

DAVID Y. IGE
GOVERNOR



VIRGINIA PRESSLER, M.D.
DIRECTOR OF HEALTH

State of Hawaii
DEPARTMENT OF HEALTH
1250 Punchbowl Street
Honolulu, HI 96813-2416
doh.testimony@doh.hawaii.gov

**Testimony COMMENTING on S.B. 791, S.D. 1
RELATING TO AUTISM SPECTRUM DISORDERS**

REPRESENTATIVE DELLA AU BELATTI, CHAIR
HOUSE COMMITTEE ON HEALTH

Hearing Date: 03-18-15

Room Number: 329

1 **Fiscal Implications:** Deferred to legislative audit, DHS and others

2 **Department Testimony:** The Department of Health appreciates the intent of S.B. 791, S. D. 1,
3 to improve the access of individuals with autism spectrum disorders (ASD) to appropriate
4 services.

5 S.B. 791, S.D.1, amends Chapter 431, Hawaii Revised Statutes to provide coverage for
6 the treatment of ASD in children, and with maximum benefits stipulated in the bill. One of the
7 most important sections on the bill is (h) "This section shall not be construed as reducing any
8 obligation to provide services to an individual under any publicly funded program, an
9 individualized family service plan, an individualized education program, or an individualized
10 service plan." This is essential as many families receive access to treatment through the
11 Department of Health Early Intervention Section and school programs. These programs should
12 not stop and actually should be bolstered in many cases. This insurance benefit could help
13 families obtain enhanced services in school settings or in homes, which are important places to
14 provide these services for many children.

15 This bill will also allow best practice, evidence-based treatments such as Applied
16 Behavioral Analysis (ABA) that have been shown to improve socialization and language of
17 children with ASD. Treatment of ASD at an early age using ABA and/or other treatments will
18 increase the opportunity for children to develop the skills and functioning needed for adult life.

19 The Developmental Disabilities Division serves many adults with autism spectrum
20 disorders who have significant socialization, and language problems as well as significant
21 service needs. Most of these individuals did not have the opportunity to receive intensive

- 1 treatments as children. Addressing insurance coverage for children at the earliest possible age
- 2 will make a large impact on programs, and more importantly on the well-being of families.



DAVID Y. IGE
GOVERNOR
SHAN S. TSUTSUI
LT. GOVERNOR

STATE OF HAWAII
OFFICE OF THE DIRECTOR
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
335 MERCHANT STREET, ROOM 310
P.O. Box 541
HONOLULU, HAWAII 96809
Phone Number: 586-2850
Fax Number: 586-2856
www.hawaii.gov/dcca

CATHERINE P. AWAKUNI COLÓN
DIRECTOR
JO ANN M. UCHIDA TAKEUCHI
DEPUTY DIRECTOR

TO THE HOUSE COMMITTEE ON HEALTH

TWENTY-EIGHTH LEGISLATURE
Regular Session of 2015

Wednesday, March 18, 2015
8:45 a.m.

TESTIMONY ON SENATE BILL NO. 791, S.D. 1 – RELATING TO AUTISM SPECTRUM DISORDERS.

TO THE HONORABLE DELLA AU BELATTI, CHAIR, AND MEMBERS OF THE COMMITTEE:

My name is Gordon Ito, State Insurance Commissioner, testifying on behalf of the Department of Commerce and Consumer Affairs (“Department”). The Department takes no position on this bill, and submits the following comments.

This bill adds a new mandated health insurance benefit requiring insurers, mutual benefit societies, and health maintenance organizations to cover the treatment of autism spectrum disorders.

Adding a new mandated coverage may trigger section 1311(d)(3) of the federal Patient Protection and Affordable Care Act which requires states to defray the additional cost of benefits that exceed the essential health benefits in the state's qualified health plan.

We thank the Committee for the opportunity to present testimony on this matter.



STATE OF HAWAII
STATE COUNCIL
ON DEVELOPMENTAL DISABILITIES
919 ALA MOANA BOULEVARD, ROOM 113
HONOLULU, HAWAII 96814
TELEPHONE: (808) 586-8100 FAX: (808) 586-7543
March 18, 2015

The Honorable Della Au Belatti, Chair
House Committee on Health
Twenty-Eighth Legislature
State Capitol
State of Hawaii
Honolulu, Hawaii 96813

Dear Representative Belatti and Members of the Committee:

SUBJECT: SB 791 SD1 - Relating to Autism Spectrum Disorders

The State Council on Developmental Disabilities (DD) **SUPPORTS THE INTENT OF SB 791 SD1**. The bill requires health insurers, mutual benefit societies, and health maintenance organizations to provide coverage for autism diagnosis and treatment.

According to the U.S. Centers for Disease Control and Prevention's Autism and Developmental Disabilities Monitoring Network (2010), about 1 in 68 children have been identified with Autism Spectrum Disorder (ASD). That rate is anticipated to significantly increase within the next decade.

SB 791 proposes to provide coverage for individuals under the age of 11 years with coverage for treatment to a maximum benefit of: 1) \$30,000 per year for services for a maximum of four years between the ages of three to nine; or 2) \$30,000 per year for services for children ages zero to six and \$25,000 per year for services for children ages seven to ten, provided that limits shall be evidence-based.

The Council believes that individuals over the age of 11 years definitely continue to progress and benefit from evidenced-based treatment and therapy. Whereas, children with ASD provided with early treatment and therapy, such as "applied behavior analysis," learn meaningful skills of interacting and coping essentially increasing their independence and preparing them for adulthood. Moreover, services provided early on may decrease or minimize long-term services and supports needed as the child becomes an adult and through the individual's lifetime. Individuals with ASD may require treatment early on and taper off as they get older into adulthood. The amount of treatment can vary according to the severity of the person's ASD.

The Honorable Della Au Belatti
Page 2
March 18, 2015

We appreciate the bill's initiative to provide coverage to individuals 11 years of age and under. **Recognizing that ASD is a lifelong condition that may require lifelong services, the Council respectfully asks for your consideration to amend the bill to delete the age limit. However, should your Committee decide to set an age limit, we recommend two options for your consideration:**

- 1. Age 26 years, which would be consistent with what children are now covered under the Affordable Care Act.**
- 2. Age 21 years, which would be consistent with Medicaid coverage.**

Thank you for the opportunity to provide testimony **supporting the intent of SB 791 SD1 and offer an amendment** for your consideration.

Sincerely,



Waynette K.Y. Cabral, M.S.W.
Executive Administrator



Rosie Rowe
Chair

TESTIMONY OF THE AMERICAN COUNCIL OF LIFE INSURERS
COMMENTING ON SENATE BILL 791, SD1,
RELATING TO AUTISM SPECTRUM DISORDERS

March 18, 2015

Via e mail: capitol.hawaii.gov/submittestimony.aspx

Honorable Representative Della Au Belatti, Chair
Committee on Health
State House of Representatives
Hawaii State Capitol, Conference Room 329
415 South Beretania Street
Honolulu, Hawaii 96813

Dear Chair Au Belatti and Committee Members:

Thank you for the opportunity to comment on SB 791, SD1, relating to Autism Spectrum Disorders.

Our firm represents the American Council of Life Insurers (“ACLI”), a Washington, D.C., based trade association with more than 284 member companies operating in the United States and abroad. ACLI advocates in federal, state, and international forums for public policy that supports the industry marketplace and the 75 million American families that rely on life insurers’ products for financial and retirement security. ACLI members offer life insurance, annuities, retirement plans, long-term care and disability income insurance, and reinsurance, representing more than 90 percent of industry assets and premiums. Two hundred nineteen (219) ACLI member companies currently do business in the State of Hawaii; and they represent 92% of the life insurance premiums and 89% of the annuity considerations in this State.

As drafted, SB 791, SD1, would amend Article 10A of Hawaii’s Insurance Code to require all individual and group accident and health or sickness insurance policies issued or renewed after a stated date to provide coverage for the diagnosis and treatment of autism spectrum disorders for individuals under 11 years of age.

By its terms, Article 10A of the Code (by reference to HRS §431:1-205) defines “accident and health or sickness insurance” to include disability income insurance.

Disability income insurance provides cash payments designed to help individuals meet ongoing living expenses in the event they are unable to work due to illness or injury. Unlike health insurance disability income insurance does not provide coverage for the insured’s health care or medical treatment; further, the cash payments are made directly to the insured – not to the insured’s health care providers. Finally, the disability insurance policy typically does not dictate how the cash payments received by the insured are to be used by the insured.

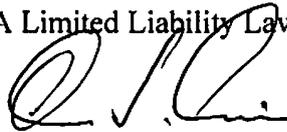
ACLI submits that the intent and purpose of this bill is to require only health insurers to provide coverage for autism spectrum disorders – not disability income insurers.

In order to dispel any confusion as to what this bill is intended to cover, ACLI suggests that paragraph (b) of the new section proposed to be added to §431: 10A (beginning at line 13, page 1 of the bill, be amended as follows:

(b) This section shall not apply to disability, accident-only, ~~Medicare~~, Medicare supplement, student accident and health or sickness insurance, dental-only, and vision only policies or policies or renewals of six months or less.

Again, thank you for the opportunity to comment on SB 791, SD1.

LAW OFFICES OF
OREN T. CHIKAMOTO
A Limited Liability Law Company



Oren T. Chikamoto
1001 Bishop Street, Suite 1750
Honolulu, Hawaii 96813
Telephone: (808) 531-1500
E mail: otc@chikamotolaw.com



Chamber of Commerce HAWAII

The Voice of Business

**Testimony to the House Committee on Health
Wednesday, March 18, 2015 at 8:45 A.M.
Conference Room 329, State Capitol**

RE: SENATE BILL 791 SD1 RELATING TO AUTISM SPECTRUM DISORDERS

Chair Belatti, Vice Chair Creagan, and Members of the Committee:

The Chamber of Commerce of Hawaii ("The Chamber") would like to **offer comments** on SB 791 SD1, which requires health insurers, mutual benefit societies, and health maintenance organizations to provide coverage for autism diagnosis and treatment.

The Chamber is Hawaii's leading statewide business advocacy organization, representing about 1,000 businesses. Approximately 80% of our members are small businesses with less than 20 employees. As the "Voice of Business" in Hawaii, the organization works on behalf of members and the entire business community to improve the state's economic climate and to foster positive action on issues of common concern.

We appreciate the intent of the bill to help those with autism spectrum disorders. We also appreciate the advocates of this legislation fine tuning the bill from issues raised in prior hearings.

At the same time we have some concerns. First is the varied projected cost. While we recognize there were some different actuarial assumptions, the projected cost between the projections by Wakely and the projections by Oliver Wyman was over 50% more. This concerns us as no one has a clear idea of the true cost of this mandate.

Second is the timing of the mandate. It is our understanding that filings for the following year rates are submitted to Commissioner the prior spring. While the start date is blank, other dates suggest a timetable of next year. How will this work and how will employers see the increase in their premiums? In addition, what is the mechanism – both in process and appropriation – for the state's share to be paid for those businesses now covered under ACA that requires the state to pay for new mandates?

Third is the issue of licensure. The bill states that licensure will be handled by the Behavior Analyst Certification Board, Inc. We have some concerns that the state would allow an outside non-profit to designate approval for reimbursement. Also, this provision is at odds with the usual requirement of the Auditor to conduct a sunrise review of new licensed professions.

Lastly, as always, we have concerns on mandating new benefits. On average, ninety percent of the cost of an employee's health care premium is paid for by the employer.

Thank you for the opportunity to testify.



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COMMENTS ON S.B. 791, S.D. 1
RELATING TO AUTISM SPECTRUM DISORDERS
Wednesday, March 18, 2015, 8:45 a.m., Conference Room 329

HOUSE OF REPRESENTATIVES
THE TWENTY-EIGHTH LEGISLATURE
REGULAR SESSION OF 2015
COMMITTEE ON HEALTH

March 16, 2015

The Honorable Della Au Belatti, Chair
The Honorable Richard P. Creagan, Vice Chair

Dear Chair, Vice Chair, and Members of the Committee:

This bill would enact cost-sharing legislation similar to laws enacted in more than thirty States to require health insurers, mutual benefit societies, and health maintenance organizations to provide coverage for autism diagnosis and treatment. No appropriation of State funds is required.

I. Actuarial Report – Cost of Autism Insurance Coverage

The actuarial report required by Act 185, Hawaii Session Laws 2014, estimates that the cost to policyholders of providing for treatment of autism spectrum disorder through applied behavior analysis would be \$24.00 per year in 2015, or \$2 per month. The total cost for 362,000 policyholders (Wakely Appendix D, page 2) would be, therefore, \$8,688,000 per year.

II. Need for Additional Funding of Autism Treatment

1. Twenty-five years ago, only 1 in 200 children (0.5%) had autism, about 85 of the 17,000 born that year; all but 3 or 4 (1 or 2 in 10,000) were misdiagnosed with other disorders, including mental retardation or developmental disability. Today, the Centers for Disease Control (Autism and Developmental Disabilities Monitoring Network (2010)) estimates that autism affects 1 in 68 births (almost 1-1/2% of 19,000 births). Autism cases in Hawaii, therefore, have more than tripled over the past 25 years from approximately 80 to 280 new cases each year. Large numbers of children with autism are just now beginning to reach adulthood, a “tsunami” that will present a public health crisis in the near future.

2. This worrisome increase is mostly a new social condition - what we know about the symptoms and causes show that society has not faced this condition before, which is why we are so unprepared. Because of this there has been a dramatic increase in research by the

federal government and many private groups such as Autism Speaks. However promising this sounds, we are still stuck with an unknown number of years of an extremely expensive condition.

3. The best estimate of the lifetime costs of care (done by the Harvard School of Public Health) is \$3.2 million per person, averaging \$42,000 per year over a lifetime of 75 years. The majority of the costs must be borne by the State, as few families can afford bearing the expense themselves.

4. The cost of lifetime care can be reduced in many cases through appropriate treatment at an early stage of life. Autism is a neurologic condition in which the inner connections in the brain are mis-wired. This is a physical fact, so it does not respond to the usual medical treatments like medications and surgery. The reason for this is that the brain is a different organ than the heart, lungs, kidneys, etc. Brain function is based on our experience with the environment. Thus, correction of mis-wiring requires corrective changes in the child's life experience. These changes require intensive exposure to positive, corrective social behavior and language experience. This is why medical insurance has previously not covered these social and language treatments, seeing them as "habilitative." However, current neuroscience, genetics and brain imaging all point to the benefits of the kind of behavioral and social-language treatments that this Bill is proposing. There is also abundant evidence-based data showing that these treatments are effective and do reduce long-term impairment. What's important is that the earlier autism is diagnosed and given effective treatment, the better is the outcome and the less the financial impact on families and the state.

5. The reason that universal insurance coverage for autism treatments is so important is the fact that it involves all social and ethnic groups. Thus, insurance needs to be broad-based. Fortunately, the experience of 30+ other states shows that autism insurance causes a very small increase in insurance costs given the broad base of the condition.

III. No Appropriation of State Funds Required

In a message transmitting the actuarial analysis by Wakely Consulting Group, the Insurance Commissioner interpreted Section 1311(d)(3) of the ACA, 42 U.S.C. § 18031(d)(3), to require the State to fund the cost of autism mandates. While some health insurance carriers have taken that position, *see* Kaiser Health Newsletter attached, their interpretation is inconsistent with the clear language of the ACA.

Under ACA Section 1311(d)(3), 42 U.S.C. §18031(d)(3), the State must pay for insurance mandates that are in addition to the ten "essential health benefits" specified in ACA Section 1302(b), 42 U.S.C. § 18022(b). The coverages mandated by this Bill are *included* in those categories, and the Bill does not mandate additional benefits.

This Bill would mandate coverage for (1) behavioral health treatment; (2) pharmacy care; (3) psychiatric care; (4) psychological care; and (5) therapeutic care. Section 2(n) ("treatment for autism"):

- Items (1), (3), and (4) are included in the ACA's "essential health benefits" for "Mental

health ... services, including behavioral health treatment.” ACA Section 1302(b), 42 U.S.C. § 18022(b)(1)(E);

- Item (2) is included in “Prescription drugs.” 42 U.S.C. § 18022(b)(1)(F);
- Item (5) includes speech pathology, occupational therapy, physical therapy, and social worker care. Those are included in “Rehabilitative and habilitative services.” 42 U.S.C. § 18022(b)(1)(G).

The Bill’s mandates exceed the “benchmark plan” (HMSA’s Preferred Provider Plan), but the ACA does not require the State to pay for benefits that exceed the benchmark plan if they are “essential health benefits.” There is, therefore, no reason why the State would be liable for the additional premiums, but even if there were, the cost would be a small fraction of the annual cost of lifetime care.

IV. Age Eligibility and Limitations on Treatment

Section 2 of the Bill (adding HRS §431:10A-__ (a)) and Section 3 (adding HRS §432:1-__ (a)) would limit Applied Behavior Analysis (“ABA”) benefits to children under eleven years of age. Those sections would also limit aggregate services to those costing not more than \$30,000 per year for periods determined by the Insurance Commissioner.

The actuarial report of Wakely Consulting Group is based on S.B. 2054 (2014), which extended benefits to age 21 and limited services to \$50,000 per year with a lifetime limit of \$300,000. It does not appear that the lower limits in this Bill would result in appreciable cost savings. On the other hand, where the limits are inconsistent with medical need and treatment is ended prematurely, services could be unsuccessful and wasteful. In addition, many children over 11 years of age have been denied autism services in the past and could benefit from ABA therapy to reduce future dependency. As younger children receive appropriate services, it might be reasonable to reduce age eligibility for ABA in the future.

Subsection (f) of the new HRS sections provides that an insurer may request a review of treatment plans at its discretion. We suggest the language be amended to read, “at the insurer’s discretion and expense.”

Thank you for the opportunity to testify.

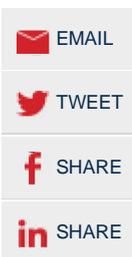
Respectfully submitted,

Ryan Lee, M.D.
President, Autism Society of Hawaii

John P. Deller, J.D.
Legislative Committee

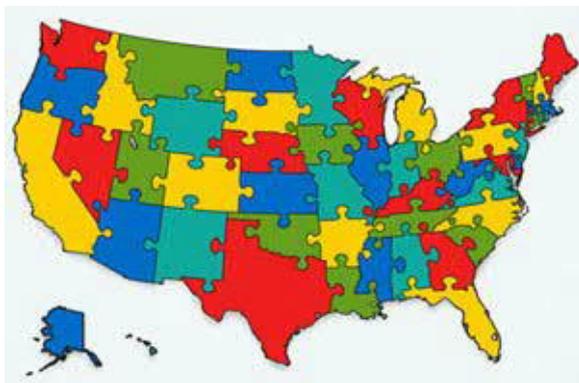
Health Law Tempers New State Coverage Mandates

By [Michelle Andrews](#) | September 16, 2014



This KHN story can be republished for free. ([details](#))

For decades, states have set rules for health coverage through mandates, laws that require insurers to cover specific types of medical care or services. The health law contains provisions aimed at curbing this piecemeal approach to coverage. States, however, continue to pass new mandates, but with a twist: Now they're adding language to sidestep the health law, making it tougher than ever for consumers to know whether they're covered or not.



State coverage mandates vary widely. They may require coverage of broad categories of benefits, such as emergency services or maternity care, or of very specific benefits such as autism services, infertility treatment or cleft palate care. Some mandates require that certain types of providers' services be covered, such as chiropractors. They may apply to all individual and group plans regulated by the state, or they may be more limited.

While patient advocates view state mandates as a crucial tool in their efforts to address coverage shortcomings, the insurance industry generally opposes mandates, saying they drive up the cost of insurance.

Since the health law established a comprehensive set of "essential health benefits" that

individual and small group plans must cover (unless they existed prior to passage of the law in 2010), it was hoped that mandates would no longer be much in demand, says Sabrina Corlette, project director at Georgetown University's Center On Health Insurance Reforms.

Mandates are "not the most rational way to build a benefit package," says Corlette.

To discourage states from passing mandates that go beyond essential health benefits requirements, the law requires states, not insurers, to cover the cost of mandates passed after 2011 that apply to individual and small group plans sold on or off the state health insurance marketplaces. If a mandate increases a plan's premium, states will be on the hook for the additional premium cost that's attributable to the mandate.

The payment requirement is waived until 2016, says Kelly Brantley, a senior manager at Avalere Health who's looked at mandates related to infertility coverage, and regulations describing how the process will work haven't yet been issued.

Rather than forgoing mandates altogether, some states are simply excluding from the mandates plans that the states would have to pay for. The result: Consumers who buy individual or small group plans may not get the mandated benefits that are required in large group plans. (Self-funded plans, used by many large employers to pay employee claims directly rather than buying insurance for that purpose, aren't bound by state mandates.)

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That's what's happening with state mandates related to autism coverage, says Lorri Unumb, vice president of state government affairs at Autism Speaks, an advocacy group.

By the group's count, 37 states and the District of Columbia have [mandates requiring autism coverage](#). In 26 states, autism coverage is part of the essential health benefits, typically because coverage was mandated before 2012 and so was included in that state's "[benchmark](#)" [plan that sets the standard for coverage](#) there.

New mandates are different. "For the most part, the states that have passed autism mandates post Dec. 31, 2011, have excluded ACA-compliant plans from the mandate,"

Unumb says.

States have taken different approaches to structuring new mandates so they don't have to pay for them, says Justin Giovannelli, a research fellow at Georgetown's Center on Health Insurance Reforms, who has examined state laws in this area. The law may say that the mandate only applies to large group plans, for example, or that it doesn't apply to any plans that are required to provide the essential health benefits. A state may say that if the mandate increases premiums by a certain percentage the provision doesn't apply.

