



**AUTISM COUNCIL MEETING MINUTES**  
**Friday, October 25th, 2024**  
**9:00 am – 12:00 pm**

<b>COUNCIL MEMBERS PRESENT</b>	<b>ORGANIZATION, REPRESENTATION</b>
Dr. Amy Matthews, LP, BCBA	Grand Valley State University, State-funded Initiatives
Dana Lasenby, MBA	Oakland Community Health Network, Pre-Paid Inpatient Health Plans/Community Mental Health Service Programs
Emily DeLaGarza	Michigan Department of Insurance & Financial Services
Dr. Jacob Daar, BCBA	Northern Michigan University, State Universities
Dr. Jeanette Scheid	MDHHS Children’s Services Administration
Jenny Piatt, MA	Michigan Rehabilitation Services, Employment Services
Krista Boe, M.A., BCBA*	Acorn Health, Certified Behavior Analysts
Dr. Steven Tunnickliff, Ph.D.	Genesee ISD, Intermediate School Districts and Local Schools
Dr. Colleen Allen, Ph.D.	Autism Alliance of Michigan, a Non-Profit Organization serving those with ASD
Raymie Postema	Michigan Department of Health & Human Services, Recipient Rights
Dr. Neelkamal Soares	Health Care Providers
Brian DeBano, MPA	Department of Licensing and Regulatory Affairs
Shannon Hinman	Michigan Department of Education
<b>COUNCIL MEMBERS EXCUSED</b>	<b>ORGANIZATION, REPRESENTATION</b>
Frank Vaca	Self-Advocate, ASD Community
<b>MDHHS STAFF PRESENT</b>	<b>MDHHS REPRESENTATION</b>
Dr. Erika Dianis, PsyD, LP	Bureau of Children’s Service Coordinated Health Policy & Supports
Heather Glidden, LBSW, QIDP, MS	Bureau of Children’s Service Coordinated Health Policy & Supports
Patricia Neitman, MS, LLP	Bureau of Children’s Service Coordinated Health Policy & Supports
Marina Wyrzykowski*	Legislative Affairs
Dr. Mary Luchies, Ph.D., LP, BCBA, LBA	Bureau of Children’s Service Coordinated Health Policy & Supports

\* Indicates the member joined virtually

- Multiple guests also attended in person and virtually.

### **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**

Jacob Daar called for a **MOTION** to approve the August minutes. Jeanette Scheid **SECONDED** the motion. The **MOTION** carried.

### **PUBLIC COMMENT**

- Lived Experience – Carrie Uthe shared her son's story and the difficulty they had with obtaining and maintaining needed services. She is a strong advocate and passionate about removing age restrictions for obtaining autism services.
  - Colleen Allen – The five-year state plan has adult services as one of its priorities.
  - Amy Matthews – There are self-advocacy groups also attempting to get change.
- Amy Matthews – Reminder of purpose of Council per Executive Order.
  - State plan
  - Recommendations
  - Update of the autism state plan every five years.
  - Coordinate and collaborate with state agencies.

### **Michigan Department of Health and Human Services (MDHHS) UPDATES**

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

- Dr. Mary Luchies- provided MI Medicaid ASD Services Overview and Update presentation
  - Highlighted historical coverage, ASD services now available under EPSDT
  - In 2023, 6,464 under age 14 enrolled in ASD services, budget = \$274,008,042
  - Best Practice Guidelines –will be updated this year with Dr. Brooklier
  - ABA must be provided by a License practitioner per Public Act 403 of 2016
  - October 2025, QBHP policy ending- current QBHPs must complete their BCBA and become LBAs or transition to other roles.
  - Guidelines for ABA in schools available soon
  - Boilerplate language updated
- Discussion:
  - Colleen Allen – requested breakdown of \$274 million

*Legislative Update:* Marina Wyrzykowski

- New bills introduced
  - Senate Bill 1005 (Huizenga)– provides funding for school safety and student mental health – SBO/LEGAL Co-lead, Referred to Senate Appropriations Committee.

