

**Autism Council Meeting
November 19, 2012**

Minutes for 10/12/2012, a typo was corrected.

- Stacie Rulison moved to approve as amended
- Amy Matthews seconded
- Motion carried

Minutes and Agenda approved

Colleen Allen

Update on Private Insurance

- Blue Cross & Blue Care Network - Implementation of new insurance, access issues with criteria, parent complaints. There are three centers: Henry Ford Health System (HFHS), University of Michigan, Spectrum; Oakwood and Children's Hospital of MI trying to work with BCBS to become a center.

Liz Knisely - Do these centers have satellite locations?

Colleen Allen - HFHS has different locations and teams meet once a week; families have been given approval to go with ABA. Issue of reimbursement for BCBA's, higher reimbursement rate if you're licensed compared to those who are not. Calling insurer is not the answer. Should we bring a representative from a carrier to a meeting to help us understand this issue? Things are not moving fast. Parents from up north complain about getting down state to a center, so BCBS approved going ahead and getting ABA treatment. Do not know a single BCBA contracted with the insurers. BCBA's (independents and those in health systems) are attempting to negotiate for \$50 per hour, the national average. At one point it was \$36 per hour.

Kim Gaedeke - HAP is negotiating individual rates with providers.

BCBS discussion to invite Dr. DiFranco to come in and meet with Council

Bob Sheehan - Ask questions and bring answers in writing. Medicaid can't pursue Medicaid payment if the family has private insurance coverage.

Liz Knisely - If the private insurance maxes out the ABA benefit, CMH is the safety net.

Wayne Fuqua - Are we in agreement that this is in our purview? What is the process for complaints?

Elizabeth Knisely - Yes, we can invite the insurers to the council meeting

Action: Colleen Allen will send a letter as the chair to invite all insurance carriers to the January 2013 meeting.

Medicaid - Was not intended to have a gate through Medicaid as payer of last resort.

Kim Gaedeke - Find out what other insurers are doing. Will follow-up with Colleen Allen on contacts for the other carriers.

Colleen Allen and Stacey Rulison - Follow-up with BCBA's

Blue Cross Blue Shield for team assessments is submitting individual discipline claims for reimbursement

Self- Insurers (like MSU) are not required to offer ABA, but if they do, they can tap into the \$15 K fund.

Discussion around MSU supporting an autism diagnostic center; Brooke Ingersoll at MSU averages 3 to 4 evaluations a semester in the Autism Clinic.

Liz Knisely – Provided an update on the Medicaid Autism Benefit. DCH still working on the lawsuit, CMS, etc. make recommendation have 1915 i state plan amendment ready for CMS.

- 18 months through 5 years of age
- Early Intensive Behavioral Intervention (EIBI) – 10-15 hours per week, average of 12.5 hours
- Applied Behavioral Intervention (ABI) – 5-15 hours per week, average of 10 hours
- No phase in, will see appropriated amount for next year and then see what is out there in terms of research and will amend as we go and finalize negotiation w/class action lawsuit sometime after next week.

Jane Turner - If we go w/10-15 hours a week versus 30 hours, limited hours are very worrisome.

Liz Knisely - We only have so many dollars, what is best thing to do, do we hit less hours and hit more kids because not every child needs maximum coverage, what is the best fit for the most fit. This is a first step, this is a recommendation and don't know what plaintiffs will say.

Colleen Allen - Will get outcomes if can clearly document that you have trained the others to provide the NRC recommended hours.

Amy Matthews - National Research Council recommendation is 25 hours of structured training a week. Coordinate with the schools and train providers and parents. Schools provide training which is beneficial. How we coordinate the training?

Joanne Winkelman - Coordination will be key; what is happening in schools and at home.

Colleen Allen - This is one of the areas AAOM would like to work on with DCH. AAoM created a Medicaid workgroup (related to implementation of the Medicaid autism benefit) and includes several D-BCBA's and PhD psychologists, CMH providers, a pediatrician, and a parent) Topics explored include; what are the best models that create the best data so that you're closely monitoring, after 3 months there is feedback loop to progress and that children are benefiting or not benefiting. Consistencies/standard in training and service delivery.

Liz Knisely - We will know per child at each PIHP what the outcomes will be and performance measures will be stringent because CMS will require that.

Amy Matthews - Will there be anything that schools will be using for data collecting? Is there a way to support or track this? CMH/PIHP, how do we monitor?

Bob Sheehan- Case manager coordinator, maybe a training for case managers on autism.

Mike Caine - How do we coordinate this with ISD/Schools and autism programs/services?

Liz Knisely- Role of the case manager is to pull all of this information and integration of all of this.

Joanne Winkelman- Does lawsuit affect school based programs?

Liz Knisely- Lawsuit is against Michigan Department of Community Health for not covering ABA.

Joanne Winkelman- Can we use BCBA's versus licensed psychologists?

Colleen Allen - Medicaid providers are licensed and do not need licensed practitioners in a school setting, but to file a claim through Medicaid would have to be licensed.

Joanne Winkelman - Currently a BCBA is not licensed.

Sheri Falvey - Clarified the Medicaid benefit does not apply to schools.