Confused? Policy experts fear consumers will be too.

"Your state has passed a law but everything is so market specific it's hard to know what coverage you're getting," says Katie Keith, research director at the Trimpa Group, a consultant for autism and other advocacy groups.

Although some states are trying to sidestep having to pay for new mandates by limiting which plans are included, advocates say uncertainty about who is going to have to foot the bill is having a chilling effect overall.

Last year, the California legislature sent a bill to Gov. Jerry Brown that would have mandated that large group plans cover fertility preservation services such as freezing eggs or sperm for cancer patients and others who are facing medical treatments that might cause infertility.

The governor [vetoed the mandate](#), even though the state would not have been required to pay for it because it didn't apply to small group or individual plans. In his veto message, the governor said that "we should not consider mandating additional benefits until we implement the comprehensive package of reforms that are required by the federal Affordable Care Act."

"It's bad for consumers in many respects," says Barbara Collura, president and CEO of Resolve, an infertility advocacy group. "Because of the uncertainty [about state payment obligations for mandated benefits], no one really knows how this will work, and uncertainty causes people not to want to do anything."

This story has been updated to correct Justin Giovannelli's title.

HMSA



An Independent Licensee of the Blue Cross and Blue Shield Association

March 18, 2015

The Honorable Della Au Belatti, Chair
The Honorable Richard P. Creagan, Vice Chair
House Committee on Health

Re: SB 791, SD1 – Relating to Autism Spectrum Disorders

Dear Chair Au Belatti, Vice Chair Creagan and Members of the Committee:

The Hawaii Medical Service Association (HMSA) appreciates the opportunity to testify on SB 791, SD1, which provides for coverage for autism spectrum disorder services. HMSA offers comments on this Bill.

HMSA is empathetic to the concerns that this Bill seeks to address. While we, generally, have opposed coverage mandate legislation, we truly appreciate that this version of the Bill helps to alleviate many of the concerns we raised with previous drafts of the measure.

We further appreciate the Legislature's effort at trying to get a grasp on the financial impact of this mandate. As a result of Act 185, SLH 2014, the Insurance Commissioner commissioned an actuarial analysis of an autism spectrum disorder coverage statute. The actuary estimated that the financial impact of such a mandate to the commercial health insurance market in 2015 would be between \$17 to \$31 per member per year, or \$1.44 to \$2.56 per member per month.

With these numbers in hand, we believe a more informed decision may be made, and the potential consequence to members' premiums and the health care system may be better understood.

Thank you for the opportunity to testify on this measure.

Sincerely,

A handwritten signature in black ink, appearing to read "JD", with a long horizontal flourish extending to the right.

Jennifer Diesman
Vice President
Government Relations

COMMITTEE ON HEALTH
Rep. Della Au Bellati, Chair
Rep. Richard P. Creagan, Vice Chair

Jeffrey D. Stern, Ph.D.
Licensed Clinical Psychologist
1833 Kalakaua Ave. Suite 908
Honolulu, HI 96815

Tuesday, March 17, 2015

Honorable Chair Bellati, Honorable Vice Chair Creagan, and esteemed members of the House Committees on Health, in regards to SB 791, SD1, SSCR888 that require health insurers, mutual benefit societies, and health maintenance organizations to provide health care coverage and benefits for autism spectrum disorders, Hawaii Psychological Association is in support of this bill with reservations, as it addresses a serious need for coverage that insurers in the State of Hawai'i should bear.

My name is Jeffrey Stern, and I am a psychologist and a Past President of the Hawai'i Psychological Association (HPA), as well as the chair of the Children's Committee of HPA. I have been involved with the working committee that has been trying to resolve issues in this legislation for the last two years. It is not necessary to review facts and opinions as ample testimony has been submitted. Concerns regarding the increasing prevalence rate of ASD, similar laws passed in most other states, costs to society for covering and for not covering these services, arbitrary age restrictions not supported by research evidence, potential legal challenges associated with mental health parity law requirements, reevaluation requirements every time the DSM is updated, the need for and type of background checks providers should be subject to, have been delineated in testimony provided in previous years and this year by other testifying organizations and individuals. Hawai'i Psychological Association echoes these concerns.

With your indulgence, I have three concerns that I feel still need to be addressed.

First, funding caps still seem to be potentially problematic in terms of mental health parity. Is there scientific evidence supporting these funding caps? In a 1998 article published in the journal Behavioral Interventions, Jacobson, Mulick & Green included initial costs of \$33,000 to \$50,000 per year – that was 17 years ago and with data lag, the numbers were from more than 20 years ago. I like that the bill uses the language, “provided that limits shall be evidence-based,” but I’m not sure what that means; “evidence-based” is not included in the definitions section of the bill.

Second, the current version of the bill still requires individuals diagnosed with Autism Spectrum Disorder according to the diagnostic criteria of the current version of the DSM to be required to be reevaluated to remain covered. A problem with this model is that the authors of the DSM-5 intend to update the manual regularly (e.g., DSM 5.1, 5.2, etc.), which is why it was named the DSM-5 and not the DSM-V (Neimeyer, 2013). I think the language of the bill should read, “(1) if an individual has been diagnosed as having autism meeting the diagnostic criteria described in the DSM available at the time

of diagnosis, upon publication of a more recent edition of the DSM [that in any way involves a revision of the diagnostic criteria for Autism Spectrum Disorder], that individual shall be required to undergo repeat evaluation to remain eligible for coverage under this section.” This would save the insurance companies and families money when the DSM is revised to version 5.1, assuming the updated version does not change the diagnostic criteria for Autism Spectrum Disorder.

Finally, and most importantly, we have noticed that definitions for what constitutes treatment for Autism and what should not be considered autism treatment under this legislation are still not clearly delineated (I thought this was fixed...). Hawaii Psychological Association therefore recommends the following language. Please note the A(1) is currently the language in the proposed legislation while sections A(2) and B(1) are proposed additions:

A. Practice of “Applied Behavior Analysis” means:

(1) The design, implementation, and evaluation of instructional and environmental modifications based on scientific research and the direct observation and measurement of behavior and the environment to produce socially and clinically significant improvements in human behavior, including the use of direct observation, measurement, and functional analysis of the relations between environment and behavior; (currently in the legislation)

(2) Utilization of contextual factors, motivating operations, antecedent stimuli, positive reinforcement, and other consequences to assist individuals in developing new behaviors, increasing or decreasing existing behaviors, and emitting behaviors under specific environmental conditions.

B. Practice of “Applied Behavior Analysis” does not include:

(1) Psychological testing, diagnosis of a mental or physical disorder, neuropsychology, psychotherapy, cognitive therapy, cognitive-behavioral therapy, sex therapy, psychoanalysis, hypnotherapy, or counseling as treatment modalities.

Respectfully,

Jeffrey D. Stern, Ph.D.
Past President, Hawai'i Psychological Association

References

Jacobson, J. W., Mulick, J. A., & Green, G. (1998). Cost-benefit estimates for early intensive behavioral intervention for young children with autism – general model and single state case. *Behavioral Interventions*, 13, 201-226.

Neimeyer, G. (2013). Understanding the DSM-5 and the ICD: Problems and prospects in recent revisions. Presentation to Hawai'i Psychological Association, July, 2013.



HAWAII DISABILITY RIGHTS CENTER

1132 Bishop Street, Suite 2102, Honolulu, Hawaii 96813

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THE HOUSE OF REPRESENTATIVES THE TWENTY-EIGHTH LEGISLATURE REGULAR SESSION OF 2015

Committee on Health Testimony on S.B. 791, SD1 Relating to Autism Spectrum Disorders

Wednesday, March 18, 2015, 8:45 A.M.
Conference Room 329

Chair Belatti and Members of the Committee:

The purpose of the bill is to require health insurance plans to provide coverage for autism spectrum disorders. This is a very significant problem and this coverage seems appropriate for insurance policies. The whole point of insurance is to spread risk and cost among an entire population, so that disproportionate, catastrophic expenses are not heaped upon specific individuals or groups.

With that in mind, we need to realize that autism is occurring among children in epidemic proportions. According to current statistics, **one out of 110 children (1 out of 85 boys) are born with autism**. That is a staggering, alarming figure, as is the cost to those families and to society to care for these individuals over the course of their lives. **It is estimated that the cost of caring for a single individual with autism for a lifetime is \$3 million**. Evidence suggests that techniques such as applied behavioral analysis have been effective in mitigating or reducing or eliminating the effects of autism if used at an early age. While the treatments may seem costly in the short run, hundreds of thousands of dollars, if not millions, are saved over the course of a lifetime by the early utilization of treatments.

Further, while some services are supposed to be provided via the DOE under the Individuals With Disabilities Education Act, in reality, the DOE has done a very poor job of either educating or providing needed services to children with autism. Therefore, other means of providing coverage and services need to be addressed.



Inasmuch as autism is unfortunately becoming common and the costs are so high, insurance coverage is appropriate as a mechanism to spread the risk and cost amongst all of us. We note that an increasing number of states in the country currently mandate some insurance coverage for autism. Hawaii in fact is now in a smaller minority. Therefore, this would seem to be an approach to addressing this problem which has received broad support.

Moreover, we recently filed a class action lawsuit in Federal Court against the Department of Human Services to require them to cover applied behavioral analysis under the Medicaid EPSDT program. It now appears that in response to the Court case the Department has announced that it will begin to cover applied behavioral analysis services. In light of that it would seem anomalous to provide these services to our children on Medicaid and not require their provision to the children of families who are working and paying into their system of private health plan coverage.

Thank you for the opportunity to testify on this measure.

Testimony of Phyllis Dendle
Director, Government Relations

Before:
The House Committee on Health
The Honorable Della Au Belatti, Chair
The Honorable Richard P. Creagan, Vice Chair

March 18, 2015
8:45 am
Conference Room 329

SB 791 SD1 RELATING TO AUTISM SPECTRUM DISORDERS

Chair Belatti and committee members thank you for the opportunity to provide testimony on this bill to mandate coverage of treatment for autism spectrum disorders.

Kaiser Permanente Hawaii supports this bill.

Kaiser Permanente Hawaii supports passage of legislation to mandate insurance coverage for individuals with an autism spectrum disorder that is evidence based and focused on the care and treatment of the patient. We believe that patients should be tested and diagnosed in accordance with the guidelines provided by the American Academy of Pediatrics. We believe that the mandate should provide coverage when it is most likely to provide the maximum benefit for the individual. In addition, we want to assure that the providers of the treatment for these individuals are appropriately credentialed and regulated because of the vulnerability of the individuals they are serving.

Kaiser Permanente has testified in favor of a mandate as described above and has sought to amend legislation which did not meet these standards without much success for the last two legislative sessions. We are happy to see and to support SB 791. We believe this is the right way to cover this kind of care and we believe it is time to do so.

Thank you for your consideration.



3/18/15
COMMITTEE ON HEALTH
Representative Della Au Belatti, Chair
Representative Richard P. Creagan, Vice Chair

Hawaii State Capitol
415 South Beretania Street
Conference Room 329

Dear Committee Chair, Vice Chair and Members of the Committee:

My name is Lara Bollinger and I am a Board Certified Behavior Analyst (BCBA) and the Treasurer of the Hawaii Association for Behavior Analysis. I have been working with children with autism for about 15 years and have been certified as a Behavior Analyst for 4 years. I am also a sibling of an adult who is severely affected by Autism.

I'm writing to you today to lend my support to SB791 with the following amendments:

- Section 2, a., Section 3, a. – Coverage to age 11 is insufficient. This age cap should be lifted to allow for medically necessary services for children of ALL ages. ABA is effective across the lifespan. There is no evidence or medical reason for capping services at age 11. This age cap will leave many children who could still benefit from services at a disadvantage. Puberty is an age where many children have difficulty. Add autism on top of an already turbulent time, and then take away services and I see the possibility of disaster. Medicaid is required to cover ABA services for children with autism through age 21. I believe it is important for our private health insurance companies to follow suit, or better still, remove the age cap altogether.
- Section 2, d., Section 3, d. – Financial caps should also be lifted. Caps of \$30,000 will not allow the level of services needed by many young children with autism. A cap of \$30,000 would barely put a dent into the services needed by the most severely affected of children as well as our youngest children who could benefit most from intensive services. The cap of \$30,000 would only allow for a minimal program of less than 10 hours per week. While that would level of intensity would be sufficient for some children, it is not sufficient for all.
- Section 2, l., Section 3, l. – Requiring children to go through repeat testing to determine eligibility could lead to disruption of services. Many children may have been diagnosed with an earlier version of the current diagnostic criteria. Some measure should be made to allow for the time needed to get “re-diagnosed” especially as appointments to get this diagnosis may be difficult to come by in this state.

Hawai'i Association for Behavior Analysis (HABA)

350 Ward Avenue
Ste 106-221
Honolulu, HI 96814
www.hawaiiaba.org



I believe this is the year for Hawaii to pass this important legislation! This bill would give access to medically necessary services to many children who are desperately in need of them. In the long run, this bill would save the state a lot of money as children who receive early intensive behavioral intervention are much less likely to need lifelong care.

Thank you for your time,

A handwritten signature in black ink, appearing to read 'Lara B.', is shown on a light-colored background.

Lara Bollinger, M.S.Ed., BCBA

Treasurer, Hawaii Association for Behavior Analysis

Resources:

http://bacb.com/Downloadfiles/ABA_Guidelines_for_ASD.pdf

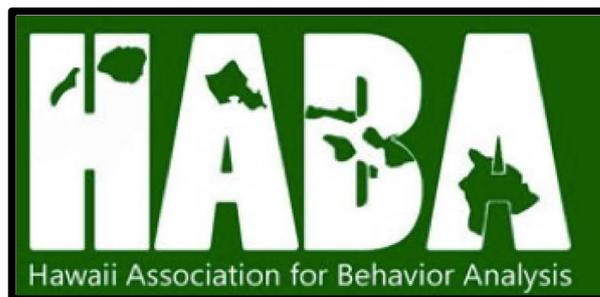
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www.hawaiiaba.org



3/18/15

COMMITTEE ON HEALTH

Rep. Della Au Belatti, Chair

Rep. Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Dear Chair Belatti, Vice Chair Creagan and members of the Committee,

My name is Johanna Taylor and I am a Board Certified Behavior Analyst (BCBA) living on the Big Island in the state of Hawaii. I am writing to encourage you to **support SB 791** with the following revisions:

I support SB 791 for several reasons. First, as a researcher and clinician I have observed the monumental impact services based in applied behavior analysis (ABA) have on individuals with ASD and their ohanas. A wealth of research exists supporting ABA, clearly demonstrating that it is the most effective intervention approach for individuals with ASD to improve IQ, language, academic performance, adaptive behaviors, challenging behaviors, and social behaviors (Myers and Johnson, 2007, p. 1164). Research has demonstrated that children with ASD can reach typical skill development if provided with services early in life because this is when the brain is the most malleable (Dawson et al., 2010). It is imperative that all children with ASD receive individualized ABA-based services from a young age so they can succeed later in life.

My second reason for supporting this bill is that I have observed the current climate for support for families of children with autism. Unfortunately, in the state of Hawaii, the supports for families of children with autism are extremely limited. Some children receive services through the Department of Education; however, it is clear that the programs are not necessarily individualized for children with autism, developed by a behavior analyst, or grounded in ABA. Therefore, in the cases I have observed, challenging behaviors increased as the child grew older, the level of service needed intensified, and the educational cost for the children grew exponentially over time. There is often little-to-no parent involvement or parent training; therefore, caregivers are unsure of how to deal with challenging behaviors in their child's natural environment. I have witnessed firsthand parents on the Big Island that are struggling to understand how to deal with challenging behaviors and how to appropriately teach their children; if

this bill were to pass, parents would have options for support. The passing of this bill would empower families to help their children with autism using effective and evidence-based strategies.

My final reason for supporting SB791 is that currently on the Big Island there are very few individuals trained in behavior analysis. It is my belief that because there is no funding stream to cover services based in ABA, providers are unlikely to move to the island. The Big Island is a beautiful place to live and has a population larger than any other island outside of Oahu. The families here deserve to have appropriate supports so that their children can succeed and live a meaningful lives. If this bill were to pass, it is likely that more BCBAs would choose to move to the Big Island and make it their home as I have done. Insurance reform is a necessary step towards providing effective services for individuals with ASD. I hope that you consider supporting SB 791 in this legislative session.

Insurance reform is a necessary step towards providing effective services for individuals with ASD. I hope that you consider supporting SB 791 this legislative session.

Mahalo for providing me with the opportunity to submit testimony,

Johanna P. Taylor, PhD, BCBA
Neighbor Island Representative
Hawaii Association for Behavior Analysis

References

- Dawson, G., Rogers, S., Munson, J., Smith, M., Winter, J., Greenson, J., . . . Varley, J. (2010). Randomized, controlled trial of an intervention for toddlers with autism: the Early Start Denver Model. *Pediatrics*, *125*(1), e17-e23.
- Johnson, C. P., & Myers, S. M. (2007). Identification and evaluation of children with autism spectrum disorders. *Pediatrics*, *120*(5), 1183-1215.



03/18/2015

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Dear Chair Belatti, Vice Chair Creagan, and members of the committee,

Thank you for the opportunity to submit testimony on SB791 for **support with revisions**. My name is Kristen Koba-Burdtt and I am Board Certified Behavior Analyst (BCBA). For several years, I have worked with individuals with autism on Maui, Oahu, and the Big Island. Similarly, I have submitted testimony and supported efforts to pass meaningful autism insurance reform in Hawai'i, for several years. Each year, I've watched as more and more children receive insufficient or no early intervention services and enter the DOE far behind their peers. Sadly, this trend continues and children with autism slip farther and farther away from their neurotypical peers. As of today, 38 states, the District of Columbia, and the US Virgin Islands have all passed autism insurance reform and have helped the children of their area gain access to medically necessary treatment. **It's time to do the right thing Hawai'i.**

While I appreciate the intent of SB791, **limiting services to age 11 does not meet the needs of our state**. As evidenced in the actuarial study commissioned from last year's bill, SB2054, children in Hawai'i are diagnosed on average after their 4th birthday, later than children in other states. In my experiences, neighbor island children receive even later diagnosing and a significant delay or no access to services. As a result, I have worked with numerous children in intermediate and high school that have not yet acquired a functional way to communicate and engage in behaviors that place their health and safety at risk.

Applied Behavior Analysis (ABA) is effective across the lifespan and children of all ages deserve access to medically necessary treatment. I have seen first-hand clients make significant progress in their adolescent years. This progress not only improves the quality of life for the child, but also for their ohana. **Without appropriate services, beyond age 11, individuals with autism will exit the DOE and be reliant on the state for the rest of their lives.** Hawai'i's DOH DDD-Medicaid Waiver system is already stretched thin and the state does not have the capacity to handle the sheer volume of individuals that will need support and services. This number becomes exasperated by the fact that many of the individuals will enter the DOH-DDD system without having developed basic skills, requiring higher levels of staff support and training.

There are numerous service providers in this state that are ready and willing to provide medically necessary ABA services. **It is important that the language of SB791 reflect the model of ABA services used around the world. Frontline staff, Registered Behavior Technician's (RBT) or skills trainers, need to also be listed as covered providers**, if they are overseen by a BCaBA, BCBA, BCBA-D, or Psychologist with training and experience in ABA. Additionally, it is crucial that **credentials from the Behavior Analyst Certification Board (BACB) are accepted until licensure is established**.

Autism rates have continued to soar. Currently 1 in 68 children are diagnosed with autism. The need for treatment has never been greater and **it's important that this bill support an appropriate frequency and duration of treatment**, which is why the dollar caps need to be removed. Children with autism can make significant gains, when allowed access to the appropriate level of treatment. **Please allow Hawai'i children their right to effective treatment by removing the age and dollar caps.**

Malama our keiki,



Kristen Koba-Burd, M.S., BCBA
Vice-President, Hawaii Association for Behavior Analysis (HABA)
Behavioral Services Manager, BAYADA Habilitation —Maui
kkoba-burd@BAYADA.com



3/16/15

House Health Committee
Representative Della Au Belatti, Chair
Representative Richard P. Creagan, Vice Chair

Hawaii State Capitol
415 South Beretania Street, Conference Room 329

Committee Chair, Vice Chair, and Committee Members,

I'm grateful for the opportunity to submit testimony in **support of SB791, with revision**. Passing this legislation will make Hawaii the final democratic state to adopt an autism insurance mandate. While I support this legislative effort, I find the **age cap** in SB791 to be counter intuitive. In Hawaii in particular, there exists extreme challenges in the areas of diagnoses of autism and ongoing access to adequate treatment.

An age cap of 11 on SB791 does not ensure that individuals with autism will have access to necessary treatments, as prescribed by their doctors. Discriminating treatment based on age shows a lack of understanding of the epidemic of autism and its treatment. If the purpose of SB791 is to provide access to effective treatment, I support the bill with the condition that the age cap be raised to 21 years, as offered by Medicaid.

Respectfully Submitted,
Molly Benson M.S. Sp.Ed BCBA



3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

My name is Sara Sato and I am Board Certified Behavior Analyst (BCBA). I have a Master's Degree in Special Education, Severe Disabilities/Autism Specialization from the University of Hawai'i at Manoa and have been working with individuals with disabilities for 15 years. I have worked in Hawai'i and San Francisco as an Educational Assistant, Skills Trainer, Behavioral Therapist, Special Education Teacher, and Behavior Analyst practicing Applied Behavior Analysis (ABA). I am writing this testimony to voice my support for SB791 which would mandate insurance coverage for children with Autism.

