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## MINUTES

Name of Organization: Nevada Commission on Autism Spectrum Disorders

Date and Time of Meeting: October 27, 2020 4:00 p.m.

**Due to the COVID-19 outbreak, Commission members will be attending telephonically and via Microsoft TEAMS. Members of the public will also participate via teleconference**

### **Call to Order/Roll Call**

Ms. Lozano called the meeting for the Nevada Commission on Autism Spectrum Disorders to order at 4:01 pm.

Members Present: Trisha Lozano, Lenise Kryk, Julie Ostrovsky, Ritzie Gratrix, James Howells

A quorum was declared.

### **Public Comment**

There was no public comment.

### **Approval of the Minutes from the October 13, 2020 Meeting (For Possible Action)**

Ms. Kryk made a motion to approve the minutes with the removal of 'Regional Centers' on the October 27<sup>th</sup> meeting agenda. Ms. Ostrovsky seconded the motion. The motion passed.

### **Nevada Early Intervention Services Presentation**

Ms. Randi Humes presented and shared Statewide Autism Data. This data is posted and can be accessed online on the ADSD website.

Ms. Kryk stated that all the data that was provided is great. Ms. Kryk asked if NEIS can provide the amount and what autism services the 328 children are receiving?

Ms. Sprout answered that the MCHAT report is designed to meet the requirements of the NRS, which this report is an annual roll up report that is produced internally. Ms. Sprout said that Early Intervention Services is to meet the family's needs that they identify they want to work on, so the services are not driven on diagnosis. Ms. Sprout

said that NEIS is not able to go back and pull data, they can only provide current data; However, there is only a 2.5% of the entire NEIS population with a current diagnosis of autism. So, when NEIS try to look up what services they get, NEIS is hitting a suppression threshold. NEIS must be very careful moving forward and need to make some changes to the MCHAT report to make sure they are following these suppression requirements. Ms. Sprout added that NEIS is trying to figure out a way to provide the commission members with this data that is meaningful to them, but the numbers are so low, so they are having a hard time getting this. NEIS is thinking about providing the commission members with a percentage (Example: 2.5% population, "X" percentage is getting speech therapy) Ms. Spout asked the commission what their hopes and goals are out of the data because NEIS would like to be able to support data for the commission's reports, policy, legislation, etc.?

Ms. Kryk would like to see what services these children are receiving and how many hours they are receiving as well, prior to getting to ATAP or CCSD.

Ms. Sprout believes there are different ways to retrieve this data; Medicaid data is rich in data. In the NEIS report that was shared today, there was a list of services on there and every child has access to these services and the times are all different because all are individualized for each child. So again, NEIS can try and give that data rolled up as percentages but to compare that to the general population is not information NEIS will have on that kind of scale. Everything NEIS does is prescribed by the Part C regulation, which is their framework and focus. Ms. Sprout is trying to put together this requested data, but she is not sure it would be available before they submit the Biennium report.

### **ATAP Presentation**

Ms. Jayme welcomed the new commission members and is excited to see the commission expanding.

Ms. Jayme gave an update in the LCB audit – ATAP met with them and a couple things that came up was their deadline is coming up and planning to present the final product in January at the Legislative Audit Subcommittee. No date is set yet, but it will be sent out before. They are still actively working with ATAP in finishing up some clarification of data, working with the board and DHCFP as well.

Ms. Jayme presented and shared data. This data is posted and can be accessed online on the ADSD website. This presentation is divided into three sections; Types of Evidence-Based treatments funded by ATAP, ATAP Provider Information and Objectives.

Ms. Ostrovsky asked some questions: How ATAP evaluates the success of the parent training and the parents are implementing? With insurance assistance being at \$700 a month, how does that work with meeting deductibles in the beginning of the year? Does ATAP work with providers when families are being denied?

Ms. Jayme answered that ATAP requires parents' goals and parent hours, so during quarterly visits ATAP checks up on that. Some parents keep data sheets that their providers provide them, and others just show ATAP what they have been doing.

Ms. Jayme answered about two years ago, ATAP started a special consideration plan. They can apply for special consideration and show ATAP what their deductible is and the provider will give ATAP a breakdown on how they will meet the deductible as well, so ATAP can audit the situation to make sure it was spent towards the deductible and not on other medical services. ATAP is reviewing and tweaking their special consideration plan to better improve it for this coming year. One of the pieces to qualify for the special consideration is families will need to apply and be denied Medicaid.

