

Meeting #4
12-3-07

Meeting called to order at 10:40 by Chairman, Bama Hager.

In attendance: Ryan Donaldson, Dennis Griffith, Bama Hager, Cam Ward, Myriam Peralta, Tony Fargason, Kim Beam, Jennifer Muller, Liz Dolgos, Jim Meador-Woodruff.

The agenda today is to review and get input on the preliminary recommendations that have been provided.

Announcements: Cam indicated he submitted HJR to extend the life of the task force and include 4 new members. Official appointees (25) will meet in January and vote on the recommendations. We will have 3 task force meetings in January, the vote will occur in Montgomery. We need to schedule another meeting with BCBS.

Bama will formally re-invite the members of this committee to remain in 2008 and allow anyone of them to step off at that time, if needed.

We anticipate that Autism legislative day will be April 3 at the statehouse. We will reserve a floor of the state house, we will have a press conference and we will have Governor Riley and Governor Folsom speak to us. The House will be opened that day by a person with autism. An additional meeting will be held to plan this awareness effort.

Autism Society is hosting Wrightslaw (Educational Advocacy Seminar) in January in Montgomery.

We will be focused on recommendations on private and public insurance. We did meet with BCBS and feel that we are in a good place. They asked us what we viewed as the most important services: diagnostics, slp, ot, behavioral based services. At this time you don't use the diagnosis of autism. Mental illness drug coverage is limited. We would like to be able to receive the needed psychiatric services under the autism diagnosis.

We need to think about what we ask for/prioritize. It is very clear that autism has neuro pathological implications. Other states have asked for this to be covered this way-Jim, Liz, Tony and Myriam will help with the wording of this.

We need to set a minimum standard when we talk about our ABA coverage.

BCBS identified that they covered the most medical, minimal OT, SLP, -there is some possibility of expanding the coverage in this area. Again, we need to pay for these services under ASD and not have to code under other eligibilities.

When we got together 6 months ago we wanted to make sure autism wasn't excluded.

In Georgia they mandated coverage for autism by not allowing denial of coverage.

We need to consider our hierarchy of need. We also need to talk about the quality of care by the provider as well.

In the meeting with BCBS we expressed the need for an appropriate diagnosis. We also emphasized OT, SLP. We also want ABA and coverage for medications.

Psychiatric care is carved out by BCBS. The network of services is something we should be aware of.

Can we agree that we want to increase OT/SLP? Yes

A1 is the desire to bill specifically for autism and not have any exclusion for autism. We need to recognize autism is a neurologic biological disorder with psychiatric symptoms and it is not static.

The ADOS is a gold standard and we should make that a recommendation.

We need to consider the type of provider we want to provide the service. We need to look at SLP board training and the scope of their practice. We should do the same thing with the ABA service. We might look at wording like: Appropriate behavioral interventions-for example ABA.

To recap:

- 1) Statement of our description of ASD
- 2) Appropriate coverage starting with diagnosis-standardized neurological testing such as ADOS (intensive diagnostic session)
- 3) Increase SLP/OT to double the number of sessions
- 4) Describe appropriate interventions and indicate ABA
- 5) Description of services being allowed for autism specifically (may need to come first)-that would cover the medicine piece

Lower tiered co-pays for children is something we need to be thinking about.

We should be able to start treatment as soon as the diagnosis is given. We should refer back to the AAP recommendations. We should encourage this. This should be left in.

BCBS had indicated that they would help us with a statewide awareness campaign. What is autism, how would you know if your child has autism, etc. Look at the possibility of them doing something specific.

Medicaid

Do we want to make specific recommendations in this area? We all agree that we need to push with Medicaid as well as 1/2 of our kids get covered thru Medicaid in Alabama. Kids only consume 30% of resources. This is getting us into the parity issue.

Ryan-when reviewing different states the Asperger Syndrome kids were covered under the definition of ASD (we should highlight it). The Commissioner said they would not endorse a waiver because of their funding issues.

We could send our report in 2 sections: what we need now and what we want in the future.

A practitioner should go to the next BCBS meeting. They are supposed to be sending us a list of what they currently provide in terms of autism.

These recommendations will be shaped by email and voted on by the appointees at the meeting in January.

Meeting adjourned at 11:47.