



Michigan Autism Council

Michigan Autism Council Meeting Minutes

June 27, 2025

Attendance	COUNCIL MEMBERS	ORGANIZATION, REPRESENTATION
<input checked="" type="checkbox"/> In-person <input type="checkbox"/> Virtual <input type="checkbox"/> Absent	Dr. Amy Matthews, LP, BCBA Chair	Grand Valley State University, State-funded Initiatives
<input checked="" type="checkbox"/> In-person <input type="checkbox"/> Virtual <input type="checkbox"/> Absent	Dr. Jacob Daar, BCBA Vice-Chair	Northern Michigan University, State Universities
<input checked="" type="checkbox"/> In-person <input type="checkbox"/> Virtual <input type="checkbox"/> Absent	Jenny Piatt, MA Secretary	Michigan Rehabilitation Services, Employment Services
<input checked="" type="checkbox"/> In-person <input type="checkbox"/> Virtual <input type="checkbox"/> Absent	Dr. Colleen Allen, Ph.D.	Autism Alliance of Michigan, a Non-Profit Organization serving those with ASD
<input checked="" type="checkbox"/> In-person <input type="checkbox"/> Virtual <input type="checkbox"/> Absent	Krista Boe, M.A., BCBA	Acorn Health, Certified Behavior Analysts
<input type="checkbox"/> In-person <input checked="" type="checkbox"/> Virtual <input type="checkbox"/> Absent	Brian Debano, MPA	Department of Licensing and Regulatory Affairs
<input type="checkbox"/> In-person <input checked="" type="checkbox"/> Virtual <input type="checkbox"/> Absent	Emily DeLaGarza	Michigan Department of Insurance & Financial Services
<input type="checkbox"/> In-person <input type="checkbox"/> Virtual <input checked="" type="checkbox"/> Absent	Shannon Hinman	Michigan Department of Education
<input type="checkbox"/> In-person <input checked="" type="checkbox"/> Virtual <input type="checkbox"/> Absent	Dana Lasenby, MBA	Oakland Community Health Network, Pre-Paid Inpatient Health Plans/Community Mental Health Service Programs
<input type="checkbox"/> In-person <input type="checkbox"/> Virtual <input checked="" type="checkbox"/> Absent	Patricia Neitman, MS, LLP	Bureau of Children’s Service Coordinated Health Policy & Supports
<input checked="" type="checkbox"/> In-person <input type="checkbox"/> Virtual <input type="checkbox"/> Absent	Raymie Postema	Michigan Department of Health & Human Services, Recipient Rights
<input type="checkbox"/> Absent	Vacant	MDHHS Children’s Services Administration
<input checked="" type="checkbox"/> In-person <input type="checkbox"/> Virtual <input type="checkbox"/> Absent	Dr. Neelkamal Soares	Health Care Providers

<input checked="" type="checkbox"/> In-person <input type="checkbox"/> Virtual <input type="checkbox"/> Absent	Dr. Steven Tunnickliff, Ph.D.	Genesee ISD, Intermediate School Districts and Local Schools
<input checked="" type="checkbox"/> In-person <input type="checkbox"/> Virtual <input type="checkbox"/> Absent	Frank Vaca	Self-Advocate, ASD Community
<input type="checkbox"/> In-person <input type="checkbox"/> Virtual <input checked="" type="checkbox"/> Absent	Rachelle Vartanian	Self-Advocate, ASD Community
MDHHS STAFF		MDHHS REPRESENTATION
<input checked="" type="checkbox"/> In-person <input type="checkbox"/> Virtual <input type="checkbox"/> Absent	Dr. Erika Dianis, PsyD, LP	Bureau of Children’s Service Coordinated Health Policy & Supports
<input type="checkbox"/> In-person <input type="checkbox"/> Virtual <input checked="" type="checkbox"/> Absent	Heather Glidden, LBSW, QIDP, MS	Bureau of Children’s Service Coordinated Health Policy & Supports
<input checked="" type="checkbox"/> In-person <input type="checkbox"/> Virtual <input type="checkbox"/> Absent	Dr. Mary Luchies, Ph.D., LP, BCBA, LBA	Bureau of Children’s Service Coordinated Health Policy & Supports
<input type="checkbox"/> In-person <input checked="" type="checkbox"/> Virtual <input type="checkbox"/> Absent	Marina Wyrzykowski	Legislative Affairs

CALL TO ORDER

The Autism Council meeting was called to order by Amy Matthews at 9:05 am. A quorum was present for the meeting.

ROLL CALL

A roll call of Council members and MDHHS staff was completed.

APPROVAL OF PREVIOUS MINUTES

Krista Boe called for a **MOTION** to approve the April minutes. Jacob Daar **SECONDED** the motion. The **MOTION** carried.