Today, about 1 in 68 children has been identified with Autism Spectrum Disorder (ASD) according to estimates from CDC's Autism and Developmental Disabilities Monitoring (ADDM) Network. There are numerous studies which show that Early Detection and Early Intervention are key in addressing the symptoms of ASD (Moore & Goodson, 2003; Peters-Scheffer, N., et. al, 2011, etc.). However, for individuals diagnosed with ASD and their families in Hawai'i, there are very limited state-funded options available for treatment. Families are left to accept the minimal amount of assistance provided by the State (sometimes only 1 therapy session per week); wait until their child reaches school age to seek Special Education Services; or are forced to pay out of pocket for intensive behavioral therapy which can cost between \$40,000 to \$60,000 per year and which only a very small percentage of residents can afford. Additionally,

it is estimated to cost at least \$17,000 more per year to care for a child with ASD compared to a child without ASD. Costs include health care, education, ASD-related therapy, family-coordinated services, and caregiver time. For a child with more severe ASD, costs per year increase to over \$21,000. Taken together, it is estimated that total societal costs of caring for children with ASD were over \$9 billion in 2011 (Lavelle, et. al, 2014). It is unreasonable for the citizens of Hawai'i to believe that families affected by ASD can bear the financial and emotional burden on their own.

If this bill is passed there will certainly be an increase in insurance premiums, however, there are studies to support cost-savings of Early Intensive Behavioral Intervention compared to Special Education Services (Chasson, G. S., 2007) and Early Intensive Behavioral Intervention and cost-savings over the lifespan of individuals with ASD (Peters-Scheffer, N., 2012). When we consider this research, it only makes logical and fiscal sense to mandate Hawai'i health insurers to cover the cost of treatment for ASD.

Nationwide there are 38 states which currently require private health insurers to cover the cost of ABA therapy. Let's make Hawai'i the 39th and show our local Ohana affected by Autism that there is hope. There is a way.

Sincerely,

A handwritten signature in cursive script that reads "Sara Sato".

Sara Sato, M.Ed., BCBA

Legislative Co-Chair Hawaii Association for Behavior Analysis (HABA)

References:

Moore, V., & Goodson, S. (2003). How well does early diagnosis of autism stand the test of time? Follow-up study of children assessed for autism at age 2 and development of an early diagnostic service. *Autism*, 7(1), 47-63.

Peters-Scheffer, N., Didden, R., Korzilius, H., & Sturmey, P. (2011). A meta-analytic study on the effectiveness of comprehensive ABA-based early intervention programs for children with Autism Spectrum Disorders. *Research in Autism Spectrum Disorders*, 5(1), 60-69.

Lavelle, T. A., Weinstein, M. C., Newhouse, J. P., Munir, K., Kuhlthau, K. A., & Prosser, L. A. (2014). Economic burden of childhood autism spectrum disorders. *Pediatrics*, 133(3), e520-e529.

Chasson, G. S., Harris, G. E., & Neely, W. J. (2007). Cost comparison of early intensive behavioral intervention and special education for children with autism. *Journal of Child and Family Studies, 16*(3), 401-413.

Peters-Scheffer, N., Didden, R., Korzilius, H., & Matson, J. (2012). Cost comparison of early intensive behavioral intervention and treatment as usual for children with autism spectrum disorder in The Netherlands. *Research in developmental disabilities, 33*(6), 1763-1772.



3/18/15

COMMITTEE ON HEALTH
Representative Della Au Belatti, Chair
Representative Richard P. Creagan, Vice Chair

Conference Room 329
Hawaii State Capitol
415 South Beretania Street

Committee Chair, Vice Chair, and Committee Members,

I support the intent of SB791, with revisions.

My name is Amanda N. Kelly and I am a Board Certified Behavior Analyst at the Doctoral (BCBA-D™) level. I have been certified as a behavior analyst from the Behavior Analyst Certification Board (BACB™) for the past 10 years, and have been working with keiki with autism for the past 15.

Currently, I serve as:

- Executive Director, Keiki Educational Consultants, Inc. (Haleiwa, Hawai'i)
- K8 Counselor at Assets Elementary (Honolulu, Hawai'i)
- Adjunct Professor, University of West Florida's ABA online program
- Exam Prep Instructor, Global Autism Project (GAP)
- President, Hawai'i Association for Behavior Analysis (HABA)

First, a few facts:

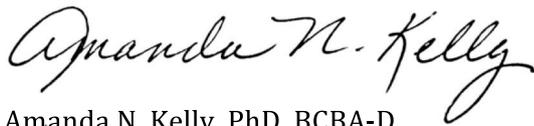
- 1) Autism spectrum disorder (ASD) affects 1 in 68 children in the US, 1 in 54 boys
- 2) The only evidenced-based effective treatment is applied behavior analysis (ABA)
 - a. ABA is endorsed by the US Surgeon General, the American Academy of Pediatrics, the Center for Disease Control (CDC) and many other reputable agencies and experts.
 - b. ABA is recognized by the American Medical Association (AMA)
- 3) 38 States in the United States have passed meaningful Autism Insurance Mandates.
 - a. 12 States remain.
 - b. Hawai'i is the last democratic state remaining.
- 4) Behavior analysts are being reimbursed for their services as CERTIFIED professionals
 - a. Request for licensure have been used as stall tactics in many states
 - b. 18 states license behavior analysts and 1 state certifies (Ohio)
 - c. All states that require licensure, accept the BACB credentials
 - d. There is a current SB40 that seeks to license Behavior Analysts.
We are in favor of this piece of legislation.
- 5) Imposing age caps conflict with the mental health-parity law
 - a. Imposing dollar caps may conflict with intention of the affordable care act (ACA).
 - b. Medicaid has released a memo extending services through **age 21**.

- c. There is long standing evidence of effectiveness of applied behavior analysis. When treatment is provided, results are obtained, across the life span (*see attached*).
- d. Cutting services arbitrarily at any age, is both morally and fiscally reprehensible

The question no longer remains "**will** Hawai'i pass an autism insurance mandate" but "**when** will Hawai'i pass a autism insurance". We know it's the right thing to do, from a humanistic as well as a financial perspective. Waiting does damage to individuals affected with autism, their families, schools, and communities. Waiting misses valuable teaching opportunities. Waiting is something our keiki simply can't afford to do.

Many mahalos to you for your ongoing support of autism insurance reform in Hawai'i.

Malama Our Keiki,

A handwritten signature in black ink that reads "Amanda N. Kelly". The signature is written in a cursive, flowing style.

Amanda N. Kelly, PhD, BCBA-D
President, Hawai'i Association for Behavior Analysis

Applied Behavior Analysis (ABA) for Autism: What is the Effective Age Range for Treatment? Eric V. Larsson, Ph.D., L.P., B.C.B.A.-D. (2012)

There is extensive research in the field of Applied Behavior Analysis (ABA) that shows the effectiveness of focused treatment of behavior disorders with children who suffer from autism who are between the ages of five to twenty-one.

In the research listed here, over 2,000 children and adolescents who were between the ages of five and twenty-one were documented as receiving effective ABA treatment.

In addition, the cost effectiveness of Early Intensive Behavioral Intervention (EIBI) for autism is also well documented. Much of the research emphasizes the need to treat the children at as young an age as possible, and this is certainly an important aspect of effective treatment. However, the following list of several hundred references also reports the clinically important impact of Applied Behavior Analysis (ABA) with children who are specifically *above* the age of seven.

For a child starting treatment at any age, the average length of intensive ABA treatment would be expected to be 3 years, and the range of medically necessary treatment durations has been shown to be from 18 months to 5 years of duration. Maximum cost effectiveness will be achieved when a competent authorization process involves evaluation of the child's response to treatment and prognosis every six months, as was typically done in the studies listed here. When applying such standards, the children would not automatically continue treatment indefinitely. Instead the intensity and duration would be tailored to each child's optimum effectiveness, by periodically evaluating each child's individual response to treatment, and thereby dramatically control costs by providing time-limited ABA for only so long as is medically necessary.

These following studies reported meta-analyses of ABA treatment of children and adolescents with autism, between the ages of five and fifteen.

Reichow and Volkmar, in 2010, reported on 31 studies of children, aged four to fifteen, who benefited from ABA social skills training:

“The school-age category had the highest participant total of the three age categories (N = 291).” (page 156).

“Within the last 8 years, 66 studies with strong or acceptable methodological rigor have been conducted and published. These studies have been conducted using over 500 participants, and have evaluated interventions with different delivery agents, methods, target skills, and settings. Collectively, the results of this synthesis show there is much supporting evidence for the treatment of social deficits in autism.” (page 161).

Reichow, B. & Volkmar, F.R. (2010). Social Skills Interventions for Individuals with Autism: Evaluation for Evidence-Based Practices within a Best Evidence Synthesis Framework. Journal of Autism and Developmental Disorders. 40, 149-166.

Bellini and colleagues, in 2007, reported the following age ranges of 155 children who benefited from ABA social skills training:

“21 studies involved preschool-age children, 23 involved elementary age children, and 5 studies involved secondary-age students.” (page 158).

Bellini, S., Peters, J.K., Benner, L., & Hopf, A. (2007). A meta-analysis of school-based social skills interventions for children with autism spectrum disorders. Remedial and Special Education, 28, 153-162.

These following studies reported peer reviews of ABA treatment of children and adolescents with autism, between the ages of five and eighteen.

Brosnan and Healy, in 2011, reported on 18 studies of children aged three to 18, who received effective ABA treatment to reduce or eliminate severe aggressive behavior:

“All of the studies reported decreases in challenging behavior attributed to the intervention. Of the studies included, seven reported total or near elimination of aggression of at least one individual during intervention in at least one condition.” (page 443).

“only four of the studies conducted follow-up assessments. However, each of these studies reported that treatment gains were maintained.” (page 443).

Brosnan, J., & Healy, O. (2011). A review of behavioral interventions for the treatment of aggression in individuals with developmental disabilities. Research

in Developmental Disabilities. 32, 437–446.

Lang, et al. in 2010, reported on nine studies which involved 110 children aged nine to 23, who received a variety of forms of behavior therapy for anxiety.

“Within each reviewed study, at least one dependent variable suggested a reduction in anxiety following implementation of CBT.” (page 60).

“CBT has been modified for individuals with ASD by adding intervention components typically associated with applied behaviour analysis (e.g. systematic prompting and differential reinforcement). Future research involving a component analysis could potentially elucidate the mechanisms by which CBT reduces anxiety in individuals with ASD, ultimately leading to more efficient or effective interventions.” (page 53).

Lang, R., Regester, A., Lauderdale, S., Ashbaugh, K., & Haring, A. (2010). Treatment of anxiety in autism spectrum disorders using cognitive behaviour therapy: a systematic review. Developmental Neurorehabilitation, 13, 53–63.

Hanley, Iwata, and McCord in 2003, reported on 277 studies which involved 536 children and adults (70% of the studies included persons between the ages of 1 and 18, and 37% also included persons older than 18), who received functional analyses of problem behaviors. Of these, 96 percent were able to yield an analysis of the controlling variables of the problem behavior. The specific functional analysis of individual problem behaviors is crucial to the successful intervention with those behaviors.

“Large proportions of differentiated functional analyses showed behavioral maintenance through social-negative (34.2%) and social-positive reinforcement (35.4%). More specifically, 25.3% showed maintenance via attention and 10.1% via access to tangible items. Automatic reinforcement was implicated in 15.8% of cases.” (pages 166-167).

Hanley, G., Iwata, B.A., & McCord, B.E. (2003). Functional analysis of problem behavior: A review. Journal of Applied Behavior Analysis, 36, 147-185.

Iwata and colleagues, in 1994, reported on the effective treatment of self-injurious behavior with 152 children, adolescents, and adults. In their sample, 39 were between the ages of 11 and 20, and 74 were 21 and older. The function of the self-injurious behavior could be identified in 95% of the persons, and in 100% of those cases an effective treatment could then be prescribed.

“Across all categories of intervention, restraint fading was the most effective, but its 100% success rate is misleading because it was always implemented in conjunction with another procedure. As single interventions, EXT (escape) had the highest

success rate (93.5%); sensory integration and naltrexone had the lowest (0%).” (page 233).

“Results of the present study, in which single-subject designs were used to examine the functional properties of SIB in 152 individuals, indicated that social reinforcement was a determinant of SIB in over two thirds of the sample, whereas nonsocial (automatic) consequences seemed to account for about one fourth of the cases.” (page 234).

Iwata, B.A., Pace, G.M., et al. (1994). The functions of self-injurious behavior: An experimental-epidemiological analysis. Journal of Applied Behavior Analysis, 27, 215-240.

The following studies reported age cut-offs for initiating EIBI up to the age of seven years (84 months) and completing treatment up to the age of twelve.

Several articles of note are highlighted that report the effectiveness of EIBI/ABA that was delivered to children who *started* treatment even up to the age of seven, and then continued treatment for up to five more years, up until the age of twelve, where still medically necessary. The range of age cut-offs in evidence-based EIBI studies were established for the purpose of controlled research, and were based upon a number of factors, such as available funding. They weren't meant to imply that autism was untreatable after those ages. Throughout the EIBI literature, the published range of such age cut-offs, for the purpose of research, was 48 to 84 months for the maximum age to *begin* receiving treatment, and then the subsequent duration of treatment was one to five years, lasting up to the age of twelve.

Eikeseth and colleagues, in 2007, used the following cut-off: “All referrals who met the following criteria were admitted to the study: (a) a diagnosis of childhood autism... (b) chronological age between 4 and 7 years at the start of treatment, (c) a deviation IQ of 50 or above... and (d) no medical conditions... that could interfere with treatment.” (page 266).

“The largest gain was in IQ; the behavioral treatment group showed an increase of 25 points (from 62 to 87) compared to 7 points (from 65 to 72) in the eclectic treatment group.” (page 269). “in the behavioral treatment group, all correlations among intake age and outcome measures and changes were nonsignificant, with $r(12)$ ranging from $-.40$ to $.46$. Thus, age was not reliably associated with outcome or amount of change for this group.” (page 273).

Eikeseth, S., Smith, T., Jahr, E., & Eldevik, S. (2007). Outcome for children with autism who began intensive behavioral treatment between ages 4 and 7: A comparison controlled study. Behavior Modification, 31, 264-278.

Mudford and colleagues, in 2001, reported the following cut-off: “By the age of 4 years, 71% of the sample had started EIBI. At the ages of 5, 6 and 7 years, the corresponding cumulative figures were 91%, 97% and 100%.” (page 177).

Mudford, O.C., Martin, N.T., Eikeseth, S., & Bibby, P. (2001). Parent-managed behavioral treatment for preschool children with autism: Some characteristics of UK programs. Research in Developmental Disabilities, 22, 173-182.

Sallows and Graupner, in 2005, reported the following data for children who ranged up to the age of 8.5 years of age at the conclusion of treatment:

“Following 2 to 4 years of treatment, 11 of 23 children (48%) achieved Full Scale IQs in the average range, with IQ increases from 55 to 104, as well as increases in language and adaptive areas comparable to data from the UCLA project. At age 7, these rapid learners were succeeding in regular first or second grade classes, demonstrated generally average academic abilities, spoke fluently, and had peers with whom they played regularly.” (page 433).

Sallows, G.O., & Graupner, T.D. (2005). Intensive Behavioral Treatment for Children With Autism: Four-Year Outcome and Predictors. American Journal on Mental Retardation, 110, 417-438.

Love, Carr and colleagues, in 2009, reported the following average ages of treatment in a comprehensive survey of nationwide ABA practices:

“Seventy-four percent (n = 153) of respondents reported that the *average* age of the children they served was between 2 and 5 (33% reported serving children who were 4-years old), and 26% (n = 55) reported an *average* client age of 6 or greater.” (page 177).

Love, J.R., Carr, J.E., Almason, S.M., Petursdottir, A.I. (2009). Early and intensive behavioral intervention for autism: A survey of clinical practices. Research in Autism Spectrum Disorders, 3, 421-428.

These additional 227 studies report the evidence base for ABA treatment of children who suffer from autism between the ages of five and twenty-one.

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Eric V. Larsson, Ph.D., L.P., B.C.B.A.-D. Executive Director, Clinical Services The Lovaas Institute for Early Intervention Midwest Headquarters 2925 Dean Parkway, Suite 300 Minneapolis, MN 55416 elarsson@lovaas.com mobile: 612.281.8331 office: 612.925.8365 fax: 612.925.8366 www.lovaas.com

(2012) Eric V. Larsson, Ph.D., L.P., B.C.B.A.-D.



AUTISM SPEAKS™
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March 18, 2015
Conference Room 329 8:45 am

House Committee on Health
Representative Della Au Belatti, Chair
Representative Richard P. Creagan, Vice Chair

State Capitol
415 South Beretania St
Honolulu, HI 96813

Re: In Support of SB 791 SD1

RELATING TO AUTISM SPECTRUM DISORDERS. Requires health insurers, mutual benefit societies, and health maintenance organizations to provide coverage for autism diagnosis and treatment.

Dear Chair Belatti and Members of the Committee:

I am Michael Wasmer, Director of State Government Affairs at Autism Speaks and the parent of a child with autism. Autism Speaks is the world's leading autism science and advocacy organization, dedicated to funding research into the causes, prevention, treatments and a cure for autism; increasing awareness of autism spectrum disorders; and advocating for the needs of individuals with autism and their families. Our state government affairs team has played a role in most of the now 38 states that require health insurance coverage for autism treatments. Autism Speaks is pleased to submit testimony in strong support of SB 791 SD1.

In previous sessions, Autism Speaks has testified to this committee in support of mandatory health insurance coverage for autism spectrum disorder including Applied Behavior Analysis (ABA). We have shared an overview of autism spectrum disorders and our national experience with autism insurance legislation. Our testimony has included a discussion of the epidemic increase in prevalence of autism (now 1 in 68); research documenting the efficacy of ABA therapy; actual claims data from states which were among the first to enact autism insurance reform laws; and the long-term cost savings and fiscal imperative of autism insurance reform.

Autism Speaks strongly supports SB 791 SD1 but feels that the terms of coverage in HB 1108 HD1 are more consistent with medical necessity. We would therefore encourage the committee to consider substituting SB 791 SD1 with the language of HB 1108 HD1 and make note of the following additional items for deliberation:

- ▶ HB 1108 HD1; §431:10 A (a) and §432:1 (a): "...issued or renewed **in this State...**"

According to the National Association of Insurance Commissioners, Hawaii applies mandated coverage for the benefit of its residents if the residents work for (and receive insurance from) an employer who has a branch office or principal place of business in Hawaii, regardless of



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whether the policy was written in Hawaii, so long as the language of the mandate supports such application. To prevent Hawaii residents whose policies happen to be written elsewhere from losing the benefit of this mandate, Autism Speaks recommends striking “in this State” from this subsection.

- ▶ HB 1108 HD1; §431:10 A (a) and §432:1 (a): “...after December 31, **2016...**”

Autism Speaks recommends that the date 2016 be changed to 2015. As currently written, the bill would make coverage unavailable in the private insurance market until 2017 – nearly two years from now. Other states have implemented their autism insurance mandates in considerably less time (typically at the start of the year following enactment).

Also, Medicaid-eligible children with autism in Hawaii have access to ABA coverage now. Delaying implementation of the autism insurance mandate until 2017 will cause Hawaii families to flock to Medicaid for coverage, thereby ensuring that taxpayers are footing the bill for families who are willing and able to pay premiums every month for private coverage.

- ▶ HB 1108 HD1; §431:10 A (c) and §432:1 (c):

Autism Speaks opposes artificially-drawn dollar limits (and age caps) on treatment and believes such limits violate federal law. (See Interim Final Rules Under Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008, 75 Fed. Reg. 5410, 5413.)

Such limits also ensure that children whose parents pay for private health insurance receive inferior coverage to children on Medicaid, since Medicaid coverage under the Early and Periodic Screening Diagnostic and Treatment program is limited only by medical necessity and not by random dollar limits.

- ▶ HB 1108 HD1; §431:10 A (d) and §432:1 (d): “...for substantially all **other** medical services...”

Use of the word “other” in this sentence infers that covered services for autism are medical in nature versus mental health services. Autism Speaks recommends deleting the word “other” in this sentence in order to retain the distinction that autism is a mental health disorder and that services for autism are mental health in nature. This ensures that autism and its treatment are subject to the protections afforded by federal mental health parity law.

- ▶ HB 1108 HD1; §431:10 A (g) and §432:1 (g): “**Except for inpatient services...**”

Autism Speaks questions whether the sentence permitting insurers to review treatment plans is meant to exclude inpatient services. (This paragraph formerly limited an insurer’s ability to review treatment plans to once a year; an annual review was felt to be insufficient for inpatient services, and that is why the introductory clause “except for inpatient services” was included. Now that the sentence no longer limits an insurer’s ability to review treatment plans, the introductory clause no longer makes sense.)



- ▶ HB 1108 HD1; §431:10 A (n) and §432:1 (n): “**Behavioral health treatment**” means...

Autism Speaks recommends changing the term “behavioral health treatment” to “habilitative services”.

Hawaii’s benchmark plan is currently missing habilitative services and Hawaii has not defined “habilitative services” for purposes of its Essential Health Benefit (EHB) package. As detailed in the attached memo, the U.S. Department of Health and Human Services issued Final Regulations on EHB in February 27, 2015. These Final Regulations clarified that state laws enacted in order to define “habilitative services” are not considered benefits in addition to the EHB; such laws ensure compliance with 45 C.F.R. § 156.110(a), which requires coverage of all EHB categories. Therefore, there is no obligation to defray the cost of such State-required benefits.