- o Senate Bill 1026 & 1027 (McDonald Rivet)– creates adult day care facility licensing act-MiLEAP/TREAS Co-lead, Referred to Senate Housing and Human Services Committee
- o House Bill 5948 (Rheingans)– modifies use of seclusion and restraint in hospitals – DHHS/LEGAL Co-lead, Referred to House Health Policy Committee, lead agency will be reassigned to LARA
- o House 5974 (Rogers) – Provides licensing of prescribed pediatric extended care centers -LARA/DHHS Co-lead, Referred to House Health Policy Committee
- o Senate 195-918 – make changes to assisted outpatient treatment and court process for misdemeanors, received a hearing in early October this is public. AG led
- Updates
  - o Senate Bill 790 & Senate Bill 791 (Hertel, K., Santana)-provides home help caregiver council and prescribes powers and duties; modifies definition of public employee in PA 336 of 1947 to include reference to home help caregivers – DHHS/LEGAL Co-lead & LEO/LEGAL Co-leads, Signed into law on 10/9/24 as PA 144 and 145 of 2024
  - o Senate Bills 915-918 (Hertel, Santana, Irwin, Wojno)-makes various changes to the assisted outpatient treatment and court process for misdemeanor offenders-DHHS/LEGAL Co-leads for SB 915; AG/LEGAL/DHHS for SBs 916-918, Received a hearing in Senate Health Policy Committee on 10/9/24
  - o Senate Bills 922-925 (Klinefelt, Anthony, Hertel, Irwin)-provides for elder and vulnerable adult personal protection orders and establishes penalties for embezzlement from vulnerable adults-AG/LEGAL/SCAO Co-leads, passes the Senate and referred to House Families, Children, and Seniors Committee
- Discussion
  - o Raymie Postema - 2 bills (Weber)dropped this week, 1 has to do with Rights Advisory Committee and the other is related to changing language in Chapter 4 related to voluntary hospitalization.
    - Marina – Not provided in this update but will be available for next council meeting
  - o Jeanette Scheid– Asked if there were updates to HB 5114.
    - Marina – No current changes on status, house substitute 3 has been adopted.
  - o Colleen Allen– Informed the group that Weber’s office holds an autism caucus monthly.

### **LEO/MRS Update**

Jenny Piatt

- MIOSHA – Grant funding for small businesses for enhanced worker protections is open until \$500,000 funds run out
- SBAM-nominations opens for Michigan Celebrates Small Business Awards. Added disability owned businesses to the nominations this year <https://michigancelebrates.org>
- Minimum Wage Rate 2025 increases
- October is disability awareness month – MRS honors businesses and Michiganders with disabilities during 16<sup>th</sup> annual Champion Awards ceremony

Danielle Biddick

- Discussed how she leads Dell Technologies' recruitment strategy for hiring individuals with disabilities on the Global Talent Acquisition Center of Excellence team and manages the Neurodiversity@Dell hiring program. She drives partnerships and initiatives that foster a more inclusive workforce for team members with disabilities.
- Discussion-Council
  - Colleen: How many are working?
    - Danielle - We typically hire 20-25 interns over the summer and about 95% are hired full time. I'd say it's over a 100.
  - Is the neurodiversity program across the whole country?
    - Danielle - Yes, also in Canada and India but most of the work has been done in the US.
  - Are you finding that more employees are willing to disclose?
    - Daneille - Yes, we have seen self ID rates increases, more willing to disclose but also reach out for support resources.
  - Katie: Do you offer remote work or encourage relocation?
    - Danielle - Yes, most are hired remotely but we also have hybrid work (2-3 days in office), and some relocate
  - Jeannette
    - What is the intersection between coaching resources and health benefits (i.e., ABA)
      - Danielle - Through employee assistance program individuals are connected to needed resources and team members have a list of what is helpful for their neurodivergent staff.

### **MDE Update**

- No updates today.

### **Department of Insurance and Financial Services (DIFS)**

- No update

### **New Business**

#### *Mental Health Parity – Dr. Colleen Allen, Dr. Mary Luchies*

- Parity specifically looking at the cut age cut of 21 for ASD services.
  - Mental Health Parity and Addiction Equity Act (MHPAEA) – requires group health plans and insurers to provide coverage that is comparable to their coverage for general medical and surgical care.
  - Limits on ABA: quantitative (e.g., age limits, dollar limits, visit limits) and non-quantitative (e.g., utilization management, fail first, using specific diagnostic tools) must be no more restrictive than the predominant limitations applied to all outpatient, in-network, or outpatient out-of-network benefits.
  - Since September there are new enforcement changes in language around the federal law
- MPHEA CAA Final Rule

- o September 23, 2024: implementing amendments made to the Consolidated Appropriations Act of 2021 to the Mental Health Parity and Addiction Equity Act (MHPAEA).
- o Application of MHPAEA to IDD including ASD (clearly included vs questionable as MH benefit)
- o New requirements and changes to comparative analysis and applicability date Jan 2025

#### *Autism Law Summit – Dr. Mary Luchies*

- Medicaid coverage for ABA is available for adults. States are using statute, policy or litigation to provide ABA for adults.
- Currently BCBA's are not accepted through Medicaid to practice independently due to language related to CMS policy. CASP is working with CMS to clarify language. CMHs are using financing other than EPSDT and single case contracts to work with families to provide ABA for adults.