Ms. Jayme answered while ATAP is waiting for a denial, ATAP can pay for that time because technically they do not have Medicaid at that time, then work to transition. ATAP's starts working with their families in November to start the process, especially if they know their benefits, where now a lot of families may not now of them because of COVID. Ms. Jayme stated that over 50 families were accepted this past year.

Ms. Kryk asked if families do not know their benefits, especially with COVID, how do they apply for special consideration? Ms. Kryk struggles with understanding the \$700 a month because most families will need more than \$700.

Ms. Jayme answered that looking from this past year there were more HMO plans than PPO and HMO plans are not as high, monthly. ATAP is seeing \$10-25\$ co-pays on average per session, so the \$700 has been working for some of them, not all of them. For families that do not know their benefits, Ms. Jayme suggested for them to still apply for Medicaid, so they have that piece of it. Also, until ATAP receives a proposal from the provider, ATAP cannot cover any services in January because ATAP does not know what has or has not been approved by the insurance. This can cause a hold up, not on ATAP's end but more so on the insurance end from getting that prior authorization approved. ATAP has seen providers start services prior to getting the approval, which then parents are left with a bill because the insurance denies for one reason or another. It is important for ATAP to wait for this piece of the puzzle before anything is approved. ATAP recommends parents to be proactive on their end and start getting things ready, so ATAP can preliminarily approve them while waiting for a proposal from the provider.

As a provider, Ms. Kryk mentioned how end of December, beginning of January are not fun months for them. She has had families' insurance change, where they think they do not need special consideration, but then realize they do when it's too late, and then get charged a large amount for January, which is the most expensive month. Ms. Kryk stated that it is hard to give an estimate from a provider perspective if you do not know what the benefits are. Ms. Kryk mentions how it is a struggle when it comes down to the \$700 a month opposed to the service that is actually provided.

Ms. Jayme answered that ATAP helps and tries to educate their families to learn as much about their insurance as possible, so they are aware.

Ms. Kryk asked if it would be possible for Ms. Jayme to send out a monthly update on the number of ATAP providers, so the members are aware of these amounts?

Ms. Jayme answered, yes. ATAP can definitely share their provider lists monthly to show all current providers, new providers and providers no longer with ATAP.

Ms. Kryk asked about utilization.

Ms. Jayme stated that ATAP is still working on how to present the utilization. ATAP did do their increased parent training, where the system was capturing it for all kids, but not all kids are using the increased amount, so ATAP is still working on the utilization. Ms. Jayme did show and go over who is not getting services that are active.

On slide 19, Ms. Kryk asked if the service coordination is just Medicaid or insurance assistance, because it is not straight ATAP either?

Ms. Jayme answered that it is straight ATAP plan. Anything ATAP is funding, they call straight ATAP.

Ms. Kryk is having a hard time understanding the budget and the entire process that comes with it and with that she thinks it will be hard as a commission to move forward with anything, since they do not really know much about the budget. Ms. Kryk mentioned a budget flow chart that Ms. Robb mentioned in a previous meeting and hoping to look over one to get a better understanding.

Ms. Jayme said one of the biggest things that happens with the budget is the interim, so by the time the budget gets to session, it has already been submitted and processed. Ms. Jayme recommends the commission to get into the interim session right after legislative session, which is when a lot of the stuff is worked on to help create for the budget in the next biennium. Ms. Jayme stated that as a program, ATAP is still waiting to see what their budget looks like in the next year. Right now, the budgets are with the Governor's finance office. Plus, COVID just adds another layer to all this.

Ms. Kryk would like to know if there could possibly be wiggle room in the budget? She knows there can not be more money added to a budget, but possibly spreading the money out.

Ms. Jayme thinks there can be a discussion to see what the needs are and how they can be filled, after ATAP knows what the budget is.

**\* This meeting lost quorum and was unable to continue \***

## **Public Comment**

Ms. Ostrovsky welcomed both new commission members.

Ms. Kryk is very excited to have James and Ritzie join the commission.

Ms. Lozano adjourned the meeting at 5:23 pm

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