Changing the term “behavioral health treatment” to “habilitative services” would ensure compliance with federal law and allow for inclusion of ACA-compliant plans among those subject to the terms of SB 791.

Per our discussions with The Center for Consumer Information and Insurance Oversight (CCIIO), it is recommended that the definition of “habilitative services” be placed in a stand alone section of Hawaii insurance code so as not to infer that habilitative services are exclusive to autism.

Additional changes to HB 1108 HD1 necessary to comply with this recommendation include the following:

- §431:10 A (c) and §432:1 (c):

“Individual coverage for ~~behavioral health treatment~~ **habilitative services** provided under this section...”

“Payments made by an insurer on behalf of a covered individual for any care, treatment, intervention, or service other than ~~behavioral health treatment~~ **habilitative services** shall not...”

- §431:10 A (i) and §432:1 (i):

“Nothing in this section shall apply to ~~non-grandfathered plans in the individual and small group markets that are required to include essential health benefits under the Patient Protection and Affordable Care Act, Public Law 111-148, as amended, or to~~ medicare supplement, accident-only, ...”



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- §431:10 A (n) and §432:1 (n):

“Treatment for autism spectrum disorders” includes...if the following care is determined to be medically necessary:

- (1) **Behavioral health treatment Habilitative services”**

Thank you for considering my comments. We encourage the committee to pass SB 791 SD1 with these changes and look forward to working with you and the health plans to reach consensus on acceptable terms of coverage.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'mwasmer'.

Michael Wasmer
Director, State Government Affairs
Autism Speaks
michael.wasmer@autismspeaks.org



The ACA specified 10 Essential Health Benefit categories that must be included in any ACA-compliant plan (“qualified health plan”), whether sold on or off the marketplace (in Hawaii, “the Connector”). The 10 Essential Health Benefit categories are:

- (A) Ambulatory patient services.*
- (B) Emergency services.*
- (C) Hospitalization.*
- (D) Maternity and newborn care.*
- (E) Mental health and substance use disorder services, including behavioral health treatment.*
- (F) Prescription drugs.*
- (G) Rehabilitative and habilitative services and devices.*
- (H) Laboratory services.*
- (I) Preventive and wellness services and chronic disease management.*
- (J) Pediatric services, including oral and vision care.*

If a state mandates a benefit that exceeds the 10 Essential Health Benefits, then the state must defray the cost of that mandate (as to individuals who purchase insurance through the Connector with premiums subsidized by the federal government).¹

¹ (3) RULES RELATING TO ADDITIONAL REQUIRED BENEFITS.—

(A) IN GENERAL.—Except as provided in subparagraph (B), an Exchange may make available a qualified health plan notwithstanding any provision of law that may require benefits other than the essential health benefits specified under section 1302(b).

(B) STATES MAY REQUIRE ADDITIONAL BENEFITS.—

(i) IN GENERAL.—Subject to the requirements of clause (ii), a State may require that a qualified health plan offered in such State offer benefits in addition to the essential health benefits specified under section 1302(b).

(ii) STATE MUST ASSUME COST.—A State shall make payments to or on behalf of an individual eligible for the premium tax credit under section 36B of the Internal Revenue Code of 1986 and any cost-sharing reduction under section 1402 to defray the cost to the individual of any additional benefits described in clause (i) which are not eligible for such credit or reduction under section 36B(b)(3)(D) of such Code and section 1402(c)(4).

Rather than fleshing out the 10 Essential Health Benefit (EHB) categories in a uniform way, the U.S. HHS allowed each state to select an existing private insurance plan as a benchmark for the state. Whatever benefits the benchmark included for the 10 EHB categories would be the EHBs for the state. If a state selected a benchmark that was missing a category, HHS set forth rules for how the category could be supplemented.

Numerous states selected benchmark plans that were wholly missing the category “habilitative services.” As such, in a December 2011 EHB bulletin, HHS set forth a two-part scheme to address this deficiency:

- A state could define habilitative services, or
- As a transitional approach, health insurance plans would decide which habilitative services to cover, and would report on that coverage to HHS.

In its December 2011 bulletin, HHS indicated that it would evaluate those decisions and further define habilitative services in the future.

About a dozen states became aware of and took advantage of the opportunity to define “habilitative services” following the December 2011 guidance; the rest of the states in which habilitative services were missing from the benchmark allowed the health insurance plans to determine what “habilitative services” meant.

On February 27, 2015, HHS issued Final Regulations on EHBs. The Final Regulations embraced and maintained the general EHB benchmark approach established in 2011, but it made one major change on “habilitative services.” In the Final Regulations, health insurance plans can no longer decide for themselves what “habilitative services” means. Instead, the states are asked to define “habilitative services,” and, if they don’t, the Final Regulations establish a federal default definition (“Health care services that help a person keep, learn, or improve skills and functioning for daily living”).

The Final Regulations issued last month also make clear that state laws enacted in order to define “habilitative services” are not considered benefits in addition to the EHB; such laws ensure compliance with 45 C.F.R. § 156.110(a), which requires coverage of all EHB categories. Therefore, there is no obligation to defray the cost of such State-required benefits.

Hawaii’s benchmark is missing habilitative services, and Hawaii has not defined “habilitative services.” (See the state tables created by the Center for Consumer Information and Insurance Oversight at the U.S. Department of Health and Human Services, <http://cciio.cms.gov/resources/data/ehb.html>)

As such, Hawaii presently has an opportunity to define “habilitative services” as including Applied Behavior Analysis (which fits squarely in the common understanding and federal default definition of “habilitative services”) and to thereby avoid defraying the cost of ABA

coverage. Hawaii will be essentially determining for itself that ABA benefits are included in the state's EHB package, thereby guaranteeing that such benefits will not exceed EHB and no obligation to defray costs would be triggered.

Ohio and Michigan took advantage of this flexibility after the 2011 guidance and defined "habilitative services" explicitly to include ABA (see attached letters). As such, ABA has been an EHB in Ohio and Michigan since ACA plans began being sold in 2014. Altogether, ABA is an EHB in 29 states, either because ABA was originally included in the benchmark or because the state defined "habilitative services" to include applied behavior analysis.

As such, Hawaii can and should exercise its authority under 45 C.F.R. sec. 156.110(f) to add applied behavior analysis coverage to its exchange plans by either including a definition of "habilitative services" within the currently pending autism insurance legislation (SB791), or by writing to HHS and requesting that habilitative services in Hawaii include ABA.

Excerpt from December 2011 Essential Health Benefits Bulletin

Habilitation

Because habilitative services are a less well defined area of care, there is uncertainty on what is included in it. The NAIC has proposed a definition of habilitation in materials transmitted to the Department as required under Section 2715 of the PHSA, and Medicaid has also adopted a definition of habilitative services.

These definitions include the concept of “keeping” or “maintaining” function, but this concept is virtually unknown in commercial insurance, which focuses on creating skills and functions (in habilitation) or restoring skills and function (for rehabilitation). Private insurance and Medicare may use different definitions when relating to coverage of these services.

We seek comment on the advantages and disadvantages of including maintenance of function as part of the definition of habilitative services. We are considering two options if a benchmark plan does not include coverage for habilitative services:

- 1) Habilitative services would be offered at parity with rehabilitative services -- a plan covering services such as PT, OT, and ST for rehabilitation must also cover those services in similar scope, amount, and duration for habilitation; or
- 2) As a transitional approach, plans would decide which habilitative services to cover, and would report on that coverage to HHS. HHS would evaluate those decisions, and further define habilitative services in the future.

[The federal definition of “habilitative services” is]

Health care services that help a person keep, learn, or improve skills and functioning for daily living. Examples include therapy for a child who is not walking or talking at the expected age. These services may include physical and occupational therapy, speech-language pathology and other services for people with disabilities in a variety of inpatient and/or outpatient settings.

We did not propose any changes to § 156.110(f), which allows States to determine services included in the habilitative services category if the base-benchmark plan does not include coverage. Several States have made such a determination following benchmark selection for the 2014 plan year, and we wish to continue to defer to States on this matter as long as the State definition complies with EHB policies, including non-discrimination. If the State does not supplement missing habilitative services or does not supplement the services in an EHB-compliant manner, issuers should cover habilitative services and devices as defined in § 156.115(a)(5)(i).

Because we proposed to establish a uniform definition of habilitative services in new § 156.115(a)(5)(i), we also proposed to delete § 156.110(c)(6), which would remove the option for issuers to determine the scope of the habilitative services.

We are finalizing our policy as proposed, adopting the definition of habilitative services from the Uniform Glossary in its entirety, to be effective beginning with the 2016 plan year...

Comment: Several commenters requested more State flexibility, even in cases where the benchmark plan includes habilitative services; they sought assurance that a Federal definition will not supersede a State law, and that State-required benefits that could be considered habilitative services would be treated as EHB.

Response: States are required to supplement the benchmark plan if the base benchmark plan does not include coverage of habilitative services as defined in this final rule. We are codifying the definition of habilitative services as a minimum for States to use when determining whether plans cover habilitative services. State laws regarding habilitative services are not pre-empted so long as they do not prevent the application of the Federal definition. State laws enacted in order to comply with § 156.110(f) are not considered benefits in addition to the EHB; such laws ensure compliance with § 156.110(a) which requires coverage of all EHB categories. Therefore, there is no obligation to defray the cost of such State-required benefits.

Lauren Wilson, MSW
Guiding Families Hawai'i
808.264.3007 rdimai@gmail.com

March 17, 2015

Honorable Representative Belatti, Chair
Honorable Representative Creagan, Vice Chair

RE: SB 791 SD1: Mandatory Health Coverage for Autism Spectrum Disorders
SUPPORT WITH REVISIONS

Chair Belatti, Vice Chair Creagan and members of the Committee on Health:

I look forward to **fully supporting SB 791 SD1 with revisions**. Mandated insurance coverage for autism treatment in Hawai'i is crucial. Passing this legislation is the right thing to do for individuals with autism and their families- and the right thing to do for our community as a whole.

As a provider with over ten years of experience treating individuals with autism I have seen families lose precious time searching and on waiting lists for a professional with expertise to provide treatment for their child or worse skip treatment completely due to lack of personal funding.

I appreciate the intent of SB 791 to be inclusive of state licensed professionals, however *I am concerned that the language in section "m" is too vague* and may limit access to qualified licensed providers. **I respectfully submit that similar to legislation passed in other states, language is clarified to include specific licensed professionals and include Licensed Clinical Social Workers (LCSWs)**. There are over 800 LCSWs, across the state, and many other licensed professionals already credentialed with Hawai'i based insurance companies ready to provide services.

Having worked in the field of autism for more than a decade I have seen individuals mature and age and continue to face significant impairments due to autism. **To arbitrarily limit coverage at the age of 11 is to limit the potential of an individual**. Depending on severity of symptoms individuals on average are diagnosed anywhere from 3 to 7 years of age. As many children in Hawai'i are diagnosed later than national averages, and even more so on neighbor islands, ***I respectfully submit that the age limits be raised to at least 21.***

With revisions, I look forward to championing this bill and am hopeful that this will be the year we can celebrate its passage and signing. Keiki are waiting and losing precious time.

Sincerely,

Lauren Wilson, MSW
Autism Service Provider



Chair Della Au Belatti and House Members
Health Committee

SB791 SD1 RELATED TO AUTISM SPECTRUM
DISORDERS

Wednesday, 3/18/15
8:45 am, Room 329

Position: SUPPORT

Chair Belatti and members of the Health Committee,

The Hawaii Chapter of the American Physical Therapy Association (HAPTA) is a non-profit professional organization serving more than 300 member Physical Therapists and Physical Therapist Assistants. Physical Therapists within the school system, Early Intervention and many private pediatric practices work with children on the Autism Spectrum on a daily basis. The chapter supports SB 791 which would provide requisite coverage for autism diagnosis and treatment by health insurers, mutual benefit societies, and health maintenance organizations. Thirty other states have enacted similar legislation.

We would like to testify in support of this legislation. According to the U.S. Centers for Disease Control and Prevention (2010) the prevalence of Autism Spectrum Disorder (ASD) was approximately 1 in 68 children which represents a significant rise over the past twenty years. Similarly, the costs of caring for these individuals across their lifetime has also sharply increased. The research has shown that ASD is a neurodevelopmental disorder which cannot be cured. However, research has indicated that there are measurable benefits to the type of behavioral and social-language treatments that this Bill is proposing. Furthermore, data demonstrates the efficacy of the treatment in long-term reduction in impairments. Early diagnosis and the introduction of effective treatment will improve overall functional outcomes for these children. Furthermore, a decrease in the cost of care over the individual's lifetime, which are often the responsibility of state programs, will also decrease.

A neurodevelopmental disorder is defined by the American Academy of Developmental Medicine as a precise genetic or acquired biological brain disorder or condition that is responsible for childhood-onset brain dysfunction. Therapeutic Care as defined in Item (5) includes speech pathology, occupational therapy, physical therapy and social worker care. Insurances in Hawaii has covered these services when treatment is aimed at the "reduction of disability and restoration to the best possible level of functional" for other developmental disorders such as cerebral palsy. The coverage mandated in this Bill will provide the same level of coverage to the ASD population.

One concern is the limitation of the benefits to children under eleven years old. ASD is a lifelong disorder. The Patient Care and Afford Care Act includes an age limit for

dependent children to age 26. We believe a higher age limit should be considered to ensure these much needed services for this population.

HAPTA, therefore, submits this testimony in support of SB791 because no child with an Autism Spectrum Disorder in the State of Hawaii should go without proper treatment due to the cost of services. They should have the opportunity, like other children with neurodevelopmental disorders, to reach their highest potential with the possibility for independent living and to be a contributing member of our community.

Thank you for this opportunity to submit testimony on this very worthwhile Bill.

Cindy Tamayo PT

Cindy Tamayo, PT, MA
Legislative Committee
Hawaii Chapter of the American Physical Therapy Association

Gregg Pacillio

Gregg Pacillio,
President
Hawaii Chapter of the American Physical Therapy Association



S E A C
Special Education Advisory Council

919 Ala Moana Blvd., Room 101
Honolulu, HI 96814

Phone: 586-8126 Fax: 586-8129

email: spin@doh.hawaii.gov

March 18, 2015

**Special Education
Advisory Council**

Ms. Ivalee Sinclair, *Chair*
Ms. Martha Guinan, *Vice
Chair*

Ms. Brendelyn Ancheta
Dr. Tammy Bopp
Dr. Robert Campbell
Ms. Deborah Cheeseman
Ms. Annette Cooper
Ms. Shari Dela Cuadra-Larsen,
liaison to the Superintendent
Ms. Gabriele Finn
Ms. Jenny Gong
Ms. Natalie Haggerty
Ms. Barbara Ioli
Ms. Valerie Johnson
Ms. Deborah Kobayakawa
Ms. Bernadette Lane
Ms. Dale Matsuura
Ms. Stacey Oshio
Ms. Zaidarene Place
Ms. Barbara Pretty
Ms. Kau'i Rezentos
Ms. Rosie Rowe
Dr. Patricia Sheehey
Mr. Tom Smith
Ms. Lani Solomona
Dr. Todd Takahashi
Dr. Daniel Ulrich
Dr. Amy Wiech
Ms. Cari White
Ms. Jasmine Williams
Ms. Susan Wood

Amanda Kaahanui, Staff
Susan Rocco, Staff

Representative Della Au Belatti, Chair
House Committee on Health
State Capitol
Honolulu, HI 96813

RE: SB 719, SD 1 - Relating to Autism Spectrum Disorders

Dear Chair Belatti and Members of the Committee,

The Special Education Advisory Council (SEAC), Hawaii's State Advisory Panel under the Individuals with Disabilities Education Act (IDEA), **strongly supports** the intent of SB 719, SD 1 that mandates health insurance coverage for the diagnosis and treatment of autism spectrum disorders (ASD).

SEAC's has several concerns with the current language in this legislation:

- 1) The first is that services are only offered through age ten. It has been our experience that children over the age of ten and young adults can still receive great benefit from Applied Behavioral Analysis (ABA) and other evidence-based treatments.
- 2) Our second concern is that this bill places an annual dollar cap on services to no more than \$30,000 per year. Using the per hour services rates cited in the Wakely actuarial study conducted in response to previous legislation, this cap would result in utilization rates of less than 30 hours per week. This utilization rate is less than optimal for many children on the autism spectrum based on current research.

In 1999 Hawaii's Child and Adolescent Mental Health Division began developing a tool for practitioners and families to use in determining appropriate psychosocial interventions for children and youth with emotional and behavioral disorders, including Autism Spectrum Disorders. It collected evidence from randomized clinical trials to determine which interventions were most effective in treating children and adolescents. That tool, called the *Blue*

Mandated by the Individuals with Disabilities Education Act



Testimony on SB 791, SD 1
March 18, 2015
Page 2

Menu, has since been adopted by the American Pediatric Association and updated regularly. It notes that the best support for the treatment of Autism Spectrum Disorders is intensive behavior therapy (applied behavioral analysis), generally meaning 30-40 hours a week. This is especially true for young children with moderate to severe symptoms.

Based on these concerns, we respectfully request that your committees consider extending the benefits to include students through age twenty-one (the upper limit for IDEA eligibility) and removing the annual dollar cap for services. By offering children with Autism Spectrum Disorders access to early identification and amelioration of their complex communication, social and behavioral needs, as well as ongoing targeted supports, study after study has shown a significantly positive impact on academic and behavioral goals, as well as a reduction in their overall need for lifetime supports.

Thank you for this opportunity to provide comments. If you have any questions or concerns, please feel free to contact me.

Respectfully,

Ivalee Sinclair, Chair



COMMUNITY CHILDREN'S COUNCIL OF HAWAII
1177 Alakea Street • B-100 • Honolulu • HI • 96813
TEL: (808) 586-5363 • TOLL FREE: 1-800-437-8641 • FAX: (808) 586-5366

March 17, 2015

Representative Della Au Belatti
Chair House Committee on Health – Hawaii State Capitol

RE: SB791, SD1 - RELATING TO AUTISM SPECTRUM DISORDERS.

Dear Chair Belatti, Vice-Chair Creagan, and Members of the Committee,

The 17 Community Children's Councils (CCCs) of Hawaii **strongly supports the intent of SB791** which requires health insurers, mutual benefit societies, and health maintenance organizations to provide coverage for autism diagnosis and treatment.

Current statistics show that about 1 in 68 children have been identified with autism spectrum disorder (ASD) according to estimates from CDC's Autism and Developmental Disabilities Monitoring (ADDM) Network. ASD is reported to occur in all racial, ethnic, and socioeconomic groups and is almost 5 times more common among boys (1 in 42) than among girls (1 in 189). Harvard did a study in 2006 that shows it cost \$3.2 million dollars to take care of one autistic individual over their lifetime, estimating costs at least \$17,000 more per year to care for a child with ASD compared to a child without ASD. Costs include health care, education, ASD-related therapy, family-coordinated services, and caregiver time. For a child with more severe ASD, costs per year increase to over \$21,000, these costs put a tremendous burden on the families with children who have ASD. The actuarial report required by Act 185, Hawaii Sessions Law 2014, estimates the cost to policy holders of providing for treatment of autism spectrum disorder through applied behavior analysis would be \$24.00 per year in 2015, or \$2 per month. This cost can be significantly lowered with early identification and treatment which allows the child to reach their maximum potential in college or in their career path and hopefully independent or assisted living.

The CCCs respectfully suggests the following recommendations:

- 1) Increasing the age of intensive behavioral therapy treatment to individuals up to age 26. Young adults, including those with autism, may remain on their parents' insurance up to age 26. (42 U.S.C. § 300gg-14). However, we support the comments issued by Department of Human Services (DHS) on January 2015 that recognizes intensive behavioral therapy be provided to individuals younger than 21 years when determined to be medically necessary.
- 2) Removal of the Annual Dollar Caps. Plans may not place lifetime or annual limits for essential benefits you receive. (42 U.S.C. § 300gg-11)
- 3) Clarifying the term "autism service provider" to section (m) by adding the following:
 - a. A person licensed as a physician and surgeon, physical therapist, occupational therapist, psychologist, marriage and family therapist, educational psychologist, clinical social worker, professional clinical counselor, speech-language pathologist, or audiologist, who designs, supervises, or provides treatment for pervasive developmental disorder or autism, provided the services are within the experience and competence of the licensee. (California Health and Safety Code Section 1796.14-1796.17)
- 4) Clarifying the term "autism service provider" to the definition section (n) by adding the following:
 - a. A person, entity, or group that is certified by a national entity, such as the Behavior Analyst Certification Board, that is accredited by the National Commission for Certifying Agencies, and who designs, supervises, or provides treatment for pervasive developmental disorder or autism, provided the services are within the experience and competence of the person, entity, or group that is nationally certified. (California Health and Safety Code Section 1796.14-1796.17)

- 5) Adding in an “unlicensed level similar” to the following in California:
- a. "Qualified autism service paraprofessional" means an unlicensed and uncertified individual who meets all of the following criteria:
 - i. Is employed and supervised by a qualified autism service provider.
 - ii. Provides treatment and implements services pursuant to a treatment plan developed and approved by the qualified autism service provider.
 - iii. Meets the criteria set forth in the regulations adopted pursuant to Section 4686.3 of the Welfare and Institutions Code.
 - 1. The department shall adopt emergency regulations to address the use of paraprofessionals in group practice provider behavioral intervention services and establish a rate. The regulations shall also establish a rate and the educational or experiential qualifications and professional supervision requirements necessary for the paraprofessional to provide behavioral intervention services. The adoption, amendment, repeal, or re-adoption of a regulation authorized by this section is deemed to be necessary for the immediate preservation of the public peace, health and safety, or general welfare, for purposes of Sections 11346.1 and 11349.6 of the Government Code, and the department is hereby exempted from the requirement that it describe specific facts showing the need for immediate action. A certificate of compliance for these implementing regulations shall be filed within 24 months following the adoption of the first emergency regulations filed pursuant to this section.
 - iv. Has adequate education, training, and experience, as certified by a qualified autism service provider. (California Health and Safety Code Section 1796.14-1796.17)
- This further definition is necessary because otherwise it will limit who can provide services to children with Autism. Many of the direct service providers do not have reimbursable licenses and are not “autism service providers” under the definition. The Behavior Analyst Certification Board has created a certification for this level this year in 2015.
- 6) A timeframe for the establishment of a certification program, which includes the above recommendations, should be completed with recommendations from community stakeholders by the next session. This needs to be done in collaboration with multiple state agencies i.e. DHS, DOE, DOH etc. so each system can work together to meet the needs of the students of this population in the most effective way possible.

