Iowa Autism Council Meeting

Final Minutes 9-9-15
(Approved 11-10-15)

Meeting minutes taken by Beth Buehler-Sapp

Present: Rachel Heiss, Erika Hertel, James Curry, Connie Fanselow, Theresa Croonquist, Steve Johnson, Jeffrey Jennings, Tara Underwood-Levin, Angela Logsdon, Steve Mueller, Angela Burke-Boston, Jenny Phan, Jan Turbes, Sean Casey, Wendy Trotter, and Beth Buehler-Sapp.

Absent: Becky Harker, Mary Jackson, Alyson Beytien, Frank Kohler, Matthew O'Brien

Guests: Peggy Swails from Child Health Specialty Clinics @ the UIHC RAP Program.

The group went around the room and gave introductions as is the starting practice at every meeting.

Council Members reviewed the draft minutes from the June 12, 2015 meeting and voted on them. Rachel Heiss made a motion to approve the minutes and James Curry seconded the motion. Minutes passed.

James Curry informed council members that Senate File 505 had passed.

Wendy Trotter told the council that $250,000 of the Autism Support Program fund has been set aside specifically for a BCBA/BCaBA education grant fund. This education grant program will be managed by Iowa Department of Public Health. Wendy, Sean, Connie, and Laura recently met with the Iowa Department of Public Health to discuss this new grant program and to give them some background information on the Autism Support Program and what this grant program is intended to do.

James Curry asked if the only BCBA training program going on was at Briar Cliff University. This program has had low participation. There is hope that Briar Cliff may begin to offer night and weekend classes to give professionals interested in pursuing a BCBA an opportunity to enroll, which could potentially increase the number of people pursuing a BCBA. Conversation was tabled to wait until Sean Casey arrived to give more information on Briar Cliff’s program.

Steve Johnson told the council that July of 2015 was a record month for expenditures for ASP with over $19,000 spent serving 8 clients. Both June and July there were 8 clients receiving steady services. There is 2 million dollars in total funding available thru 2016 for the Autism Support Program and expenditures up to July 2015 equal $123,900. James asked the council, “Is anybody getting any feedback on why the usage is so low?” The consensus was that the majority of applicants who are being denied are over the income guideline. Steve Johnson recommended the council propose to legislation to look at revamping the income guidelines – just looking at total income doesn’t give an accurate picture; need to look at adjusted income/expenditures.

Erika Hertel asked the question “Should we send anything to legislators prior to convening so they have the information in their minds?” James suggested that this afternoon the group could put together collective pitch items for our legislators.

Jenny Phan posed the question “Are there people turning in applications without denial letters from their insurance companies?” Connie Fanselow stated that often an applicant can submit a benefits summary letter from their insurance company with their application to verify lack of coverage.

Jenny also reported that a common problem occurs when a person’s benefit plan states that certain benefits are covered but that there are no providers in network in the immediate geographical area.
Jan Turbes reported that schools in her area are not promoting the ASP program. Wendy stated challenges are arising when students are being regularly pulled from school during the day for outside/private ABA services, causing them to miss core instruction and potentially interfering with the child’s right to FAPE. James asked, “Are there any thoughts as to how the services could go into the school?” “How can you get both and satisfy both sides?” Wendy reported that there are some school districts who are contracting with outside providers for ABA services, and some schools who have BCBA’s on staff who can assist with embedding ABA services in the school day – but these are not the norm. Many AEAs also have BCBAs on staff that can provide some consultative services to schools, but often the demand is greater than the supply.

**HRSA Grant - Benefit Rollout Plans**
- Has a year 0-5 core group
- RAP team establishes relationships with AEA to help disseminate the information.
- Facebook, Twitter, Pinterest, & Instagram are all sites to put out information.

With the Medicaid Modernization and the switch to the new MCOs, Steve Mueller asked Steve Johnson; “What is the future of ASP after January 1st?” Steve J reported that ASP will be at the discretion of DHS, but he suspects that it will shift to either one or all of the new providers. Magellan intends to assist with the transition as best as they can.

