allotted hours. Base the actual collateral contact on child's needs.
- Develop policies to clarify billing for collateral contacts to counties, providers, and parents.
- Seek an amendment to the waiver to allow certified behavioral analysts with a Ph.D. and experience with children with autism to be recognized as lead therapists.
- Work with the counties to improve administration of the program. Improvements should include training county staff as well as reviewing audit requirements and establishing procedures to streamline the administrative process for providers. Ensure case manager training. Conduct uniform training of case managers so that information is disseminated accurately and uniformly throughout the state.
- Send parents and providers specific instructions on how to request minimal case management services. Ensure that counties honor qualified requests by parents for reduced case management services. Create an easy to use form and provide examples for families that illustrate the information required on the form.
- Post all written program requirements and administrative information that is provided to counties on the DHFS website so that parents and providers can access the information. Mail the information upon request.

- Create a policy to allow families to use the hours they receive under the 3-year plan over a 4-year period while staying within the current budget.
- Reinforce with counties that families are allowed to carry over dollars from month to month to use later in the year in the on-going phase.
- Develop a method to track children who are continuing treatment in the on-going phase.
- Examine the issue of counties not placing children on Family Support waiting lists. If this is a problem, work with counties to rectify.

In addition, once the advisory council to the Department is appointed, I would like the group to examine the following issues:

- Provider staff training issues.
- Provider and parent strategies to recruit and retain line staff.
- Provider outreach efforts to recruit parents to work as line-staff.
- Alternative approaches to the current age restriction policy in the intensive phase.

Finally, soon I will form an inter-agency workgroup to examine the role of the schools in providing services to children with autism. DHFS will be asked to be part of this workgroup.

Thank you for helping me to improve services to all children with autism. In times of limited funding we must work together to be more efficient and accountable to all.

Sincerely,

A handwritten signature in cursive script that reads "Jim Doyle". The signature is written in black ink and is positioned to the left of a vertical line.

Jim Doyle  
Governor