The CCCs are community-based bodies comprised of parents, professionals in both public and private agencies and other interested persons who are concerned with specialized services provided to Hawaii's students. Membership is diverse, voluntary and advisory in nature. The CCCs are in rural and urban communities organized around the Complexes in the Department of Education.

We respectfully request your consideration of SB791. Should you have any questions or need additional information, please contact the Community Children's Council Office (CCCO) at 586-5363. Thank you for considering our testimony,

Tom Smith, Co-Chair

Jessica Wong-Sumida, Co-Chair

(Original signatures are on file with the CCCO)



3/18/15
COMMITTEE ON HEALTH
Representative Della Au Belatti, Chair
Representative Richard P. Creagan, Vice Chair

Conference Room 329
Hawaii State Capitol
415 South Beretania Street

Honorable Representative Belatti, Vice-Chair Creagan, and Committee Members,

My name is Anne Lau and I am the Clinical Director of the Autism Behavior Consulting Group clinic. I am writing to show my **SUPPORT** for **SB 791 with amendments**.

I have been working in the field of Applied Behavior Analysis (ABA) here in Hawai'i for over 10 years. I have seen the difficulties that parents have had in trying to secure the services that their doctors were recommending. I have seen families cash in their life savings, sell their house, and go into nasty battles with school districts.

The scientific research is very clear (Eldevik, et.al. 2010, Rogers & Vismara, 2008, Cohen, Amerine-Dickens, & Smith, 2006, Sallows & Graupner, 2005, Howard, et. al. 2005, Eikeseth, et. al. 2002, Smith, Green, & Wynn, 2000, McEachin, Smith, & Lovaas, 1993, Lovaas, 1987) that children with autism can make substantial gains with ABA, and those that are receiving intensive treatment, defined as 30-40 hours of treatment per week for several years, can in fact lose the symptoms of autism that would have prevented them from benefiting from a general education placement, gaining employment, and living as an independent adult. Autism is treatable and families should be able to rely on their health insurance to cover standard treatments that are recommended by their doctors.

This particular bill has several problems:

- This bill would not require treatment after age 11. There is NO clinical rationale for limiting treatment services based on age. If anyone is saying otherwise, I would request for their references on this matter.
- The fiscal benefits, not to mention the benefits for the people surrounding a patient, are available for people of any age with severe problem behaviors. Applied Behavior Analysis services should be available when it is medically appropriate, as determined by a patient's doctor.

Thank you for your time and for hearing my point of view of why you should amend SB 791.

Respectfully,

Anne Lau, M.Ed., BCBA

Clinical Director



Autism Behavior Consulting Group, Inc. / ABC Group
PO Box 1162, Waiialua, Hawaii 96791-1162
Phone: 808-277-7736 Fax 808-748-0202
E-mail: info@autismbehaviorconsulting.com
www.AutismBehaviorConsulting.com

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vs: 10/2012

From: mailinglist@capitol.hawaii.gov
Sent: Monday, March 16, 2015 8:23 AM
To: HLTtestimony
Cc: jpriewer@hotmail.com
Subject: Submitted testimony for SB791 on Mar 18, 2015 08:45AM

SB791

Submitted on: 3/16/2015

Testimony for HLT on Mar 18, 2015 08:45AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Jeff Riewer	Individual	Support	No

Comments: Hello and thank you for voting on this vital bill... I would personally like to thank each and every one of you for supporting SB791 to include those individuals in the Autism Spectrum. My son is 26 years old and attends the University of Hawaii in the Engineering department and he has Asberger's Syndrome which is included in the Autism spectrum...Without this legislation he would not be able to do so. This is the help that he and others in the Autism spectrum so desperately need...until a cure is found.... Mahalo Nui Loa... Jeff Riewer

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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creagan1 - Dannah

From: mailinglist@capitol.hawaii.gov
Sent: Monday, March 16, 2015 10:07 PM
To: HLTtestimony
Cc: fpenland@gmail.com
Subject: Submitted testimony for SB791 on Mar 18, 2015 08:45AM

SB791

Submitted on: 3/16/2015

Testimony for HLT on Mar 18, 2015 08:45AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Benjamin Penland	Individual	Support	No

Comments: Please help all of our Ohana- of any age- reach the help that they so desperately need. Mahalo!

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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3/18/15

Committee on Health
Rep. Della Au Belatti, Chair
Rep. Richard P/ Creagan, Vice Chair
Conference Room 329
Hawaii State Capitol
415 South Beretania Street

To whom it may concern:

I am a Board Certified Behavior Analyst providing ABA to children with Autism Spectrum Disorder on the island of Oahu. I commend the senate for introducing this bill. I would like to speak to the age cap provision, however. I have worked with individuals from 15 months old to 65 years of age. I have seen the outstanding difference that Applied Behavior Analysis can make in the lives of individuals of any age. All individuals living in Hawai'i who need our help, deserve it. Please consider raising or eliminating the age cap to this bill so that we may reach all of our Ohana. Please remember, the more people we can reach, the less reliant on the state these people will be.

Sincerely,

Kathleen Bradler, M. Ed. BCBA

3-18-15

Good Morning Chair and Representatives,

If they could.....this room, the Capitol, and its premises would be overfilled to capacity. Luke and I are here to represent those people!

There was a time when I couldn't be here because of what I was dealing with at home and at school. If you would have asked me to be here with Luke back then, it probably would've been the straw that broke the Camel's back. The behavior these kids have would not make for an orderly hearing. Also, remember these behaviors are not the kind that are, "I want my own way".....these are signs of the disease of Autism.

Let me tell you about the Luke that we have grown with:

"Help!" "Please help me with Luke's behavior!" That was what you would've heard from me! Help was there, I just didn't have access to it.....because I was poor in the sense that, both my husband and I worked at good jobs and we didn't have access to coverage for a medical condition not covered by our insurance.

Behavior? Kids have behavior but not this kind of behavior:

As an example: Luke's car seat was behind the driver's seat and he reached up to grab my hair and pulled my head back while I was driving. Solution? Move your kid to the other side, right? Well with Autism, things have to be in order or you will get *more* behavior. Which meant that that was Luke's side and there was no changing *his* side of the car.

Behavior? School. I mean, I work there. That is, who will help me, right?

As an example, Luke refused to go to preschool so he wouldn't get dressed, so I took him in his pull up. Yes, we did pull ups till about age 6 (another behavior).

He also refused to go to his class, so a teacher from the school escorted him to class. How did his behavior get handled? I got a call from the health room that Luke had an abrasion on his arm from the teacher *taking him* to the classroom. Ok, so was the teacher meaning to hurt Luke? I doubt it, but could it have been changed? Yes! With help from this bill, it doesn't need to happen ever again!

I visited his classroom one day and he was being forced to use scissors. I later found out from the Mayo Clinic, where we went for diagnosis on our own dime, that he wasn't even developmentally ready to cut. Oh, and let's not forget when my husband picked him up one day from class and Luke was not allowed to leave without tying his shoes, which he was not ready for without being super frustrated. Another behavior "that could have been" helped.

Then there was the phone call, "Luke is in the office and we are going to suspend him", that was at age 4 (oh and yes, I got "that call" this year too from the VP). Why? Because I couldn't get the help he needed since I didn't have access to it. So what happened with the VP at age 4 you are wondering? Well, he got sent from his Kindergarten class to the office, and when he got there, the VP took away the thing that he was holding. See, if you have the knowledge, you would know that kids with Autism sometimes have a thing that they hold onto. When the VP took it away, he went into a cycle behavior, which is complimented with rage. Didn't need to happen'Could have been' helped.

We don't have time for all the 'could have's' I could relate to you from raising Luke, but I am not going anywhere because no matter where I go, Autism goes with us. Luke and others who do not have a voice are persevering the best they can. I am not asking for a cure! I am asking (begging) for help with something that has ramifications in EVERYONE's lives and can be helped, we just have to have access through our insurance to care. He is 15 this month and CAN be helped! Please raise the age cap. There are many living organisms we all take care of. If we can't take care of our keiki, there is something majorly wrong with us as human beings. Please change that! Help the kids!!

Respectfully submitted,

Gerilyn Pinnow M.Ed. (Luke's Mom)

COMMITTEE ON HEALTH
Representative Della Au Belatti, Chair
Representative Richard P. Creagan, Vice Chair

Merizza Tapia
University of Hawaii at Manoa
MBT School of Social Work

Date: Wednesday, March 18, 2015
Time: 8:45 A.M.
Place: Conference Room 329
State Capitol
415 South Beretania Street

RE: SUPPORT for SB791, SD1 – Relating to Autism Spectrum Disorders

Thank you for giving me the opportunity to testify to support SB791. My name is Merizza Tapia, and I am a graduate student from the University of Hawaii at Manoa, MBT School of Social Work. I am testifying in support of this bill to mandate insurance coverage for children with Autism Spectrum Disorder.

The Center for Disease Control and Prevention (CDC) estimated that one out of 88 children are diagnosed with Autism Spectrum Disorder (ASD). ASD is a treatable condition, in which early intervention treatment programs and Applied Behavioral Analysis (ABA) proved to be effective. However, these types of treatment are costly. According to the Harvard School of Public Health (2006), it costs about \$50,000 a year to use ABA on one individual with autism, \$3.2 million to treat an individual with autism over his or her lifetime, and about \$35 billion to care for all individuals with autism in a year. These data indicate the high costs for families and societies in treating children with ASD.

As a former Skills Trainer, I experienced the effectiveness of ABA, as well as its importance when working with children with ASD. With this insurance coverage in SB791, I believe that these children will be able to receive proper and effective treatment that will help them succeed in their future life.

Thank you for your time in hearing my support of SB 791.

Sincerely,

Merizza Tapia

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Alan Monnow

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Name : amanda

Last Name : boehm

Street Address : 59-080 kamehameha hwy 2

City/Town : haleiwa

Island : oahu

Email Address : aboehm1202@gmail.com

Company : Bayada

Position : BCBA

Tell us where you stand on the bill : I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : AmberRae

Last Name : Shotkoski

Affiliation (optional) : ABC Group

and Street Address : 808-226-6347 3115 La'i Road A

City/Town : Honolulu

Island : HI

Email : amberrae33@gmail.com

Message to legislators: I support the intent of SB 791. I know the importance of ABA therapy for children with ASD. I have worked with children with ASD for over 7 years and I have witnessed first hand the importance of early intervention and effective ABA therapy. Many children require 25-40 hours per week of intensive therapy. I have seen children become independent, join their peers in school and tell their parents they "love them", all thanks to educated BCBA providers and ABA therapy. You have an amazing opportunity to protect our keiki and the future generations of this island.
Mahaio

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Amy Iriarte

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Anna

Last Name : Fielding

Affiliation (optional) :

and Street Address : Kahului

City/Town : Kahului

Island : Maui

Email : annamarie.fielding@gmail.com

Message to legislators : I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Anna
Last Name : Straka
Affiliation (optional) :
and Street Address : Kihei
City/Town : Kihei
Island : Maui
Email : annastraka@gmail.com

I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Atrian Dorres

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Benjamin
Last Name : Pulsifer
Affiliation (optional) : Bayada
and Street Address : 92-701 Makakilo Dr.#59
City/Town : Kapolei
Island : O'ahu
Email : bphawaii10@hotmail.com

Message to legislators : This bill would be great for many reasons. There have been many instances over the past few years where services have been reduced for financial reasons. We at Bayada are professionals who have been doing this work for years. The students that we service depend on our professionalism and continuing education to service them properly. This bill would help ensure that we would be able to continue servicing them, providing them with the consistency and expertise that they need and deserve. It would also alleviate the DOE from having to find ways to provide for these services. This could lead to them being able to provide us with more resources to do our jobs even better. Also, Autism and other physical or mental disabilities relate to the overall health and well-being of the students that we service. I believe that this is a health issue and should be covered under health insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Bernadine

Last Name : Ranger

Affiliation (optional) : Horizons Academy

and Street Address : Paia

City/Town : Paia

Island : Maui

Email : branger64@gmail.com

I am a support worker at Horizon's academy on Maui. I support autism insurance and am ready and willing to help.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Bianca

Last Name : Antonio

Affiliation (optional) :

and Street Address : Khei

City/Town : Kihei

Island : Maui

Email : jullian818@gmail.com

Message to legislators : I work as a paraprofessional on Maui and I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Blake

Last Name : Lanoza

Affiliation (optional) : Paraprofessional

and Street Address : 45-350 Nakuluai St.

City/Town : Kaneohe

Island : Oahu

Email : lanoza.blake@gmail.com

Message to legislators : I am on support of children and young adults with Autism being funded by insurance. These children and their parents need all the help they can get to help these amazing young adults on the right track before they don't qualify for DOE supports. Please kokua and help us continue as behavioral health professionals to make these young smile everyday and not just live, thrive.

Is there anything else you would like to share? : I am a paraprofessional with three years of experience working with children with Autism and other special needs. I've realized more and more the special role the state has helping take care of these children and providing with quality education. Please continue to help us improve the behaviors and quality of life of these great kids. Mahalo.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair
Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Blake McMillen

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I support meaningful autism insurance reform, and SB791 WITH REVISIONS.

Children have such a difficult time with their preteen and teen years. Why would you discontinue services right when a child may need it even more? Please change this bill to provide services for children at least until they're 21, although no age cap would be best.

Thank you for your time,

Bonnie Koba

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Dear Legislators,

I am a licensed psychologist specializing in working with children with autism spectrum disorders and I am writing to show my support for SB791.

I lived and practiced in Hawaii for 5 years before relocating to Seattle, WA. In the state of Washington numerous insurance companies, including Medicaid and Microsoft Premera, provide coverage for ABA services. I have seen firsthand the positive impact this has on children's developmental trajectories and on parenting stress. Too many parents spend excessive amounts of time worrying about how they will pay for a treatment that research has consistently shown to be the gold standard for autism spectrum disorders. The Kaiser Permanente ACES study is one of many that have shown the deleterious effects of chronic stress on overall health and well-being and the positive correlation between chronic stress and increased utilization of healthcare services. Research has also shown that children who receive ABA services and resultant exhibit significant developmental progress are less likely to require higher levels of care in the long-term. In addition, when those gains allow them to participate in a general education setting, it lessens the burden on the Department of Education's already limited special education resources and funding. Hence, ABA coverage is not only the most ethical thing to do – it is also highly economical in the long-term.

I am looking forward to seeing Hawaii provide insurance coverage for families impacted by autism. I have seen the outcome when these services are provided. It is almost unbelievable that the discussion of whether or not ABA should be covered is still one we are having when everything we know, empirically and anecdotally, sends a message that is difficult to ignore and in bright neon lights simply states, "YES".

Thank you for your time.

Sincerely,

Brandi Chew, PhD
Licensed Psychologist (Hawaii, California, & Washington)
7104 Woodlawn Ave NE
Seattle, WA 98115
Branch80@gmail.com

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Dear Legislators,

Thank you for addressing this extremely important issue. Hawaii has fought this battle for too long and it is time to do the right thing.

I support the intent of SB791, with revisions.

- Increase the age to at least 21
 - As a former service provider, I have worked with numerous young adults that continue to need services.
- Remove the dollar caps
- Include language on services provided by behavior technicians

Mahalo,

Brian J. Burdt
Paia, Maui

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Bridget
Last Name : DeGuzman
Affiliation (optional) :
and Street Address : Wailuku
City/Town : Wailuku
Island : Maui
Email : bdeguzman@gmail.com

I am a PAB service worker working with individuals with special needs. I support the autism insurance bill and am ready to help on Maui. Malama our Keiki!

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Message to Legislators:

My name is Carla Schmidt, I am an assistant professor at the University of Hawaii-Manoa in the Departments of Special Education and the Center on Disability Studies. I am also a board certified behavior analyst (BCBA-D) and Past-President of the Hawaii Association of Applied Behavior Analysis (HABA). I am also an aunt to three children on the autism spectrum. My work and research focuses on the use of Applied Behavior Analysis (ABA) with individuals with Autism Spectrum Disorders. I am writing to you because I want to talk about autism insurance for the State of Hawaii and how it will benefit children and families with autism.

The field of ABA has over 40 years of research to support its use and is now considered the gold standard of treatment for the autism population so much so it is the only suggested form of treatment by the United States Surgeon General. ABA not only has years of research to support its use it is also a field that requires rigorous qualification regulated by the Behavior Analysis Certification Board (BACB). In order to practice as a BCBA, certificants must possess a Master's degree, complete 270 hours of graduate level course content in behavior analysis and complete 1500 supervised experience hours under the tutelage of a seasoned BCBA.

I have worked with families of children with Autism for the past ten years and have seen first hand the benefits of providing treatment based on ABA. One family in particular sticks out in my mind. When I was working in a behavior support clinic during my doctoral program a family came to the clinic as a last resort before removing their child from their home for safety reasons. Their child was completely non-verbal and exhibited extremely aggressive behavior. Using principles of applied behavior analysis, we were able to reduce the aggressive behavior and provide the client with functional communication. These changes enabled this family a quality of life they had never experienced and allowed them to keep the child in their home.

For families of children with Autism, ABA treatment is essential and as indicated above and has the potential to change lives. The recommended dosage of ABA treatment is between 20-40 hours per week, depending on the severity of the Autism diagnosis. If paid out of pocket this treatment is extremely expensive (and financially impossible) for families.

However, what is even more expensive is NOT paying for ABA treatment. We know that early intervention for a young child with autism can mitigate the need for intervention later in life. In contrast a child with autism who did not receive ABA services to accommodate his or her disability may cost taxpayers millions. In fact, cost benefit studies have shown the estimated savings per child to age 22 are about \$200,000 and to 55, \$1,000,000.

No child with Autism in the State of Hawaii should go without proper treatment due to the cost of services. Each child with Autism should have the opportunity to excel to his or her full potential, in order to ensure this; access to ABA treatment is imperative. Autism insurance coverage can help facilitate this. I thank you for your time and for hearing my point of view on why we should have Autism insurance coverage in the State of Hawaii.

Respectfully,

Carla Schmidt, Ph.D., BCBA-D

University of Hawaii-Manoa

carlats@hawaii.edu

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Celestina

Last Name : Molina

Affiliation (optional) :

and Street Address : Lahaina

City/Town : Lahaina

Island : Maui

Email : celeymolina00@gmail.com

Message to legislators : I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Chaelynn

Last Name : Tan

Affiliation (optional) :

and Street Address : 91-1046 Papaa st

City/Town : Kapolei

Island : Oahu

Email : chaelynn_tan@yahoo.com

Message to legislators : I support the intent of SB 791, with revisions because ABA early intervention is important in helping our youth diagnosed with autism to integrate into society. ABA therapy gives kids with autism the opportunity to self provide in the future.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

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Hawaii State Capitol

415 South Beretania Street

To Whom It May Concern:

This letter is written in strong support of the Autism Bill. As a licensed psychologist in Hawaii, I have had many years of experience with Autism Spectrum Disorders and have seen, first-hand, the positive impact that Applied Behavior Analysis (ABA) treatment can have on the hallmark symptoms of Autism across a client's lifetime.

My first experience with Autism Spectrum Disorders occurred after my completion of my Bachelor's degree in Psychology. I was employed as an Applied Behavioral Analysis (ABA) therapist in the homes and schools of Hawaii's keiki. As a new practitioner of the ABA method, I appreciated the rigorous and complex training that I was provided with as well as the supervision I received by my Board Certified Behavior Analyst (BCBA) supervisor. With a background in engineering, I also related to the linear, objective progression of this approach and the ability to see, first-hand the child's therapeutic gains/symptom reduction via the data collection methods associated with ABA. I remained interested in Autism Spectrum Disorders as I continued my graduate school studies. What was most gratifying was the manner in which key issues (i.e., symptoms of autism) were addressed via real-life activities that engage the child; with appropriate levels of prompting and fading - yet another empirically supported method utilized in this model - generalization of skills learned in therapy into real world situations was accomplished.

As with any ingrained behavior, problematic behaviors are best ameliorated when addressed early. This speaks to the importance of identifying Autism Spectrum Disorders early, ideally during the first months of life, and beginning intensive behavioral treatment to address the symptoms. As a pre-doctoral assessor at an Autism Spectrum Disorders clinic in the mainland, I saw the benefits of early intervention, partnered with consistent Applied Behavior Analysis over several years – RECOVERY! With consistent ABA therapy, the cost-saving benefits of this approach via recovery and/or assimilation into regular education classes and the world around the client cannot be stressed enough. Nonetheless, even

when ABA treatment begins later in a child, adolescent, or adult client's life, the positive impact on all aspects of functioning cannot be ignored. This includes improvements in social skills, executive and adaptive functioning, interpersonal skills, independent living abilities, and vocational/academic skills, to name a few. This allows a client to function more independently in the world in which they live, allowing for less reliance on state assistance, family members, and the community at large, resulting in significant financial benefits.