#### *Discussion – Council*

- Jacob – the argument that ABA is experimental vs an established treatment does not hold up in court. Medicaid will accept a TLLP/LLMSW dx while other insurers will not because they are under supervision/internship phase of training.
- Dana – If supervision of TLLP/LLMSW is provided by a fully licensed supervisor who signs off on the diagnosis, there shouldn't be any barriers, but insurance companies provide barriers.
- Colleen - We need intensive training for BCBA's who want to focus on adult services.
- Mary - CMHs are looking to have BCBA's expand and be utilized in more spaces other than just ABA. We are working on putting together a training plan for our ABA providers to work with adults, adolescents, and those with severe and challenging behaviors.
- Jacob - Policy dictates practice and policy will dictate training. 1) Feels this is a uniquely Medicaid parity issue with no clear path forward for private providers. 2) If billing codes become available to serve people of all ages this will incentivize agencies to provide services for adults
- Amy – Questions – What is the role of the council in parity. How does this inform the 5-year state plan? What actions can we take? How will actions impact access to adult services? Who are the key stakeholders? What are other states doing?
  - o Jacob - Development of ABA benefits and workforce capacity is having state directed training programs, continuing education with ACE providers, ABAI is beginning a micro credential.
  - o Colleen- 1) education is needed. There is too much inconsistency across the state, some CMHs are using unique coding or coding through non-ABA codes for BCBA's to provide services. 2) – Need clarification around how ABA can be delivered beyond age 21 for Medicaid eligible population. Funding is necessary.
  - o Jeanette- Was a response provided or are we asking for clarification to remove the age cap? Removing the age cap would be the first concrete step, followed by language and policy supported by the council and state plan to have clarity for lifespan appropriate services and supports.

- o Neel- For those individuals who never received services, those who were diagnosed later or those who meet criteria and want services the challenge is gaining access because adult providers are not adept at understanding the role of ABA (e.g., referral process, educating providers outside pediatric training programs).
- o Jacob – Possible action steps – determine what is being provided and who is accessing it by completing an assessment (number with ASD dx receiving CLS services, who received H0032 assessment and behavior support planning, who is completing assessment, how are plans being implementing, how are plans implemented (behavioral technicians vs life skills training or daily support staff). For ABA services, it may require a redirection of the funding source or clarification on who provides the services.

## **Old Business**

### *Previous action items*

- All- Distribute survey for the ASD Plan Update. – Completed
- Mary- Share the Medicaid and School Policy- ABA in schools
  - o MDE editing document but will be released soon. Not policy so no requirement for public comment.
- Amy- Create worked examples around ABA in school
  - o will be provided at December meeting
- Colleen- Follow up on license designation regarding driver’s licenses and license plates
  - o will be provided at the December meeting.

### *Update 2024 Autism State Plan progress*

- Going through survey data and using previous autism state plan to help direct 2024 recommendations. Format changed slightly to ensure targeted recommendations that are doable and measurable
- More than 3000 survey responses across all groups
- High priority items across nine stakeholder surveys were 1) access to clinical and healthcare providers trained in autism (e.g., speech therapist, psychology services, physicians, psychiatry), 2) specialized services of children and adults with severe problem behaviors, 3) access to childcare/respite, and 4) access to community social opportunities for children and youth.

## **Member Updates**

### *Autism Council Appointments/Reappointments*

- Healthcare providers – Dr. Neel Soares (reappointment)
- Non-profit organization serving those with ASD – Dr. Colleen Allen (reappointment)
- Parent/ASD – Rachelle Vartanian (new council member)
- University – Dr. Jacob Daar (reappointment)

*Michigan Autistic Adult Advocacy Committee-* group of autistic individuals that come together to ensure autistic voices are heard.

- Current focus: reviewing and understanding the Michigan ASD plan as it pertains to goals for adults
- Long-term goals: developing relationships to be able to conduct a statewide survey

- Accessibility: ensuring documents (e.g., executive summaries) have easy read format and compatible with a screen reader
- Help applying for SSI and SSDI and other benefits: Full Spectrum Agency worked together with AAOM to host a session for members to hold an open discussion about service gaps/needs and application for SSI/SSDI was greatest need

*Upper Peninsula Association for Behavior Analysis conference*

- November 7-8: focusing on language acquisition
- Free for students, hybrid first day, second day all in-person.

*Behavior Treatment Plan Review Committee Technical Requirements*

- As of Sept 2024, are attached to both CMH and PIHP contracts.
- The mental health code and administrative rules clearly state how to address severe behaviors
- If there are limitations on rights or any intrusive interventions being used in response to severe behaviors that it must be reviewed by a specially constituted body (e.g., behavior treatment plan review committee at CMH).
- Problem: “Plans” that limit someone’s freedoms are being presented as plans but are not grounded in ABA principles.
- Requirement: if there is going to be a functional behavior analysis or plan written using ABA or ABA-like services it must be written by an LBA. As of Sept 2024, these technical requirements were attached to both CMH and PIHP contracts. PIHPs have signed off and CMHSPs are still signing. FAQ document being created. Technical Requirement located on BPHASA website.

**Motion to adjourn**

Jeanette motioned to adjourn, and Jenny seconded it.

<b>Action Items</b>			
<i>Status (Open) (Complete)</i>	<i>Description</i>	<i>Owner</i>	<i>Target Date</i>
Open	Determine 2024 Autism 5-year State Plan recommendations <ul style="list-style-type: none"> <li>● Clarify/Define “remove age cap”</li> </ul>	All	Ongoing
Open	Create worked examples around ABA in schools	Amy Matthews	December
Open	License designation regarding driver’s licenses/ plates	Colleen Allen	December