**Steve Mueller shared his fear that, “The eight ASP clients will probably get lost in the shuffle”.**

The state’s current contract with Magellan will end on December 31st and starting January 1st the process with work as follows:

- The State has chosen 4 MCO’s to provide services to clients available for services through state coverage. Clients will have to choose between the 4 MCO’s to select their desired provider. They will not be able to switch back and forth between providers.
- ABA under Medicaid has to be covered under each health program
- Providers have experience with other states so they may be bringing in other options/ideas that Iowa has not had on their radar.
- There are approximately 560,000 individuals receiving Medicaid
- Steve Johnson said you could take ASP as a small program and distribute between the 4 chosen programs or keep with one.

The transition is very important. Steve recommends that the council invite the 4 chosen vendors to a council meeting to answer questions.

Rachel Heiss asked, “Who puts the client in their respective MCO?” Steve said, “There will be an enrollment broker for this process.” Between the four MCO’s there are 25,000 providers. Each MCO will probably have to have legal contracts with each of these 25,000 providers.

The question was asked, “Has anyone used Project Impact?” (This is through the University of Iowa) They provide parent training ranging from a group program to an individual program.

Dateline (4 months ago) did a special report entitled – “Transitioning Kids after High School” We’re missing the boat on helping to look at what we could be doing for high school-aged individuals with autism.

Rachel Heiss mentioned that in the Psychology field people tend to stay where they took their internship. Often, if individuals are sponsored (education paid for) there is some type of contractual agreement in place for work/residency requirements for a stipulated period of time.
Jenny Phan asked, “Is there any thought of Iowa becoming a mandated state?” (in regard to insurance mandate for autism services).

Angela Burke Boston spoke of the Biologically Based Mental Illness Mandate which covers the following biologically based disorders:
  a. Schizophrenia.
  b. Bipolar disorders.
  c. Major depressive disorders.
  d. Schizo-affective disorders.
  e. Obsessive-compulsive disorders.
  f. Pervasive developmental disorders.
  g. Autistic disorders.

James suggested that we put a working list together of politicians who are supportive of autism/autism services, etc.

Family Navigator through UIHC – diagnostic providers get information to the family navigator in the region.

James Curry asked, “How Telehealth is working and is it expanding?”

Telehealth can be reimbursed through ABA Medicaid Services.

Wendy gave a brief update on the Autism Navigator project for Early ACCESS providers. Autism Navigator® for Early Intervention Providers - Knowledge and Skills, is a 30-hour, interactive web-based professional development course designed to increase the capacity of early intervention providers to better identify and serve infants and toddlers with or at risk for Autism Spectrum Disorder and their families. Over the summer an Implementation Task Team met and developed an implementation plan which included participant selection criteria, timelines for training, provider coaching guidelines, a communication plan, administrator and participant agreements and establishing implementation frameworks to enable scale-up and sustainability.

An update was provided to the council the status of the “Iowa Autism Spectrum Disorder Strategic Plan”. The strategic planning committee has continued work on a draft of a strategic plan with the following vision and mission:

- The vision of the Strategic Plan is to ensure that all Iowans with ASD have the opportunity to develop the skills and knowledge necessary to live independent and interdependent lives within the community.
- The mission is to build the state infrastructure for comprehensive, lifespan supports to individuals with ASD and their families through access to information and resources, coordination of services and implementation of evidence based practices.

The committee hopes to have a draft complete for the council to review by our next meeting.

**2016 Goals:**

The “Iowa Autism Council 2014 Priorities” legislative report (December 2014) included the following recommendations regarding autism services in Iowa:

A. The Legislature has stated it will not consider any insurance mandates in the coming Legislative session. However, if the State of Iowa is to make real progress in its current efforts to supports individuals and families affected by ASD, meaningful insurance reform is needed in both Medicaid and non-Medicaid programs to continue to provide access to medically necessary care and to expand the provider network in Iowa.