Presentation of the ASD State Plan:

Get electronic signature page for Human Services Directors to sign.

Amy Matthews reviewed the Work plan and Recommendations for Immediate Action.

Amy Matthews- Plan is ready to go and MDE has reviewed.

Liz Knisely - DCH folks have reviewed.

Joanne Winkelman - Signature sheet.

Work with secretaries to get digital signatures.

Joanne Winkelman - Mike Caine will be asked to sign a digital signature page. Can we change the date to November 2012 as the final version?

Amy Matthews - Need everyone to sign and then the plan with signatures will be presented to the Council for adoption.

Priorities of the ASD State Plan – Review

Amy Matthews:

1. Autism Council - Established.

2. State Resource Center - Virtual Resource Center could be a physical center at some point, training, navigator program, etc. like OHIO program.
 - a. Website - Clearing house of information (not the Autism Council site), but how to walk through the service systems. This would be a good first start.
 - A neutral site, that had multiple areas of collaboration, would not be a place where families were pulled into a particular place, connect services.
(Colleen - If there are contributions to this larger resource but where do we begin?, need a process for handling this and do these individuals go on a subcommittee?, etc.).
 - Looking for multiple partners (GVSU Autism Education Center) to create the site. Have some funding to put together. Site is built, but needs to be populated with information. Identify who the partners are and establish a Workgroup who can filter information, etc. Need a webmaster. Two different skill sets, one as the webmaster, and one who understands content and how you organize it. How can it be set up so that people are able to navigate?
 - Joanne Winkelman - How do we choose what goes up on the website?
 - GVSU paid for the creation but it's a separate site and not a GVSU site. Need a subcommittee to do vetting, identify staffing needs and how to pay staff to do this. GVSU has initial funds to get initial content up but don't have funds for long-term funding for maintenance.
3. Service Coordination and Statewide Collaboration - ongoing process. Medicaid Autism Benefit is one example of coordination and collaboration. This might happen under other Workgroups. Not all of these need to be different groups.
4. Regional Collaboratives - Evolve over time. Have regional collaboratives primarily focused on education, through START program.
5. Early Screening, Evaluation, and Intervention for Young Children with ASD -This is gaining momentum; many things are happening with Medicaid.
6. Best Practices and Service Navigation Guidelines - We may want to establish a Workgroup for this. Missouri has several guidelines; Connecticut has guidelines, NY, Maine, etc. There could be something tangible developed quickly.
7. Crisis Intervention.
8. Training, Professional Development, and TA.
9. University Collaboration and Coordination - Establish a Summit, could be separate Workgroup, but may want to do later.
10. Data System.
11. State Plan Review, Report, and Update.

Other areas to look at are Focus Groups that could have workgroups. Transition has momentum so this may be where to start.

Colleen Allen - Focus Areas:

Family Engagement

***Early Screening, Evaluation, and Intervention Educational Services ***Transition and Adult Services Healthcare

***Autism Resource and Information Center - Website ***Best Practices Guidelines - Customize guide for Michigan ***Data Systems

What should a service system look like?

Mike Caine- Would be nice to get a reasonable collaborative together. Start somewhere and find out what we all know or don't know.

Transition and Adult Services Committee

- Autism Resource & Information Center - Website -Best Practices Guidelines -Navigating Systems -Data Systems

Council Members: Stacey Rulison, Anthony Ianni, Mary Chaliman, Mike Caine, Joanne Winkelman (consult), Bob Sheehan and Wayne Fuqua.

Early Screening, Evaluation, and Intervention Committee -Navigating Systems -Autism Resource and Information Center - Website -Best Practices Guidelines -Data Systems

Council Members: Jane Turner, Colleen Allen, Amy Matthews , Joanne Winkelman, Kim Gaedeke and Liz Knisely

Colleen Allen - Licensing BCBA is in process

Stacey Rulison - Tool for submission to participate in Autism Council Committee is online once website is up and running and bill be submitted to Liz Knisely and Colleen Allen for initial vetting. Put together synopsis of each workgroup. Include "Voluntary" no compensation, etc.

Autism Coordinator Update

Liz Knisely - Had 77 applicants for the Autism Coordinator position; will go through applications and interviews scheduled through beginning of December.

Best Practices Document

Jane Turner - Move to endorse best practices document with edits and supported by Mike Caine. Voted unanimously to support and endorse the document with edits prior to circulation.

Adjourn - Motion by Jane Turner, supported Mike Caine and adjourned.

Action Items:

1. Amy Matthews and Stacey Rulison - Charge for workgroups
2. Stacey - Edit subcommittee form (remove License number and insert explanation of workgroups and "voluntary" no compensation, instructions for completion of application).

3. Amy Matthews - Outline goals and recommendation areas from state plan to insert into document.
4. Colleen Allen - Work with Liz Knisely in editing the Best Practices documents prior to distribution (Kim Gaedeke will follow-up with Colleen Allen on this).
5. Colleen Allen to draft invitation to the insurance carriers to attend the next meeting of the council in January 2013
6. Amy Matthews to work on getting signature page for ASD State Plan routed.