I appreciate your time and sincere consideration of the Autism Bill.

Sincerely,

Chanel E. Kealoha, PsyD

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Chantel
Last Name : Pacheco-teeter
Affiliation (optional) :
and Street Address : Kihei
City/Town : Kihei
Island : Maui
Email : leiteeter@hotmail.com

Message to legislators : I support autism insurance.

3/18/15
COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair
Representative Richard P. Creagan, Vice Chair

Conference Room 329
Hawaii State Capitol
415 South Beretania Street

Dear Legislators,

My name is Charlye Ramsey. I am a Board Certified Behavior Analyst (BCBA) and my life has been directly impacted by autism. I have a personal connection with autism in my family and I have witnessed the struggle of services not covered by insurance. I am writing in support of autism insurance reform and to share my recent experiences of receiving my Board Certification as a Behavior Analyst.

I have over 12 years experience working directly with children of all ages with autism and other disabilities. I completed my behavior analytic coursework while pursuing my Master's Degree in School Psychology. After years working as a Nationally Certified School Psychologist on both Molokai and Oahu, I witnessed the need for experienced professionals to provide applied behavior analysis (ABA) services to children across the islands. In 2012, I decided to pursue my certification as a BCBA.

The BCBA certification process is rigorous and follows high standards set by the Behavior Analyst Certification Board (BACB). These eligibility standards include degree, coursework, experience, supervisor and exam requirements. To be eligible to apply to sit for the BCBA exam, applicants must hold a Master's Degree and complete approved university training. According to the BACB guidelines, "The applicant must complete 225 classroom hours of graduate level instruction in the following content areas and for the number of hours specified:

- 1 Ethical considerations - 15 hours
- 2 Definition & characteristics and Principles, processes & concepts - 45 hours
- 3 Behavioral assessment and Selecting intervention outcomes & strategies – 35 hours
- 4 Experimental evaluation of interventions - 20 hours
- 5 Measurement of behavior and Displaying & interpreting behavioral data – 20 hours

6 Behavior change procedures and Systems support - 45 hours

7 Discretionary behavior-analytic content - 45 hours.”

Applicants must also receive 1500 hours of supervised independent fieldwork in behavior analysis. Applications must receive direct supervision from a BCBA in good standing with the BACB. Once these requirements are met, the applicant is eligible to apply and sit for the exam. As you can see, not just anyone can provide ABA services. BCBAs are highly trained professionals who provide quality ABA services including assessments, programming and data-based decision making.

Please vote in support of autism insurance reform to allow access to research proven, effective ABA services for all of Hawaii's Keiki and Ohana. All our children and families deserve the right to receive ABA services.

Thank you for reading. It is my hope you have a greater understanding of the BCBA certification process.

Mahalo,

Charlye Ramsey, Ed.S., NCSP, BCBA
Secretary, Hawaii Association of Behavior Analysis

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Charmaine Molina
Lahaina (Maui), Hawaii
charm_232001@yahoo.com

I support autism insurance reform.

Charmaine Molina

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Chelbie'Rene

Last Name : Castro

Affiliation (optional) : Bayada Habilitation

and Street Address : 86-020 Pokaibay Bay St

City/Town : Waianae

Island : Oahu

Email : Chelbierenecastro@yahoo.com

Message to legislators : Please pass a bill. Families of autistic children and adults deserve all the help they can get!

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Cherlyn
Last Name : Tamura
Affiliation (optional) : Bayada
and Street Address : 91-1029 Kama'aha Ave. #1203
City/Town : Kapolei
Island : Oahu
Email : ctamura@bayada.com

Message to legislators : My name is Cherlyn Tamura. I am a Board Certified Behavior Analyst in the state of Hawaii. I support the autism insurance bill and I am ready to service those in need if this bill is passed.

I have been in this field since 2003 and have worked with over 100 of our youth and adults. Through ABA, many of the clients I have worked with have shown progress. I have many success stories to share which include taking a child who could not even nod yes or no to communicating full sentences with attributes indicating wants/needs and even commenting on what he sees through the use of an augmented device. I have seen a child who did not understand social principals who was extremely aggressive go from 2:1 (former football players) staffing down to working with just about anyone. When I released him from my service he was working with a 65 year old grandmother figure. Another child I worked with used to put his head through the drywall at school. His mother would have never imagined watching him walk the line at his graduation. He did! He even sang with his peers, looked up at his mother, smiled and waved. As I sat four rows above his mother at the Aloha Stadium I watched as she completely started tearing up.

ABA if effective and works well! Please hear our voices! Pass this bill!

Thank you!

3/18/1
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COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Christina Domingo

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Christina Gobert

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Christina Leos

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Christine
Last Name : Asuncion
Affiliation (optional) :
and Street Address : Miliani
City/Town : Miliani
Island : Maui
Email : casuncion00@gmail.com

Message to legislators : I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Thank you for the opportunity to submit testimony supporting SB791 which would mandate health insurers to fund services for individuals on the autism spectrum. I am a Clinical Psychologist and a Board Certified Behavior Analyst (BCBA) with more than 20 years of experience working with individuals with autism and other developmental disabilities. I am currently the President and Clinical Director of Behavior Analysis No Ka Oi, Inc., a clinic that primarily serves children on the autism spectrum.

I was born and raised in Honolulu, Hawaii and moved to California in order to complete my undergraduate degree in Psychology. As a college freshman looking for a part time job, I responded to a parent's ad to work with a "6 year old nonverbal boy with autism." When I first met this boy, he engaged in aggressive behaviors, needed help with most of his self-help skills such as brushing his teeth and toileting, and could not communicate verbally. The parents paid privately for a consultant who taught me behavioral principles. Approximately a year later, this boy dressed, toileted, and brushed his teeth independently, learned to do his homework on the computer, and used pictures to communicate. Because of this experience, I became very passionate about learning how to effectively teach individuals with autism. I quickly realized that this 6 year old child taught me more about understanding behavior than any professor had in my psychology classes.

After graduating with my bachelor's degree, I called the President of the Hawaii Autism Society inquiring about jobs in the field of autism. He informed me that there were very few people in Hawaii with expertise in the area of autism and that if I really wanted to learn more about effective treatments in autism that it was best that I stay on the mainland. I took his advice, researched and discovered that Applied Behavior Analysis (ABA) was the only evidenced-based intervention in the field of autism. I decided to pursue my doctorate in Psychology with an emphasis in Behavior Analysis at West Virginia University.

While attending graduate school, I was given the opportunity to observe first-hand how applied behavior analysis had impacted the lives of children and adults on the autism spectrum.

Nonverbal children were able to develop language and sustain friendships with peers. Adults living in institutions were given opportunities to reside independently and work competitive jobs.

After approximately 10 years of schooling and training on the mainland, I moved back home to Hawaii to fulfill my dream of opening up a clinic to teach local families the power of applied behavior analysis and the impact it would have on children diagnosed with an autism spectrum disorder. I was discouraged that the Hawaii insurance carriers did not provide coverage of treatments for individuals with an autism spectrum disorder. One prominent insurance carrier informed me that they only provide treatment for the families to “cope” with the diagnosis.

Currently, my clinic primarily works with military families, since Tricare is the only Hawaii insurance carrier that provides treatment for ABA services. We also work with several local families who pay privately to ensure their child receive ABA services. I know of several families who have had to mortgage their homes or relocate to the mainland just to receive ABA, highlighting the social injustice in the denial of services for those on the autism spectrum.

As a behavior analyst, I was trained as a scientist to objectively collect and use data to guide treatment decisions. I urge you to do the same. Specifically, I ask that you look at the Actuarial Cost Estimate by Autism Speaks and the data on how much the state is currently spending on services supporting individuals on the autism spectrum.

Hawaii has already been fiscally impacted by Autism. Back in the 1990s, the state was hit with a \$1.4 billion dollar lawsuit. We cannot simply look at the short term costs and respond to lawsuits. The time is now to start building system wide infrastructure to ensure that people on the autism spectrum are supported both clinically and economically. The data from the 34 other states who passed similar bills should guide your decision making.

In conclusion, I urge you to support SB791 until age 21. This bill provides access to quality health care for those on the autism spectrum without forcing families to decide to relocate to the mainland, mortgage their homes or forego crucial services.

Thank you for the opportunity to submit testimony on this very important bill.

Christine Kim Walton, Ph.D., BCBA-D
President/Clinical Director, Behavior Analysis No Ka Oi, Inc.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

CJ Paet

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Clair Shiffer

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Coren

Last Name : Kajioka

Affiliation (optional) :

and Street Address : 638 9th Avenue

City/Town : Honolulu

Island : Oahu

Email : corenkajioka.psyd@gmail.com

Message to legislators : I fully support the Autism Insurance Bill as it will provide much needed services to a wider scope of children and families affected by Autism Spectrum Disorder. In addition, I believe that bringing Autism to the forefront of people's awareness is vital in obtaining a proper diagnosis, adequate psychoeducation, and resources for early intervention. Please support this bill for the betterment of all those affected by Autism.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Dan Barczov

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Darilyn

Last Name : page

Affiliation (optional) :

and Street Address : Kihei

City/Town : Kihei

Island : maui

Email : darilynpage@gmail.com

I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Darren

Last Name : Chu

Affiliation (optional) :

and Street Address : 45-357 Nakuluai St.

City/Town : Kaneohe

Island : Oahu

Email : d.chu27@gmail.com

Message to legislators : I support Autism Insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : David

Last Name : Hooper

Affiliation (optional) :

and Street Address : 1303 Dominis st. Apt 2

City/Town : Honolulu

Island : Oahu

Email : imunown@hotmail.com

Message to legislators : I support expanding the ability of individuals with autism receiving care through their insurers and not just through the Department of Education. It's important that we open up as many avenues to resources as possible.

3/18/1

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COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Hawaii State Capitol
415 South Beretania St.
Honolulu, HI 96813

Dear Legislators:

My name is Kriste Draper and along with my husband we strongly support the passage of SB791 which will provide health insurance coverage for services vital to the treatment of children on the autism spectrum.

My son Finn was diagnosed with autism in February, 2014 a week before his second birthday. Devastated and overwhelmed we delved into all the research we could find on how to treat autism. Time and again in our research showed that Applied Behavior Analysis (ABA) was a therapeutic treatment scientifically proven to improve the quality of children with autism.

Specifically, 40 hours a week of ABA therapy could be the difference between our son living and independent productive and fulfilling life or living at home with us needing care throughout his lifetime.

We started researching ABA therapy providers on Oahu and by April of 2014 Finn started his ABA program. The transformation we saw in our son almost immediately was nothing short of miraculous. Until starting ABA therapy our son had never spoken a word. He did not know his name or his mom and dad. Finn would not look you in the eye or let anyone other than myself or his dad touch him. Finn screamed in terror every time someone sang Happy Birthday and would run around the living room in circles flapping his arms every time a family member or friend came to visit. Within a week of started his ABA program Finn was looking me in the eye. Within a month he spoke his first word "go" and month after month new words just kept coming. Nine months later my son now lets other adults touch him, hug him and even play with him. He wears shoes and no longer cries when he gets around other children. Finn talks using one, two and three word phrases and has even started preschool with his peers.

Seeing the difference ABA therapy has made in our sons' life we were shocked to learn that not all families in Hawaii have access to the same therapy. We are very lucky that Justin's health insurance through the military covers 40 hours of ABA therapy for Finn each week but to learn that the state of Hawaii does not require all health insurance companies to cover ABA therapy treatment for autistic children is appalling. I ask you this: would a health insurance company get away with denying chemo therapy treatment for a child with cancer? The answer is no. No one would stand for allowing a child to remain ill and suffer when a treatment that could make the better was available. And yet every year this is how the state of Hawaii treats its autistic children.

Each of you has the opportunity to pass this bill and allow autistic children all through Hawaii receive the treatment they need and deserve. My son is amazing and one of a kind but no more deserving of treatment than any other child with autism in Hawaii. Every autistic child deserves a chance to step into the world around them and have a meaningful life. Your yes vote can give them this.

Sincerely,

Kriste Draper
Honolulu, HI 96818

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : David
Last Name : Namiki
Affiliation (optional) : Bayada Home Health Care
and Street Address : 4510 Salt Lake Boulevard, D-8
City/Town : Honolulu
Island : Oahu
Email : namikid@hotmail.com
Message to legislators :

Dear Legislators,

I am writing in support of autism insurance. Meaningful insurance coverage will allow people diagnosed on the autism spectrum to receive cost-effective insurance coverage for services that will enhance the quality of their--and of those around them--lives.

I have been working as a behavioral therapist (aka "skills trainer") for five years and have witnessed the efficacy of the Applied Behavior Analysis (ABA) method. ABA works due to several reasons: (1) It is founded on well-researched, scientifically proven principles; (2) The workers in this field are a highly professional, dedicated, and enthusiastic group; and (3) The unique characteristics of the autistic population allows them to respond very well to ABA therapies.

In my relatively short time in this field, I have observed significant behavioral improvement in the vast majority of cases. I have seen non-verbal children able to consistently communicate their thoughts and needs within a few years. I myself have been able to teach a number of unskilled clients basic work skills, such as sweeping floors and wiping tables, in a matter of months. No matter what the starting baseline for an autistic child, each improvement in daily living, communication, and occupational skills (and the improvement rate is high!) provides that much more relief for their parents, schools, and community.

The great personal satisfaction from being a part of this beneficent process has inspired me to pursue a master's degree in psychology, and following that, a BCBA certification. I know that will entail a large amount of diligence (because I have already earned a master's degree, in International Management), but I also know that the rewards are substantial and that there is a real need for more qualified behavior analysts in this field.

The fate of many thousands of children with autism lies in your hands. Passage of autism insurance reform will be a critical step in a process that will dramatically improve the lives of such children and their families, and will reduce millions of dollars in health and support costs in the long run. Thank you for your support!

Sincerely,

David Namiki
Behavior Therapist / Skills Trainer
PO Box 10385
Honolulu, HI 96818

(808) 389-6524
namikid@hotmail.com

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Denise Matsude

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Name : Desiree
Last Name : Villec
Street Address : 4501 Salt Lake Blvd Suite D8
City/Town : Honolulu
Island : Oahu
Email Address : desiree.villec@gmail.com
Company : Bayada
Position : Behavior Analyst

Tell us where you stand on the bill : I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Donna

Last Name : MacIver

Affiliation (optional) :

and Street Address : PO Box 349

City/Town : Haiku

Island : Maui

Email : dmaciver17@gmail.com

Message to legislators : I support autism insurance reform with no age or dollar caps on services. The needs for people with autism has grow rapidly and legislation needs to change along with their needs to help them in their life skills.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Name : Dove

Last Name : Vagatai

Street Address : 4510 Salt Lake Blvd Ste D8

City/Town : Honolulu

Island : Oahu

Email Address : dvagatai@bayada.com

Company : Bayada

Position : Client service manager

Tell us where you stand on the bill : I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Emaley
Last Name : McCulloch
Affiliation (optional) : Relias Learning
and Street Address : 2800 Woodlawn #175
City/Town : Honolulu
Island : Oahu
Email : emaleymcculloch@gmail.com

Message to legislators : My name is Emaley McCulloch and I am a professional Behavior Analyst who works with children and families affected by autism and I also have a child on the spectrum. I have made Hawaii my home for the last 12 years. I am writing to you because I want to show my support for Luke's Law, and discuss how it will benefit our ohana and community.

Thirty-eight other states have adopted similar legislation already that require insurance to cover necessary treatments for autism. Is Hawaii going to be the last to adopt this? Are we going to continue to put the burden of necessary treatments on our ohana and the state programs such as the DOE and the DOH?

The treatment covered by insurance (ABA) is not solely an educational treatment. It is considered to be a medically necessary, empirically validated treatment approach for children diagnosed with autism (and other related disorders). This has been verified by all the other states that are now requiring it be covered by insurance.

Public schools on island are not equipped to fully meet the needs of children with autism. Behavioral needs go beyond academics and should be addressed in the home with parents and family.

Applied Behavior Analysis is a science of evidenced-based interventions that have been substantiated by over 1,000 research studies. ABA been backed by the US Surgeon

General, American Academy of Pediatrics, American Psychological Association, Autism Society of America and National Institute of Mental Health
<http://appliedbehaviorcenter.com/ABAEndorsements.htm>.

I would like to extend my sincerest gratitude to you for introducing and supporting Luke's Law.

Thank you for your consideration and your time. Let's make 2015 be the year Hawaii joined the other states in supporting our ohana that have children with autism.

Sincerely,

Emaley McCulloch M.Ed. BCBA

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Emily
Last Name : Skidmore
Affiliation (optional) : Horizons Academy
and Street Address : Lahaina
City/Town : Lahaina
Island : Maui
Email : emily61488@gmail.com

I am a support worker for special needs individuals in Maui and I support the autism bill and am ready to help.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Erick Galvan

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Hawaii State Capitol
415 South Beretania Street
Honolulu, HI 96813

Dear Legislators:

We strongly support the discussion of autism insurance, which will provide insurance coverage for services for children on the autism spectrum which are not currently covered.

Background

The Child

We have a son with Asperger's syndrome. He is now 7 and a Grade 2 student at Queen Kaahumanu School in special education classes. His Asperger conditions made him very hard to parent, especially his opposition.

Our son has been treated by many medical professionals, taken different medications and participated in many school Individualized Education Programs.

We started our son at Applied Behavioral Analysis, an autism clinic, in the summer of 2014. Our son's treatment includes behavioral training and management uses positive reinforcement, self-help, and social skills training to improve behavior and communication. We are seeing steady progress almost weekly and we are genuinely encouraged. We believe that Applied Behavior Analysis can result in improved behavior which should transfer into adulthood.

The Parents

Like many parents we find raising a child with autism one of the hardest things we have ever done. It is an overwhelming challenge physically and emotionally. Needless to say, we are completely exhausted both mentally and physically.

We are paying more than \$2,000 per month for the service. This is a significant sum for us and none of it is covered by our HMSA insurance.

Children on the autism spectrum can become a huge drain on families, society, and themselves when they become adults. However, if they are provided with appropriate services as children, they could lead very productive lives contributing to the society as adults. A mind is a terrible thing to waste.

Issue - Our Request

We urge you to pass a bill so that children on the autism spectrum can get what they need the most – a chance in life.

Rationale of Our Request - The Disability and its Impacts

More parents are raising children with a diagnosis of autism and families often find themselves dealing with financial and social challenges all by themselves. Daily care routine, economic problems, receiving appropriate help and education are the basic hardships of the parents of a disabled child. The additional stress can be significant, taking its toll on the whole family and even contributing to a high divorce rate. The backbone of the American society and its value is at stake.

Further, children with autism could be productive citizens if given the proper treatment and care. A mind is a terrible to waste.

Thank you.

Felix and Lela Kwan
Honolulu, HI 96814

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Fred

Last Name : Yuen

Affiliation (optional) :

and Street Address : 1330 Wilder Ave #319

City/Town : Honolulu

Island : HI

Email : yuenfred@gmail.com

Message to legislators : I have worked and helped children and young adults diagnosed with Autism for the past 15 years. I have witnessed many children and young adults significantly improve their behavioral, social, and communication skills through ABA therapies and ABA supervision. These individuals have increased independence and are either on their way or are current contributors to society in a positive way. I have also worked and helped many individuals with significant aberrant behavior (Self-injurious behavior, aggression toward others, property destruction, etc...) diagnosed with Autism and their level of independence have increased significantly. Please give our children and young adults access to ABA services. ABA services are proven to help increase independence, decrease significant aberrant behavior, and teach individuals diagnosed with Autism societal skills needed to engage, participate, and contribute to our society, our HAWAII!

Is there anything else you would like to share? : ABA works with everyone. It's more than just programs at home or programs at school. It's learning about life and connecting individuals with social contingencies in which they are not sensitive to or may be unresponsive to. We need ABA, they need help!

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Gavin M Azvedo

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Gephy
Last Name : Del Real
Affiliation (optional) : Horizon's Academy
and Street Address : Kihei
City/Town : Kihei
Island : Maui
Email : gephysdr@gmail.com

Message to legislators: I am a service worker for those with special needs on Maui. I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Heather Dewoody

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Jade
Last Name : Torres-Vrobel
Affiliation (optional) :
and Street Address : 1303 McMurtry Ct
City/Town : Honolulu
Island : Oahu
Email : doctora_taina@hotmail.com
Message to legislators :

Aloha legislators,

My name is Jade and I have been working with children with autism for 3 years here in Oahu. I just want you to know that ABA works.

Before I was hired as a behavior technician, I did not understand applied behavior analysis (ABA). I have a master's degree in counseling psychology and I thought cognitive behavioral psychology was the best treatment for autism. I was wrong. The best treatment for autism is ABA. I have been well trained in ABA and I am currently completing post graduate courses to become a Board Certified Behavior Analyst. This shows how serious I am about ABA and how much I believe in it.

I have worked with 15-20 children with autism, all with different skills and needs. My supervisors have wrote ABA programs to help each of these children individually. They have trained me to implement the programs effectively. I have seen the positive results first hand. There is plenty of data to show the results. It is one of the beautiful things about ABA. It is a science. Behavior is observable and measurable, it is not us saying ABA works, it is the graphs and the numbers showing it works.