PUBLIC COMMENT

- None

STATE AGENCY UPDATES

Michigan Department of Health and Human Services (MDHHS) UPDATES

Budget - no updates

Legislative - Marina Wyrzykowski was unavailable to provide updates.

Bureau of Children's Service Coordinated Health Policy & Supports: IDD and ASD Section:

- QBHP policy will end September 30, 2025. The State Plan and Medicaid Provider Manual will be updated to reflect this change.
- Behavioral Health Treatment Technical Requirements: was updated September 2024 and it outlines the requirements for writing a behavior treatment plan. For example, if a limitation is established for a person, a set of requirements must be met. Additionally, the technical requirements discuss the composition of a behavior treatment review committee. Plans must be written by LBAs due to their specific training. [Technical Requirements for Behavior Treatment Plans](#)
- Discussion:
 - Neel: a movement has started to use AI for data collection and the creation of behavior treatment plans. The Mental Health Code requires person-centered planning and individualized plans, not boilerplate AI created plans. The use of AI will be brought up at the next recipient rights association meeting for further discussion.
 - Jacob: to limit freedom of movement the mental health code requires justification, certain documentation, and provides the rules. The Home and Community-based waiver rules, however, states that a restriction would need to apply to everyone within a home. Providers will need to check both the mental health code and waiver rules to avoid violations.
 - Frank: parents and guardians will need access to this information. Additionally, a restriction must be put into the person-centered plan with the individual present and any type of restriction must be voluntary and requires consent from the individual before put into action.
 - Raymie: permission has been granted to open Part 7 of the Administrative Rules which is where the language is for technical requirements, behavior treatment plans and reviews. Language will be strengthened.

DIFS UPDATE

- No update

LEO/MRS UPDATE


- Michigan ranks #1 nationally in adult credential attainment (i.e., certifications, licensure, degrees) and serves more job seekers than any other Midwest state. This is a collaborative effort between the Bureau of Services for Blind Persons, Michigan Rehabilitation Services, and Workforce Development in partnership with Michigan Works Association.
- Launch of the MI Hub for Manufacturers: a digital platform for small- and mid-sized manufacturers to stay competitive in the clean energy economy.
- System Modernization Update: LEO's Employment & Training division will replace legacy systems and improve integration across workforce programs
- Public-Private Partnership with DTW and Consumers Energy
- Discussion:

- Information about these opportunities are being shared through press releases as well as through transition counselors so graduates are aware of alternative options to the college track. VR and Michigan Works are making connections.
- CMH personnel should be made aware of these opportunities as well to facilitate a warm handoff.
- Transition programming is being widely done across the state but better coordination and handoffs are needed
- ProjectSearch provides great momentum and leverage points across broader communities. ProjectSearch has been done in Michigan in partnership with MRS, ISDs and business. MRS cannot fully fund ProjectSearch programming but can provide some support to an individual student with a disability who may be participating. In Ohio ProjectSearch did a great job partnering with healthcare systems. There continues to be a need for people to enter healthcare and there are many job opportunities within these systems for individuals with disabilities.
- For organizations that have vacancies, what is the mechanism for determining barriers and can grants be used? A great opportunity exists where, for every dollar provided by the state, \$3 and change is leveraged by the Department of Labor and Economic Opportunity (LEO) from the U.S. Dept of Education. However, with increased legislative support for funding, LEO could fully access their federal award. This would allow state VR managers to focus more on programming rather than seeking match agreements. Full Council support for adequate General Fund (GF) funding would greatly enhance our efforts.
- Employers need to hire more individuals with disabilities, not just a few. The benefits include a strong ROI and increased business. However, more effort is needed to overcome barriers, especially as DEI initiatives are reduced.
- Universal Design can be used to benefit everyone in a business but organizations are narrowly focused on making accommodations instead of using this inclusive approach. To start, a cultural shift is needed around procedures, processes, and HR to build a workplace of inclusivity before placements can be done.

MDE UPDATE

- Michign Teacher of the Year is accepting nominations for outstanding Michigan educators. Visit www.michigan.gov/mtoy to submit nominations.

OLD BUSINESS

- Action items from the April meeting reviewed.
 - LARA: no legislative update on LLP/Supervision bill or HB 4146
 - ABA job coaching: Jacob is looking for faculty who specialize in this or provide training. He is reviewing the Scale Project out of Rutgers.
 - Amy: Suggested looking into Western Michigan University's program called [PROMOTES](#) which supports employment.
 - Council vacancy: one application has been submitted and is awaiting Governor's approval
 - Michigan Alliance for Families:  MAF response to DOE closure.pdf

- Waitlists: there are no children on waitlists for the Children’s Waiver as additional slots were added. There are no waitlists for SEDW.
- Annual Report update: Jacob needs information from the departments, specifically data. This update will guide budgetary decisions and highlight where those budgetary decisions were successful. If a program is not a line item, Jacob needs 1-3 sentences about what the program accomplished with specific data (i.e., served X number of children, etc.). A better way of defining information for the annual report and a way to track the information needs to be defined moving forward. The annual report needs to be wrapped up. The legislative section and introduction are finished.
- Autism State Plan update: it is about 75% complete but needs additional information before dissemination.
- Autism State Plan Survey update: the initial summaries are complete and a deeper dive into those sections is starting. The school professional survey results will be shared during the August meeting. Adult data results will be rolled out as it relates to transitions.