B. The process required to implement rules to administer the $2 million Autism Support Fund resulted in a shortened window for submitting eligible claims. The Council feels that the current age limit restricts the fund to mainly reimbursing services related to early skill acquisition which has contributed to
underutilization of the fund. The Council would encourage the Governor and the Legislature to consider amending the age limit for the Autism Support Fund.

C. Transition Services will continue to be an area of concern for individuals on the autism spectrum as they age out of the education system. These services will assist individuals with autism in additional education, career or vocational training and placement as well as support once placement is achieved.

D. Iowa needs to invest in community and residential housing options that will allow individuals with autism to be as independent as possible. At the same time, we need to ensure that appropriate alternatives and resources are available to support individuals who may require intervention not available in the individual's chosen setting, rather than institutionalization or out-of-state placement.

E. While services are becoming available in more areas, there is still a lack of Autism Service Providers to deliver those services. Establishing funding to expand the infrastructure available to support telemedicine may help in the delivery of autism services to those rural areas where Autism Service Providers are not physically present.

More recently (in March 2015), the council drafted a letter to share with legislators regarding proposed changes to the ASP to promote increased use of the funds. The suggested changes included:

1. Expand the age range for eligible participants from the current 3 to age nine, to birth to age 21.
2. Expand the definition of an Autism Service Provider to include the BCaBA performing duties under the supervision of a BCBA as identified by the national certification board (Behavior Analyst Certification Board). Compensate the provider for services rendered by a BCaBA for “oversight”, “treatment planning”, and “assessment” at a rate between the BCBA and direct service professionals.
3. Consider paying higher reimbursement rates to attract more providers.
4. Modify income guidelines to allow more families to access the ASP service.

Council members agreed that many of the same recommendations still apply for our 2016 goals. James will begin work on drafting the 2015 report and goals/recommendations for 2016.

Wendy spoke of the National Autism Leadership Summit which is on November 17, 2015 in Columbus, Ohio. As a reminder, Wendy had previously informed the council that funding had been approved to send 2 representatives from the council to attend the National Autism Leadership Collaborative (NALC) meetings that occur bi-annually (fall and spring). NALC is a national organization that allows for collaboration at a national level to assist states with development and implementation of their state strategic plan for ASD.

NALC Vision Statement:
The vision of the National Autism Leadership Collaborative is enhanced state leadership and improved systems-wide capacity that strengthen outcomes for persons with autism spectrum disorder.

NALC Mission Statement:
The mission of National Autism Leadership Collaborative is:
- to gather leaders from multiple systems of services and supports to promote networking and information sharing across various levels of scale, perspective, and location.
- to equip these leaders with information and resources to be responsive to individuals with ASD across the continuum of service delivery.
- to create a broader, cross-system feedback loop that influences and engages decision makers to effect systems change and bridges policy and practice.

Currently, Wendy Trotter, Erika Hertel, and Peggy Swails are all going; however, there are still two openings left for council members who are interested in attending. Meeting expenses including travel and meals will be paid for through the Iowa Autism Council contract. Jane Turbes had already expressed interest in attending and Angela Logsdon also expressed interest in going. Rachel Heiss stated that she would take a spot if no one else can go.

Council members talked about how to get support and advocacy for an insurance mandate in the state. Sean Casey said that Dan Uno would be a big help in looking at this.
**Action Items:**
These folks volunteered to work on the following:

1. Someone will invite representatives from the 4 MCO’s to attend the next meeting.
2. Jan Turbes will draft a letter to Briarcliff University to make recommendations of how they can expand their program to be more inclusive of many different applicants who may want to take advantage of the new BCBA/BCaBA education grant funding stream.
3. James Curry will work on a draft of the annual recommendations which are required to be submitted internally from the Iowa Autism Council to the Governor’s Office and Legislature by December 12th each calendar year.

Rachel Heiss made a motion to adjourn the meeting and Jan Turbes seconded the motion. Meeting adjourned at 3:00.