I have seen the amazing results of ABA in the following areas: potty training, tooth brushing, eating fruits and vegetables, making requests, playing with peers, ordering food and drinks, paying using a credit card, participating in outings, reducing and eliminating problem behaviors, among plenty more.

Children with autism deserve to receive the services they need. It has been shown that ABA is what they need. Now, it's time to provide those services; the earlier, the better. Just like a cancer patient needs chemotherapy, a child with autism needs ABA services.

Thank you for your time and support.

-Jade (mom, behavior therapist, and student)

Is there anything else you would like to share? : Yes, plenty. Please feel free to contact me for additional information.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Jamie
Last Name : Oehler
Affiliation (optional) : Bayada Habilitation
and Street Address : 1143A 7th Ave
City/Town : Honolulu
Island : Oahu
Email : jamie.oehler2014@gmail.com

Message to legislators : Autism affects many families in our state, but many cannot afford the cost of getting services for their child. Research has shown that ABA services at a young age reduce the cost of care as an adult by making the child more independent in adulthood. I send this message to you asking you to please consider passing autism insurance reform to assist the many families in the state for their children to be able to receive the services they need.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Jamie
Last Name : Walker
Affiliation (optional) :
and Street Address : Makawao
City/Town : Makawao
Island : Maui
Email : jamiewalker@gmail.com

I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Jason

Last Name : Arnold

Affiliation (optional) : Bayada Home Health Care

and Street Address : 600 Piikoi

City/Town : Honolulu

Island : Oahu

Email : jasnarnld@gmail.com

Message to legislators : I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Jean Paul Geden

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Dear Representatives Belatti, Creagan, and Members of your Committee,

My name is Jessica Carvalho and I am writing you today to urge you to consider the positive impact SB791 will have on our state. I am a Board Certified Behavior Analyst (BCBA) here in Hawaii and I also have a brother with Autism. I am lucky enough to have the pleasure of working with children with Autism on a daily basis and through my work I am able to see first hand the remarkable effects Applied Behavior Analysis (ABA) has on people on the Autism spectrum. I am writing to you because I want to talk about autism insurance reform and how it will benefit children and families with autism.

When I was 18 years old Autism became a part of my life when my mother and father decided to become specialized foster parents. They opened up our home to a beautiful blue-eyed boy. This little boy was 4 years old when he came to live with us. He had the biggest smile, the most mesmerizing blue eyes and he also had an Autism diagnosis. Unfortunately he hadn't had the best little life within his 4 years on earth. His Autism diagnosis was severe he was on the low end of the spectrum, meaning he was functioning well below his age level. He was unable to do anything for himself and he constantly engaged in severe self-injurious behaviors. He still drank from a bottle, he was unable to chew and therefore eat food, he still wore diapers, he babbled but didn't have any functional way of communicating his wants and/or needs, he was unable to crawl or walk, he was fully dependent on the people in his world.

This little blue-eyed boy stole my heart within hours of meeting him. I wanted to make his life easier, happier, and teach him things other people said he'd never do. At that time in my life I was a nursing student in my freshman year at an out of state university, I was eager, ambitious, and completely naïve about Autism and how to help my little blue-eyed angel. I quickly learned that teaching a child with Autism was a lot more difficult than I had anticipated. I also realized that finding people with experience in Autism and knowledge in how to help people with this diagnosis especially with such a severe case was difficult, at best. For these reasons and because of my growing love for this blue-eyed boy I decided to change my major to special education. I also moved back home so I could be a daily part of this growing boys life, this beautiful boy had somehow managed to change the course of my entire life!

My family and I sought help from doctors, educators, and therapists. We tried diets, therapies, and medications. We loved our blue-eyed boy and did our best for him. He grew quickly and did make gains although small compared to his rapidly increasing challenging and self-abusive behaviors. I continued on with my studies, I graduated with a Masters in special education K-12. Throughout my studies and my years of experiences with my younger brother I only briefly ever heard about Applied Behavior Analysis (ABA). It was never an offered service to help my brother, there was never a BCBA on any of his educational teams, there was never discussion of the functions of his challenging behaviors, there was never any diets, therapies, and/or medication that worked!

Our blue-eyed boy grew into a blue-eyed young man. He grew taller than us, stronger than us, he still didn't have a functional way to communicate his wants/needs, he still needed help with most tasks, and now he also needed someone with him constantly to keep him safe as his self-injurious behaviors continued to get worse. It became obvious to us that our love for him wasn't enough we couldn't keep him safe he needed constant one-on-one supervision. He became a danger to himself, which left us with a heartbreaking decision.

When my blue-eyed boy was 13 years old he moved to a live-in residential setting. In this new home he would be safe, he would have someone with him at all times, he would have a team of doctors and nurses available to him, he would have an educational team that collaborated with his home and school environments. But he wouldn't see us on a daily basis, his family the people he lived with for nine years of his life. And still even in this live-in residential program he still wouldn't receive ABA services, he still wouldn't have a BCBA on his educational team, and he still wouldn't have a plan in place to help decrease his challenging and self-abusive behaviors.

Around this time I was also transitioning into the life of a teacher. I loved teaching, I loved my students but I quickly realized that my knowledge and experience wasn't enough. Again I felt as though I wasn't making the difference I had hoped, again I felt like I was failing. To me letting down another child wasn't an option! This is when I made the decision to go back to school and study Applied Behavior Analysis (ABA). It was only through my study of ABA and in becoming a BCBA that I have felt like I have been able to make a difference in the lives of people with Autism.

Every day through my ABA work with children with Autism I see my blue-eyed boy. Every day I see the chances he didn't get, the progress he didn't make, and I see the consequences and challenges he faces because of these lost opportunities.

I feel honored to get the opportunity to work with the children and families that I work with. I feel lucky to be given the opportunity to provide the ABA services that I do. I have seen ABA positively affect so many families' lives, some in small ways but most in enormous life changing ways. The point I would like to make is that ABA is effective. It is the only research and evidenced based treatment for Autism. Because of my experiences with Autism including ABA and without ABA I feel strongly that you should vote to pass SB791.

I have seen first hand the life changing positive effects that ABA can have on children with Autism. I feel that had my blue-eyed boy been given the opportunity to receive ABA

services that his life would be completely different today. It breaks my heart that other families and children go without ABA services and face similar challenges that my family had to face.

Thank you very much for taking the time to hear my story and point of view as to why you should vote to pass SB791.

Respectfully,

Jessica Carvalho, M.Ed., BCBA
Jesslynn1882@aol.com
(808) 542-1204

3/18/1

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COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Jon Watari

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Dear Senators, Representatives, and Committee Members,

I am the owner of KJN Corporation, a small business in Hawaii, and I am writing to ask you to support autism insurance coverage. Currently in Hawaii, children with autism are not covered under medical insurance therefore families are forced to incur the cost of expensive treatments.

I have been a small business owner for over 20 years, and I have been faced with incurring increasing insurance premiums through the years. While every business owner does not like to see premiums increase, I understand the increase is small and I also understand the impact this bill will have on the state and will likely reduce costs long term. In addition, working parents are often forced to leave their jobs or take time off in order to support their children at home. I believe that as the prevalence of autism increases, more and more employees will need to make difficult choices about remaining employed or taking time off to care for their children. The disruption in business operations because of employee turnover, low morale and repeated leaves is unquantifiably high.

Studies show that, with proper intervention such as Applied Behavior Analysis, almost 50% of children with autism make substantive gains and may enter first grade indistinguishable from their peers.

As a business owner, I support SB791. At some point we need to balance what is right to simply looking at the costs.

Sincerely,

Jeong Nam Kim
President KJN Corporation

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Jordan

Last Name : Conely

Affiliation (optional) :

and Street Address : Honolulu

City/Town : Honolulu

Island : Oahu

Email : conleyfitness@gmail.com

Message to legislators : I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Dear Legislators,

I am in support of the Hawaii Autism Insurance Bill. My younger brother (10 years my junior) was diagnosed with autism when he was three years old. Although he was accepted into a state funded special education program when he was diagnosed, he never actually received ABA services. Since my being a provider to young children with autism since 2012 and now being a BCaBA, I have been blown away at the high rate of skills these children have been taught and have retained through the use of applied behavior analysis, and have been quite sad to think of how far my brother (now 18 years old) could have come if he had received these services. The hardship this has caused my single mother is something that I hope no other family will have to go through. I believe we should all strive to have this bill pass so that all of our children can receive the best possible care and education.

Sincerely,

Jessica Sumner

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Jesse V. Larson

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Name : Karen
Last Name : Kimball
Street Address : 4510 Salt Lake Boulevard
City/Town : Honolulu/HI
Island : Oahu
Email Address : kkimball@bayada.com
Company : BAYADA Habilitation
Position : Behavioral Support Manager

Tell us where you stand on the bill : I support autism insurance

Is there anything else you would like to share? : I am a Board Certified Behavior Analyst and a Licensed Mental Health Counselor and I truly support the Autism Insurance bill. I believe it will bring much needed ABA services to all families in need. I have seen children who are nonverbal develop functional communication skills. I have seen children, who in preschool, only ate bread and chocolate milk, now enjoy foods from all 5 food groups. I have seen a student who had severe communication delay, run for Treasurer and present in front of the whole elementary school. I have seen a student graduate and attend a community college. I have also seen each of these students' families who have done everything they can and more to support their children.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Kira
Last Name : Oshiro
Affiliation (optional) :
and Street Address : Wailuku
City/Town : Wailuku
Island : Maui
Email : kilakiwa@gmail.com

Message to legislators : I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Lauren
Last Name : Kelley
Affiliation (optional) : Horizon's Academy
and Street Address : Kihei
City/Town : Kihei
Island : Maui
Email : lkelly5007@yahoo.com

I am a service support worker at Horizon's, I support the autism insurance bill and am ready and able to help.

3/18/1

5

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Name : Joe
Last Name : Dalessandro
Street Address : 656 Meakanu Ln., #1601
City/Town : Wailuku
Island : Maui
Email Address : jdpmaui@gmail.com
Company : Joe Dalessandro Photography
Position : Owner

I support autism insurance.

Is there anything else you would like to share? : ABA works, I've seen it with my own child. While I support the bill, The \$300,000.00 behavioral health cap is unrealistically low and should be bumped to at least \$1mil. This is a lifetime disability.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Kristin

Last Name : Shepherd

Affiliation (optional) :

and Street Address : 1109 Kaluanui Rd

City/Town : Honolulu

Island : Oahu

Email : maileshepherd@gmail.com

Message to legislators : I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Ken G. Kosada

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Aloha State Legislators,

Currently, I work as a R.B.T. focusing on ASD. As a R.B.T., I am responsible for data collection and conducting assessments based upon the treatment plans my supervisor provides. Also included in my job description is working under the direction of a classroom teacher as a contracted service provider with students, supporting community integration activities and in home tutoring services. This work requires patience, reliability and willingness to work with a diverse population.

I discovered more than myself living in Hawai'i and being here is where my passion for helping others grew. The sense of pride and purpose I have found in helping others has sealed my commitment to social services. I remember one of these such moments clearly: I was working with my client with limited vocabulary, one afternoon as I was walking out of the classroom the words, "Bye, Mr. Marc" uttered under my client's breath. Those few words meant the world – this child trusted me, relied on me and saw me as part of their life. After that moment I realized that I do have the potential to change lives for the better.

Mahalo,
Kepa Malate

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Kawai
Last Name : Kaili
Affiliation (optional) :
and Street Address : Makawao
City/Town : Makawao
Island : Maui
Email : kawaiet@gmail.com

Message to legislators : I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Kyle
Last Name : Machos
Affiliation (optional) : Autism Behavior Consulting Group
and Street Address : 711 Wailepo PI #303
City/Town : Kailua
Island : Oahu
Email : kyle.machos@gmail.com
Message to legislators : Aloha,

My name is Kyle Machos. I am a Board Certified Behavior Analyst. I have dedicated my career to helping improve the quality of life for children with autism and their families for over 10 years. I am currently a supervisor at a center providing Applied Behavior Analysis therapy for children on the autism spectrum. I am writing in regards to the autism insurance proposed in this legislative session.

Autism is a pervasive disorder that can be devastating to the development of our Keiki. It is now known that autism affects 1 in 68 children in the United States. Applied Behavior Analysis is the only evidence-based treatment of Autism that has been proven to be effective. It is the only treatment of autism that is endorsed by the US Surgeon General, the American Academy of Pediatrics, the Center for Disease Control (CDC) and many other reputable agencies and experts. 38 States in the United States have already passed Autism Insurance Mandates. Hawaii is one of the 12 states remaining where this legislation is gravely needed. It is the only democratic State in the US without this type of legislation. Passing autism insurance reform is absolutely critical for the lives of all of our citizens. Senate Bill 791 would allow endless Hawaiians the ability to receive the services they desperately need and are currently being denied. Early intensive behavioral intervention has been proven to be crucial for teaching new skills, reducing problematic and challenging behavior, improving social skills, language and communication to children on the autism spectrum.

Applied Behavior Analysis is provided by a Board Certified Behavior Analyst (BCBA). The behavior analyst is certified through the Behavior Analyst Certification Board. Each BCBA must take graduate classes in the field of Applied Behavior Analysis, and work in the field under a certified behavior analyst. Before attempting to take the certification exam each applicant must be supervised for 1500 hours and mentored by a BCBA in the behavior analytic principles listed in the board's task list. This is a very rigorous process that culminates in passing of a comprehensive exam to become certified. Once certified each analyst must continue their education through workshops, conferences, and other trainings. This ensures that therapy accepted by this legislation will be administered by a behavior analyst that has the skills and ability to make positive change through ABA.

I have personally experienced many inspiring cases in which the lives of my clients and their families have been unbelievable changed in a positive way due to intensive ABA therapy. I have worked with children that have absolutely no language, and use severe self-injurious behavior to get their wants and needs. These same children were taught using applied behavior analysis to communicate through language, engage in their environment appropriately, and stopped the self-injurious behavior. In 2005 I was working with a 4-year-old boy that had no language or communication skills, and was not learning from his environment. His family had accepted that this is how their son would be, and were trying to cope with his future. After some intensive applied behavior analysis I witnessed my client run to his mother and say "love you, mommy." Although this was still the beginning of the help this client needed to bridge his developmental deficits, this was the moment I choose to dedicate myself to helping children with autism through applied behavior analysis.

Besides the overwhelming benefit ABA therapy can provide for the family and the individual diagnosed with autism there is a huge value for our state as a whole that the House bill 1108 passes. Having meaningful autism insurance reform is the right thing to do for many reasons. One of these reasons is that it makes undeniable financial sense. The early intensive ABA therapy needed for many of our keiki in this state has an estimated to cost \$35,000-\$50,000 for three years depending on the intensity needed. When children with autism are given the opportunity to receive these services at such a vital time in their development the outcomes can be vastly different in regards to their functioning, and placement. According to all estimates the price of caring for individuals with autism that do not receive the services they need from ages 3-55 is between \$600,000 and \$1,000,000. The majority of this burden will fall on the state to provide. This makes the choice to provide mandated autism insurance coverage obvious.

Passing an autism insurance mandate is the only acceptable outcome of this legislative season. We have to do this for all the people of Hawaii, and the future of our state.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Joe

Last Name : Coelho

Affiliation (optional) :

and Street Address : Makawao

City/Town : Makawao

Island : Maui

Email : hanaikienterprisels@hawaiiantel.net

Message to legislators : I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Kehaulani
Last Name : Yamaguchi
Affiliation (optional) : BAYADA
and Street Address : 4510 Salt Lake Blvd
City/Town : Honolulu
Island : Oahu
Email : kyamaguchi@bayada.com

Message to legislators : Passing this bill will benefit so many families and children in Hawai'i. It will ensure quality providers and services to help in the overall quality of life for these families and children.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Mallory
Last Name : Stinger
Affiliation (optional) :
and Street Address : 95163 Hokuloa Lp.
City/Town : Mililani
Island : Oahu
Email : malloryqjanzen@hotmail.com

Message to legislators : The passing of this bill is very important for the students that I serve. By passing this bill, the students I serve on a daily basis, will be able to have services that assist in improving their everyday lives. We provide assistance in training development of socially significant behaviors such as completing individual tasks at home, at school, and out in the community. Our goal is to equip our students with as many skills as we possibly can so they can enter community possibly contributing their gifts to society. With the services we provide we are able to assist in providing a quality of life that they would not otherwise get. Please consider passing this bill as these human beings deserve to have services provided that assist in developing these important life skills.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Josh Sudow

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Lynn
Last Name : Mahoney Heckle
Affiliation (optional) :
and Street Address : Hilo
City/Town : Hilo
Island : Big Island
Email : justlynnrn@gmail.com

Message to legislators : I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Kaley

Last Name : Mello

Affiliation (optional) :

and Street Address : Kihei

City/Town : Kihei

Island : Maui

Email : kaleymello@gmail.com

Message to legislators : I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Aloha,

My name is Kathleen Bradler, M. Ed. BCBA. I am a Board Certified Behavior Analyst. I have been working with individuals with autism (from 18 months to 60 years of age) since 2001. I provided Applied Behavior Analysis to our keiki on neighbor-island Maui for two and a half years through a private company that was contracted by the Department of Education and Department of Health. I currently provide Applied Behavior Analysis to our military keiki here on Oahu through Tricare insurance. I am writing you on behalf of the autism insurance legislation that sits before you today.

I have seen, first-hand, the difference between children with autism who have access to a clinically appropriate level of treatment, and those who do not. On Maui, the children with autism that I receive minimal services, usually by under-trained staff, and at school age or later; funded by the State of Hawaii. On Oahu, children with autism in military families receive Applied Behavior Analysis by Board Certified Behavior Analysts, Board Certified Assistant Behavior Analysts, and Registered Behavior Technicians at the age of diagnosis; funded by military health insurance.

The difference is in the data. The children who receive an earlier diagnosis, who receive early intervention, and who receive consistent evidenced-based effective treatment by Behavior Analysts make the most gains. These children will need less services as they age, than if they did not have access to Applied Behavior Analysis. These children will have the best chance at reaching their fullest potential; the best chance at independence. And these children will cost the State of Hawaii less.

Please support autism insurance reform in Hawaii and help our keiki as well our State's budget.

Sincerely,

Kathleen Bradler, M. Ed. BCBA

3/18/1

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COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Jonathan Fritzer

3/18/1

5

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Dear Legislators,

For the past 2 years, I have been given the wonderful opportunity to work with a lively group of children, whom almost all, have been diagnosed with Autism Spectrum Disorder. I have always wanted to work with children and adolescents, but it wasn't until I began working at Behavior Analysis No Ka Oi that I realized the true importance of patience, understanding, equality, and education. I am currently working with children with autism of all ages and recognize the importance of being able to receive Applied Behavior Analysis (ABA) services at a young age, as soon as the child is diagnosed, since it is in the early childhood years where learning is most effective. Also, by working with adolescents, I understand how much of an impact having ABA services for several years has made on their lives. Through the data collected from each ABA session the children have with us, I am able to see how much of an impact our services make on their communication, academic, motor, and social skills.

I am in support of a bill because it will provide children with autism insurance coverage for services that are proven to be tremendously important to their livelihood and future. The passing of the bill will allow countless families to attain the services they need for their children, and for the children to receive an equal opportunity at learning that is not often found in schools. As of now, many of our clients have parents who serve in the US Military so they are able to be insured through the DOD. However, we also have clients who must to pay through private expenses to receive the same ABA services. Nonetheless, I find the ABA services necessary for all children who fall on the autism spectrum. By recognizing the grave importance and wanting to learn more in order to provide the best services I can, has pushed me to pursue a Board Certified Behavior Analysis certification.

With the education for the 18 month online curriculum as well as the over 2,000 hours spent in the field providing ABA services, I am now preparing for the exam in February. By becoming a BCBA, I will be able to better serve this amazing population of individuals by creating treatment plans, attending school IEP meetings, and plan parent training opportunities, in order to aid children with ASD to live independent, fulfilling lives.

Sincerely,

Joni Wong

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Kayla
Last Name : Kim
Affiliation (optional) :
and Street Address : 3368 Hardesty St
City/Town : Honolulu
Island : Oahu
Email : kkim2009@yahoo.com
Message to legislators :

Aloha,

This bill will not only lift a financial burden on many families but it can be the catalyst for many autistic citizens of Hawai'i to live a healthier and happier life. Every life counts no matter your mental, physical or spiritual situation. As a paraprofessional, I work with an autistic child and it is such worthwhile work but having a 1:1 during school is not enough. If autistic care was covered, my client and so many other kids would have the opportunities to excel and get further in life. Please think of all the keiki who need your help in this decision. Thank you for all that you do.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Aaron

Last Name : Kanemaru

Affiliation (optional) :

and Street Address : 94-277 Hokulewa Loop

City/Town : Mililani

Island : Oahu

Email : a.kanemaru@hotmail.com

I support autism insurance reform

I support removing the age cap.

I support removing the dollar cap.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Anastasia Keller-Collins
91-129 Nohoihoewa Way
Ewa Beach
Oahu, Hawaii (HI)
anastasiakellercollins@gmail.com

Thank you for your support as we move toward Autism Reform in Hawaii. Behavior Analysis is the number one treatment for Autism and it has proven effects to increase development in the areas of social and life skills and communication, decrease behavioral challenges that leads to people living comfortable all the while ensuring people can live a life with independence and dignity.