NEW BUSINESS

- Focus on Schools Series: Panel discussion-Behavior Analytic Processes in Schools (Abbey Mix-Kent ISD, Krista Boe-Acorn/MiBAP, Gina Sanderson-Lenawee Public Schools and START Consultant)
 - Behavior analysis is effective for instruction and behavior support
 - Collaboration and coordination are critical elements between families, outside providers and schools
 - Reminder to reference-Guidelines for the Provision of Applied Behavior Analysis in Public Schools is available
 - ABA is not just a service but a way of using the principles and practices of behavior analysis to support students in schools.
- Discussion Questions:
 1. What do behavior analytic practices look like in schools?
 - Start by building student/IEP teams, developing supports for all learners, using neuroaffirming and basic foundational teaching practices and then determining which students need more than universal supports. Then be intentional about developing a plan to address missing behavior skills, monitoring progress and making adjustments based on data, not opinions, as needed. It's also about teaching the science of teaching, behavior-planned interventions, reinforcing skills taught, and redirecting when an error occurs. Parents are being taught that ABA is embedded into the learning environment for all students to benefit.
 - Colleen: At what point is a more intensive approach needed when behaviors are disruptive and make the environment unsafe?

- Abbey: In our county we use a 3-tiered approach with the behavior consultants: 1) provide universal, visual, communication, peer-to-peer, and other supports, 2) LBA works directly with team members, observing, making changes to systems/supports/plans for students with more complex needs, and 3) LBA implements and runs the plan in the classroom while modeling and coaching staff before fading out completely.
- Krista: As a LBA, who isn't working in a school district, we were getting called in for PFA SBT support but this has occurred less over the last 10 years as schools employ their own behavior analysts. Many schools still aren't equipped to manage severe and intense problem behaviors. The 3-tiered approach is commonly used in schools but PFA-SBT is the exception not the rule. This model should be replicated across the state.
 - Abbey: Some of the time tier 1 and tier 2 supports are not being implemented with fidelity.
- Neel: What practices are followed or recommended for students who are receiving both ABA and medication management and can this process be improved?
 - Abbey: We should be aware of the medications prescribed, know when they are taken, when they might wear off, and collect data that would be helpful to the prescribing physician. The physician should also identify what data are helpful for them and educate the LBA on possible side effects to watch for throughout the day or if a medication is held for a time period. It is also important to have a contingency plan for families when the medication runs out or if it is paused on the weekend or for an extended time.
- Steve: 1) To what extent do you work with private providers?
 - Gina: We ask permission to reach out to the provider, invite them to our meetings, and they help us problem-solve, brainstorm and share information so we can support in the school what they are already doing outside the classroom.
 - 2) How does this look different in a center-based program?

- Abbey: In our regional programs students spend the majority of their day in that classroom that is housed within a general education setting as compared to a center program which only has students with a disability or IEP. There aren't many differences across settings but there is room for improvement in Kent Co. for collaboration between outside providers. When a student attends school M/W/F and receives ABA on T/R elsewhere, the school team doesn't know what the student is working on in ABA or what their targets are. When two teams are working with a student, collaboration is critical so the teams aren't working in opposite directions. Professional humility will be required to create structure and clarity around working together.
- Neel: For students entering school and who are faced with X number of hours in school which cuts into X number of hours of ABA, how do families advocate, especially if they want to start out with a balance between the two?
 - Abbey: We are going to offer a full day as required by federal law and to avoid civil rights violations. But if at the same time we offer the full day and the family chooses to pull their student, we need to work together to collaborate and bridge the gap between skill set and attending a full day while honoring the family's wishes. The student would be marked as an excused absence and then the team would work to close the gap by implementing effective outside strategies into classroom supports in the form of accommodations, curricular modifications, and providing coaching and consultation to support the staff.
- Jacob: As BCBAs, how are you funded and included within your school structure?
 - Abbey: Going back 10 years, individuals needed to be dual certified (i.e., LMSW and BCBA or school psych and BCBA). Under our coaching structure we have been able to hire LBAs and BCBAs.
 - Gina: All the behavior consultants are employees of the ISD. When the superintendents of the 11 districts decided they needed more behavior support, the district supported

extra positions. I think it is funded through general funds and special education funds but we don't bill Medicaid because our service isn't written into IEPs as a direct service, we are a countywide support.

