

June 30, 2017

The Honorable Governor Brian Sandoval State Capitol [5]
101 N. Carson Street [5]
Carson City, Nevada 89701

Dear Governor Sandoval:

As chairperson of the Nevada Commission on Autism Spectrum Disorders, I am writing to update you on the activities of the Commission, as required by Executive Order.

The Commission has met several times since our last report of December 2016. We continue to function with the help of five subcommittees, each focused on goals set forth in the 5 Year Strategic Plan. All the members of the Commission and its subcommittees are passionate about improving the lives of children and adults in Nevada who struggle with autism.

The Nevada Commission on Autism Spectrum Disorders played an important role in the 2017, Legislative session. The Commission participated heavily in Autism Day at the Legislature on April 4, 2017 with commission members and subcommittee members sitting on the floor of the Assembly for the session. The Commission was instrumental in conveying the concerns of parents, providers and educators in two key pieces of legislation:

AB304 - passed and signed by Governor Sandoval June 1, 2017

• This new law provides parity in autism diagnosis. It also added a requirement that insurers reimburse an early intervention agency for certain services and treatments. This will allow children under the age of 3, diagnosed with autism to receive services at an earlier age, improving the chance to success and independence later in life.

SB286 – passed and signed by Governor Sandoval June 14, 2017

 Sponsored by Senator Heidi Gansert was a challenging bill forcing the business community to evaluate their hiring, training and governing policies. The Commission compiled a list of concerns, shared them with Senator Gansert and the Assembly HHS committee, untimely assisting in creating legislation that everyone felt comfortable. The intent of the legislation is to expand the work force and improved access for services for children with autism.

The following items continue to be the commission's top priorities as our state strives to lead the way in improving treatment of children with, and assistance for families affected by, autism spectrum disorder. These are listed according to the commission's subcommittees and the 5-year strategic plan submitted by the previous commission. A full treating of each can be found in the report of December 2016. If new information is available, it is included.

Funding and Insurance

1. Work to increase the Medicaid reimbursement rate for ABA services and streamline the billing and collecting process.

As more Medicaid data are available for review, there is a positive trend in the money providers can bill and collect for autism related services. Unfortunately, some providers continue to feel that the reimbursement rate is a significant obstacle. Increased data and billing has also led to provider complaints about the billing and collecting process. Continued efforts are needed to make this process more efficient and this will encourage more providers to work with Medicaid.

2. Continue increasing financial support and funding of programs that serve individuals and families living with autism spectrum disorder.

Resource Development

3. Allow private ABA therapists to work collaboratively with the public schools. The commission has not had success reaching out to the individual school districts or Department of Education. We continue to recommend a committee be established to determine the feasibility and process of implementation would be needed and include representatives from the state Department of Education, participating school districts, Medicaid, ATAP, and BCBA leaders. A letter outlining this recommendation was sent in the fall of 2016.

Workforce Development

4. We must increase the number of training programs for autism therapy providers in our state; Licensed Behavior Analysts (BCBAs), Licensed Assistant Behavior Analyst (BCaBAs), and a Registered Behavior Technician (RBTs). This is more critical now than ever as ADSD and ATAP have stopped payment to interventionists who are not certified RBTs and are providing therapy services to children with autism unless the interventionist has applied for certification. This

application is the last step in certification and requires many hours of supervision and a significant financial investment. This has led to loss of workforce in an area that was already underserved.

Adult/Transition Services and Resources

- 5. Development of programs to provide aging Nevadans with autism meaningful employment.
- 6. Support measures that allow adults significantly impacted by autism to receive quality services by a trained and skilled workforce

 We refer you to a letter outlining this recommendation sent in the fall of 2016.

Community Education

7. Support a statewide resource website for Autism Spectrum Disorder.

In association with the Workforce Development subcommittee, the commission has arranged for a website to be hosted by Monkeylogic which will initially hold information focused on ABA providers but eventually to include other information helpful to families of children with autism.

Nevada's Autism Statistics and Highlights as reported to the Commission. The most recent numbers available are included below. Changes from the previous report are provided in (parenthesis).

8,154 total number of children under age 21 with ASD in Nevada based on data from NEIS and Department of Education numbers from August 2016 [+820]. Updated data will not be available until August of 2017.

Medicaid:

- 393 children enrolled in Medicaid and Checkup receiving ABA services
 - o 332 through fee-for-service (+288)
 - o 61 through managed care models (+60)
- Total claims submitted to Medicaid \$385,564.73
- Total received from Medicaid \$175.192.12

ATAP

- **746** total children served by ATAP [+69]
 - o 17 are under 3 years (+5)
 - o 199 are 3-5 years (+16)
 - o 199 are 6-8 years (+3)

- o 166 are 9-11 years (+11)
- o 228 are 12-18 years (+82)
- 617 children on ATAP waiting list; average age 7 [+33]
- 52 new applications per month on average for ATAP
- 324 days on average a child will be on the ATAP waiting list [+58]
 - o 71 children under 3 years on waiting list (+19)
 - o 312 children 3-7 on waiting list (-1)

NEIS

- **221** children with ASD served by NEIS [-13]
- 148 additional children diagnosed with ASD in Fiscal year 16-17
- 28.7 months is the average age at which a child is diagnosed with ASD in NEIS (-0.9 months)



ABA providers

- 15 accept Medicaid
- 9 accept Managed Care Option
- 7 non-Medicaid

As of last report in February of 2017, number of certified providers:

BCBA - 87

BCaBA - 6

RBTs - 298

The Commission is proud to recognize and applaud our State Legislators for their ongoing support of programs which benefit individuals with autism. We appreciate the valued support we receive from your Chief of Staff and ADSD staff members and agencies. We hope that moving forward we can work in a more collaborative manner with ADSD and ATAP. Legislation passed in the previous legislative session will continue to be in the best interest of Nevada children and families living with autism spectrum disorder. The commission and its subcommittees will continue to work on ways our state can lead the way in its care of individuals with ASD in the most effective and efficient manner so that all Nevadans living with Autism Spectrum Disorder will achieve optimal outcomes to reach their full potential.

With continued hope and gratitude, 🔛



Mario J Gaspar de Alba, M.D., Chair (702) 702-998-9505 Mario.gaspardelba@unlv.edu

Commission Members: Sarah Dean Julie Ostrovsky Gwen Partos Kori Ward