Dear ATAP Providers,

The Autism Treatment Assistance Program (ATAP) is a statewide program that provides temporary support and funding to pay for evidence-based treatment and therapy for children with an Autism Spectrum Disorder (ASD). While ATAP does assist with funding for these services, ATAP was designed to be a payer of last resort. Families must first access services through their private insurance and/or Medicaid, if applicable. In addition, families are required to utilize providers that are approved through their insurance and/or Medicaid only.

ATAP and Medicaid have worked collaboratively with the common goal that all children have access to services and comprehensive coverage to address all their healthcare needs. Some of the advantages of having Medicaid as a secondary insurance is that it allows families to access the full benefits of their insurance coverage while lessening the financial impact and often provides benefits that would not otherwise be covered under insurance such as dental and vision. This is also a benefit to the provider because Medicaid covers what the primary insurance does not pay.

Effective July 1, 2019, ATAP will no longer fund as a secondary source if a family has Medicaid as a secondary source and is not with a Medicaid provider. Specifically, families who have Medicaid as secondary must be enrolled with a provider that accepts their primary insurance as well as Medicaid.

If you plan to enroll with Medicaid or are currently in the process, please notify Rocio De la O Pena rdelaopena@adsd.nv.gov and Jennifer Ripley jripley@adsd.nv.gov.

Samantha Jayme
Health Program Manager