- Krista: in Florida, modifiers are used for the different settings (i.e., home, center-based, community, school) but the care is provided in the same way. Across the seven states where we provide care, states that are more liberal in allowing BCBA's into schools have poorer rates overall for care delivery and are not funding the benefit.
- Steve: Do you have a separate program for K-3 setting?
 - Gina: We don't have a lot of center-based options so students are in an integrated environment. We work on teaching pivotal skills to help those transiting to other settings and address any identified needs.
 - Abbey: In Kent we have MTSS consultants who do work in the general education setting and who support making improvements to the environment in terms of tier 1 and tier 2 supports and not individual students until data shows tier 3 supports are needed.
- Colleen: It's important to distinguish between BCBA's who are hired by and working in schools vs BCBA's who are providing a medically necessary treatment. Both have specific but different goals and objectives which could affect how they are funded.
- Jacob: What qualities of your district or aspects of your administration help you be successful which could be replicated?
 - Abbey: we don't have a perfect system. We work with district teams that don't want to work with us (ISD), who have practices where they move students to more restrictive settings, engage in emergency seclusion/restraint when it's not appropriate or are suspending students instead of putting the proper supports in place. To be successful here we have to be behavior analysts to the adults and shift our mindset from "the student is our client" to "the client is the team" to prevent alienation of the relationship with the school. We have used frequent redirection to shift mindsets and practices to build trust and rapport. If you shift the

thinking of an adult you shift the behaviors that they engage in and then we can go in and implement behavior analytic practices. It's challenging to have to monitor yourself but the moment you step into "I'm here to advocate for the student" you hurt the relationship with the school team.

- Gina: We have to be willing to model and coach the behavior we want to see because we are all in this together. Outcome data tells us if what we are doing is working. Teaming is the solution.
- Amy: What should providers be doing to make it work?
 - Krista: Difficult conversations are going to occur but they need to happen without imposing judgement. We all care about the student, want them to spend as much time in the community or school as possible but we have to work together to make it a reality.
 - Gina: We might need guiding principles for working together with community partners beyond that of an individual student.
 - Amy: We need to control the controllables (i.e., relationships, interactions with others, memorandums of understanding, setting guiding principles).

MEMBER UPDATES

- Federal funding update
 - Neel: Michigan Lend program received 68% of their funding so certain programming will continue for the next year.
 - Steve: It's June and we do not have a budget. We are concerned about Medicaid reimbursement for school based services and what other systems. down stream might be impacted (i.e., mental health services around 31N).
 - Jacob: There is a lot of anxiety around decreases in funding to university programs.
 - Frank: NDRC is doing their last cohort and I'm concerned about my own future.
 - Raymie: No one yet knows what will occur but everyone has been asked to look at their general fund dollars and consider how Medicaid programs and grants may be affected. There is a need to do general planning for the worst case scenario but not dive too deep until more is known.
- Jacob: We are in a transition time for accreditation from the VCS system and we do not have a verified course sequence for the BCaBA that is active in the state. This credential has historically only been recognized by Medicaid and most insurances do not pay

differentially for a BCaBA or allow them to supervise services. Many programs have closed this credential. Northern University and a few other schools have recently approved a 4-1 plan so undergraduates can start their masters program and ABA course sequence in their 4th year and graduate with their masters in their 5th year.

- Colleen: We received a significant donation from a foundation to address health access for people with autism and other disabilities. We are beginning a partnership with Henry Ford and Dr. Johnson to develop a lifespan clinic and playbook on how to replicate this in other clinics. I am looking for someone to take the lead for replication and scaling of the model across the state.

Michigan Autistic Adult Advocacy Committee: no updates

MOTION TO ADJOURN

Frank Vaca **MOTION** to adjourn, and Jenny Piatt **SECONDED** it.

ACTION ITEMS			
Who	What	When	Status
Jenny Piatt, Colleen Allen	Emergency Response Training	August meeting	Open
Jenny Piatt	Follow up with LARA about bills, licensure, LLP/supervision requirements	August meeting	Open
Jacob Daar	Look up resources or people who specialize in doing ABA job coaching. Look into WMU Promotes program	October Meeting	Open
Patty/Mary	Follow up on Council seat vacancy: Application submitted and being reviewed.		Open
State Plan Committee	State plan recommendations: universal design, ways to fill vacancies, securing funding sources, disseminating information, transition programming, use of DEI language		Open
Amy	August agenda items: Share school professional survey data and continue conversation around federal cuts and its impact on state budget. Add universal design to inclusion, peer support, and neuroaffirming practice	August meeting	Open
Jenny	October agenda item: regarding the school series focus on secondary transition and employment.	October meeting	Open