With a birthrate of 1 in 68 individuals, it seems clear that all of us will benefit when people are more independent. As a Behavior Analyst, I see these changes each day with more than one client. It is powerful and forever life changing. Clearly, there is a huge need for change to assist people with Autism...this is widely known. What is unknown is the far reaching effects all of us, as a community, will need sacrifice later when we have neglected to take care of individuals and their families.

Thank you for your time and consideration toward this effort and support for making a change.

Anastasia Keller-Collins, MED, BCBA, CTRS

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

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I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Zhang Hua Chen

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Arin Cranley

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

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Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Yvonne Perry

3/18/15

COMMITTEE ON HEALTH

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Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a provider for ABA services and I support the autism insurance reform. I believe having access to early intervention will decrease the cost of care for people with autism in a long run.

Sincerely,

Yuri Lee

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

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Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Yaron Shlame

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

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I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Ashley Robinson

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Waioni

Last Name : Dickison

Affiliation (optional) :

and Street Address : Kihei

City/Town : Kihei

Island : Maui

Email : waionidickson@gmail.com

Message to legislators : I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I represent a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Violeta Romero

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Tyler

Last Name : Thomsen

Affiliation (optional) :

and Street Address : Kihei

City/Town : Kihei

Island : Maui

Email : tthomsen808@gmail.com

I support autism insurance. Malama our keiki!

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Tracy

Last Name : Ruggiero

Affiliation (optional) : Bayada Habilitation

and Street Address : 2200 Main Street Suite 650

City/Town : Wailuku, HI

Island : Maui

My name is Tracy Ruggiero and I am a Board Certified Behavior Analyst who has been working in the field of Autism for the past 13 years, 7 of which have been in Hawaii. I appreciate the opportunity to be able to submit testimony in support of Hawaii Autism Insurance Reform.

I stumbled into the field of helping children with Autism during an undergraduate internship, learning basic principles of Applied Behavior Analysis (ABA) without even knowing it. Over the course of a semester, I worked with professionals to develop and carry out treatment plans for children with a variety of eating disorders. I observed their treatment progress from requiring in-patient services, to out-patient services, to training their family members to implement services at home for long-term maintenance and success, all utilizing scientifically founded principles of behavior analysis. Being an intern in this setting sparked my interest in learning more about the science of ABA, and I pursued a job working with families and their children diagnosed with Autism Spectrum Disorders in both a clinic and home based setting. Starting as an entry level skills trainer, eventually moving up to a case manager, I wanted to become a program supervisor, to learn how to assess children and plan for their education and treatment goals. After receiving guidance from my directors, it was revealed that the only way to move forward and advance my career in this field was to obtain a Master's Degree and pursue additional coursework in Applied Behavior Analysis. My interest in being able to provide treatment for children and families using a scientifically proven methodology led me to complete an 18 month, full time graduate program in Early Intervention, with a Specialization in Autism, and required ABA coursework. Additionally, I accrued 1500 practicum hours under the supervision of an already certified Behavior Analyst and was then accepted to sit for the certification exam, governed by the Behavior Analyst Certification Board.

Since passing that exam, and working in the field as a consultant, I have been able to touch the lives of many families here in Hawaii over the past 7 years. However, there are countless families that have fallen outside of the federally mandated free Early Intervention services that I provided for the first 5 years and the military families that I worked with for another year and a half, who are fortunate enough to have their ABA services covered under Tri Care. There are close to 100

individuals that have met the same requirements in order to become Board Certified and currently reside in the state of Hawaii, hoping to be given the opportunity to reach and serve more families, children and adults. They are trained in the most recognized and scientifically founded methodology that has been shown to be effective from birth to death for individuals diagnosed with Autism Spectrum Disorders.

I am asking for your support in passing the Hawaii Autism Insurance Reform Bill so that providers can help to make a difference in the lives of so many of our Hawaii families in need, without having to sacrifice to find a way to pay for these much needed services.

Thank you for your consideration,

Tracy Ruggiero, M.Ed., BCBA
BAYADA Home Health Care | Behavioral Services Manager HAB
2200 Main Street, Suite 650 | Wailuku, HI 96793
Office 808-244-6879 | Fax 808-244-7575 | www.bayada.com

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Tiana

Last Name : Alconcel

and Street Address : Waiehu

City/Town : Waiehu

Island : Maui

Email : laanahe@gmail.com

Message to legislators : I support autism insurance reform.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Name : Tanja
Last Name : Nikolic
Street Address : 4510 Salt Lake Blvd D8
City/Town : Honolulu
Island : Oahu
Email Address : tanjacro@yahoo.com
Company : Bayada
Position : Behavior Consultant

I support autism insurance reform. Please pass the bill!!

3/18/15

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Brett

Last Name : McHenry

Affiliation (optional) :

and Street Address : 825 Waika Pl.

City/Town : Honolulu

Island : Oahu

Email : brettmchenry@gmail.com

Message to legislators : I have worked within the field of special education for the past 9 years. Over these years, this field has become my passion and my students' and their families are considered my Ohana as well. When the 'rail' is costing State tax-payers billions of dollars, I would rightfully assume that this same State would prioritize areas of human service and basic ethics in regard to rightfully deserved health care for individuals with special needs.

In this field, we are constantly and consistently data-driven. If a program and/or intervention is not achieving success, an immediate change occurs in order to promote success. Data has shown time-and-time again that ABA interventions are critical for early childhood development with individuals with special needs.

Do the right thing Hawaii.

I support removing the age cap.

I support removing the dollar cap.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Stephen,Jr

Last Name : orbon

Affiliation (optional) :

and Street Address : 2192 kalaiwa way 14h

City/Town : Honolulu,HI

Island : Oahu

Email : orbonjunior@yahoo.com

Message to legislators : I really want this law to pass. I to have a nephew that got help from the skills trainer i remember that day they told me that their kids have {autism}, they were really worried about it at first but while they were seeking for help the school told them about this wonderful program for kids in Hawaii. They were really thankful for this program for their kids they also mention that some country don't have this great program that the state of Hawaii offer to our kids in need so I just want to say what's in my mind i really want you legislators and the state of Hawaii to pass the bill. thank you for all the helps you offer in the state of Hawaii.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaiï State Capitol

415 South Beretania Street

Name : Stephanie

Last Name : Kephart

Street Address : 3083 Akahi St

City/Town : Lihue

Island : HI

Email Address : skephart@bayada.com

Company : BAYADA Home Health Care

Position : Director

I support the autism insurance bill

I support removing the age cap.

I support removing the dollar cap.

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Sheryl

Last Name : Raclies

and Street Address : Kahului

City/Town : Kahului

Island : Maui

Email : mkaauwa@hawaii.edu

I support autism insurance reform.

3/18/15

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Bryan Packey

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Shawna

Last Name : Paloma

and Street Address : Kahului

City/Town : Kahului

Island : Maui

Email : mrpalomoswife@gmail.com

I support autism insurance reform.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Aloha, my name is Shannon Ching and I am a Board Certified assistant Behavioral Analyst (BCaBA). I am writing to you because I want to talk about autism insurance reform and how it will benefit children and families with autism.

I began working with children with developmental disabilities just over two years ago. I came into this field without any prior experience with children with autism. Within a month of working my life and outlook on the field had changed significantly. Working with my clients and their families I was awakened to just how important and effective treatment for autism is. I have seen children begin therapy with nearly no skills, engaging in a variety of challenging behaviors to simply communicate their wants and needs, and parents frustrated and confused not knowing what to do with their child. Under the direction of a highly trained Board Certified Behavior Analyst (BCBA), individualized, intensive treatment plans were created which resulted in these kids gaining skills and reducing challenging behavior. The success of Applied Behavior Analysis (ABA) is remarkable, ongoing, and proven.

I started off as a behavioral tutor and within less than a month and a half, I set out to begin coursework to become a BCaBA and get specialized education in ABA. Within such a short period of time I decided to commit myself, my time, my money, to become

a BCaBA. The schooling was an intense 135 hours of classroom hours combined with 1000 hours of supervised fieldwork, before I could even apply for the Board Exam.

Although the amount of work that needed to be completed was intensive, the outcome made everything worth it.

As a mother of a typically developing child I understand the struggles and frustrations of parenting; however working a few hours a day with special needs children I can only imagine the magnitude of struggles the families I work with face day in and day out.

Although the time the treatment team spends with our clients is limited, by talking with parents and seeing our clients interact with others and their environment appropriately, using the skills we worked on in sessions, is awesome and so rewarding for everyone involved. To see parent's react to their child being able to say "mommy" or to be able to point at what they want, or even to simply give a high-five is priceless. These simple skills are overlooked by many, but for those living with developmental disabilities and their families these are very significant steps!

I was born and raised in Hawaii. It pains me to see that the local children of Hawaii are unable to receive effective ABA services because their insurance does not cover such therapy. They struggle through life without appropriate support, when crucial help is so close. Let's give our keiki a better future, improve their quality of life, give them access to the treatment they need. With the passage of this bill so many more children with autism will lead a more significant and meaningful life. We all deserve to be given the opportunity to reach our full potential, this bill allows for that!

Thank you for your time and for hearing my point of view of why you should vote to pass autism insurance reform. .

Respectfully,

Shannon M. Ching, BCaBA, B.A.

808-383-0358

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Scott Smith

3/18/15

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Sarita

Last Name : Velada Schmitz

and Street Address : Kahului

City/Town : Kahului

Island : Maui

Email : wehi_lani@yahoo.com

I support the autism insurance reform.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Sarah

Last Name : Skidmore

and Street Address : Honolulu

City/Town : Honolulu

Island : Oahu

Email : sarahskidmore23@gmail.com

I support the autism insurance reform.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Sarah

Last Name : bessette

Affiliation (optional) :

and Street Address : 19a kuhina pl

City/Town : Makawao

Island : maui

Email : kinney27@gmail.com

Message to legislators :

My stepson has autism and we have lived here for nine months. We moved from California where insurance reform has already happened. I am so disappointed and frustrated with the experience we have had in Hawaii. I was born and raised on maui and thought this would be the ideal place to raise my children, however my stepson with autism is not receiving adequate services because they are not covered by insurance.

I support removing the age cap.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Carolina

Last Name : Olson

Affiliation (optional) :

and Street Address : 2054 Kauhikoa Rd.

City/Town : Haiku

Island : Maui

Email : carobovoruz@gmail.com

I work with children with autism and I support SB 791 with no age limits and no dollar caps. And I support Senate Bill 40 for BCBA Licensure as written

I support removing the age cap.

I support removing the dollar cap.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Ryan

Last Name : Kerr

and Street Address : PO BOX 1307

City/Town : Kihei

Island : HI

Email : rwkerr6@gmail.com

I SUPPORT AUTISM INSURANCE REFORM.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Ruth
Last Name : Ballinger
and Street Address : 220 Napoko Place
City/Town : Kula
Island : HI
Email : ruthballinger@gmail.com

My name is Ruth Ballinger. Ten years ago I became an Autism Consulting Teacher for the Department of Education (DOE) for Maui District. Soon after I started my new job, I was first introduced to an education consultant with a BCBA, who had been contracted by the DOE. Even with my master's degree in special education, it was immediately clear to me that this individual had expertise in the area of autism that went beyond my own. I remember at the time becoming determined to figure out what he knew so that I could provide the same level of skill to the children that I worked with.

Becoming a Board Certified Behavior Analyst is a rigorous endeavor. It took me over 6 years to gain the experience, complete the coursework, find a supervisor to oversee my 1500 supervised hours, and pass the exam. Nevertheless, what I am now able to offer students with autism, their families, and their teachers is incomparable to anything that I was capable of before I gained this credential.

As a public school teacher, I will not personally benefit from the passage of this bill. But what Hawaii's children with autism and their families stand to gain is immeasurable; it is hope for a life that includes basic communication, friendship, employment, independent living, and citizenship.

Please pass autism insurance reform.

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Rose Subiono

3/18/15

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

My name is Roland Yee. I am authoring this testimony in the middle of the night, because like most parents, there's not enough time in the day to handle much else beyond a demanding job, supporting your local community or church, and quality time raising a family. And then there are families hit with the additional challenge of Autism.

It's easy to assume that kids will eventually grow out of whatever phase they are going through, that is, until that "phase" doesn't go away. Our son was tested and diagnosed with developmental delay at 2 and a half, a somewhat early age, and his diagnosis was later changed to Autism as he grew older. We were fortunate that he was diagnosed early from the Dept of Health's Zero to Three Program, but we were mostly at a loss on how to help him after he turned 3 as the services were limited to start, but cut off fully at age 3. Every child is unique, and there is not cookie cutter solution to Autism. We didn't know where to turn. At the time, our son received speech and occupational therapy with limited success. We hoped, like most parents would, that our son would just grow out of it, and we would downplay this part of his life as a slow learner, but that wasn't the case.

He qualified for a special education preschool, but they did not understand his unique needs. Our son didn't understand the transitions going on in his life, the lack of routines, the strange people outside of his family, and it scared him. When this triggered anxiety, he would engage in tantrums, crying, and shut-down behaviors. When there was a fun activity, there was concern that he would get too attached and not want to engage in peers or adults or anything else. He would communicate non-verbally, or not at all. We couldn't let him outside the house by himself for fear that he would run into dangerous situations without a care. He needed more.

Since his school wasn't enough, we started to look elsewhere. We heard some great things about Applied Behavioral Analysis (ABA) therapy, and decided to try it out despite the fact that our insurance wouldn't cover it.

ABA Therapy with certified BCBA's made a significant difference in our son's life, despite the cost. They worked really hard to understand the activities he could and could not do, liked and did not like, and mapped out different strategies to leverage his preferences to stretch him. Slowly but surely, he started to communicate, first with "yes" responses, then "yes" and "no" responses, to single word answers, to whole sentences. They used countless motivations and data collection to help reinforce simple facts, like names and face recognition, reciting his parent's phone numbers and house address, even just answering his age when asked. ABA Therapy created social scenarios with toys, then with peers, then peers with toys, and safe social settings, to the point where he could interact with others. With ABA therapy, our son could go outside the house without running off.

But make no mistake, fruitful ABA therapy is hard work. To motivate a young child to do an undesirable task or re-direct him from a break to get back to therapy wasn't easy. The BCBA's and the tutors had to work as a team, constantly changing things to keep the content fresh and engaging. Our team for my son changed from Team Angry Birds, to Team Disney Princesses or Fairies, to Team Lego Friends in 3 short years, reflecting the highly motivating themes that they needed to incorporate into their therapy. They were able to generate lots of meaningful data and made a lot more progress than the schools could, and in less time as well. The ideal situation was to see our son's special education program in public school collaborating with our private therapy teams, but they didn't.

ABA was a huge success, but we literally had to drain our finances to do it. We did as much as we could while we could afford it, but we had to stop to prevent from living on the streets. We have another child, a daughter, our son's older sister. She's a godsend at 9 years old, seeing first hand how we need to treat her 7 year old little brother. She's like a mini BCBA around the house -- part time therapist, part time goof ball, full time sister. Sometimes she asks why brother gets all the attention, and then we realize that we need to love both our kids equally.

We strongly believe that an ounce of prevention is worth a pound of cure. I thought health insurance companies understood this concept long ago, so enacting legislation that fosters early intervention and treatment of Autism through ABA and similar therapies would be a foregone conclusion. We need ALL insurance companies in Hawaii to support this, just as they do on the mainland.

Please pass whatever legislation is needed to bring affordable therapy for Autism to the islands. If the 1 in 88 statistic for Autism still holds true, one day, someday soon, you or someone you love will need to make use of this legislation, too. Mahalo for your support.

Sincerely,

Roland Yee

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Caroline Marcus

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Robert James

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Richard

Last Name : Bartolf

and Street Address : Kihei

City/Town : Khei

Island : Maui

Email : richardb@gmail.com

I support autism insurance reform.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Carollyne

Last Name : Killackey

Affiliation (optional) :

and Street Address : 91-1001 Opaehuna St.

City/Town : Ewa Beach

Island : Oahu

Email : crayola89@gmail.com

Message to legislators : I support autism insurance reform. Take the burden off of these families that are trying to get the best treatment for their children.

COMMITTEE ON HEALTH
Representative Della Au Belatti, Chair
Representative Richard P. Creagan, Vice Chair

Conference Room 329
Hawaii State Capitol
415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Rhiannon Leonard

3/18/15

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Christine Io

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Raenell

Last Name : Barcarro

and Street Address : Pukalani

City/Town : Pukalani

Island : Maui

Email : raenellbacarry@yahoo.com

I support autism insurance reform.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Philip

Last Name : Bocher

Affiliation (optional) : Horizon's Academy

and Street Address : Kihei

City/Town : Kihei

Island : Maui

Email : phil_bocher@hotmail.com

I am a service worker with individuals with special needs. I am ready to help and I support autism insurance reform.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Peter

Last Name : Warda

Affiliation (optional) : Horizons Academy

and Street Address : Paia

City/Town : Paia

Island : Maui

Email : peterwardavisionquest@gmail.com

I am a support worker for special needs individuals and support autism insurance reform.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Paul M. Tan

3/18/15

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Paul

Last Name : Brown

and Street Address : Kihei

City/Town : Kihei

Island : Maui

Email : pbrown@gmail.com

I am a PAB service worker working with children and adults with autism. I am ready and able to help all individuals with autism on Maui. Malama our Keiki!

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Patricia
Last Name : Tsukimura
Affiliation (optional) : Shafter Elementary School
and Street Address : 2-Fort Shafter
City/Town : Honolulu
Island : Oahu
Email : patty_tsukimura@notes.k12.hi.us

I am writing in support of the autism insurance bill. Having worked in the Department of Education as a Preschool Special Education Teacher and Student Services Coordinator for 25 years, I have seen the progress that children with autism can make when they are provided with the appropriate supports.

The individual support given at home with ABA services is very important to help children learn behavioral skills and also to assist the families with managing their children's behaviors.

Because Autism is a Spectrum Disorder, and children display such a wide variety of problem behaviors, it becomes crucial that their programs at school and home become individualized. The ABA providers can deliver a program that is tailored to the child's needs.

As the child's behavior is addressed systematically at home with ABA services, then at the school level we see a corresponding decrease in problem behaviors also. Then the

child can be provided with a less restrictive setting, and less of the school's resources are needed to deal with individual children.

Parents have expressed to me how much they have been helped when they have the ABA services. The stress level in the home is lessened and the family is happier with a feeling of hope for the future.

I urge you to support autism insurance reform!

March 18, 2015

Senate Committee on Health
Senator Josh Green, Chair
Senator Glenn Wakai, Vice Chair

Senate Committee on Commerce and Consumer Protection
Senator Rosalyn H. Baker, Chair
Senator Brian T. Taniguchi, Vice Chair

Re: In Support of SB 791

Requires health insurers, mutual benefit societies, and health maintenance organizations to provide coverage for autism diagnosis and treatment.

Wednesday, March 18, 2015, 8:45 AM
Conference Room 329, State Capitol
415 South Beretania Street

Dear Chair Green, Chair Baker, Vice Chair Wakai, Vice Chair Taniguchi, and Members of the Committees:

My name is Olivia Calulot, I am a parent of a child with autism and I am writing in behalf of my son and all other autistic children. Recent researches show that 1 in 68 children have autism spectrum disorder. The prevalence of autism diagnosis in our State increases every year. This bill will allow medically insured individuals with autism, especially children, to acquire proper intervention and treatment they need without the tremendous financial burden to their families. Individuals with autism need our support to help them thrive. Many parents suffer the uncertainty of not providing the proper therapy for their child with autism. Receiving limited amount of therapy through government funded agencies is not enough. Autism is a lifelong condition. Recognizing the epidemic prevalence of autism by allowing comprehensive treatment through mandated health insurance is important for the benefit of individuals with autism.

I am therefore strongly urging your favorable consideration of this bill.

Thank you for the opportunity to submit testimony in supporting the intent of SB 791.

Respectfully submitted,

Olivia Calulot

ocasino@hawaii.edu

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Noelani

Last Name : Emelio

Affiliation (optional) : Horizon's Academy

and Street Address : Kahului

City/Town : Kahului

Island : Maui

Email :

I am a direct support worker here on Maui, I support autism insurance and I am ready and willing to help.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Nissa

Last Name : Van Etten

Affiliation (optional) :

and Street Address : 1278 Kahili St.

City/Town : Kailua

Island : Oahu

Email : nissa.intarachote@gmail.com

Message to legislators :

To whom it may concern,

I believe that children and individuals with autism can help make a positive impact on our society. I have been in the field of Applied Behavior Analysis for 15 years and have met many individuals who have changed my life. With early and ongoing intervention, individuals with autism can integrate into our society and become supportive members. We have the opportunity to educate and support these children, providing them with skill necessary to participate in our society, more importantly to become members in our Ohana.

Passing this bill will not only prove a step in the right direction for Hawaii, it will allow our family in Hawaii to get to know and see the capabilities of their children.

Mahalo for reading!

Nissa Van Etten

I support removing the age cap.

I support removing the dollar cap.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Nieneene Guzman

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Craig Davidson

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

My name is Nicole A. Herber and I am a Board Certified Behavior Analyst (BCBA) who primarily works with children on the autism spectrum. I am submitting testimony in support of autism insurance reform, SB791.

Since beginning my career as a BCBA two short years ago, I've seen children and families with autism overcome challenges that the families never thought possible. I've seen children on the autism spectrum, who were unable to perform basic self-help skills such as teeth brushing or dressing themselves, be able to independently get ready school. I've taught toddlers to communicate using words or pictures to tell their parent that he wants a drink instead of biting or pinching because he didn't know any other way to get his parents attention. I've had the pleasure of listening to a mother share the heartwarming recount of all the words her child said the night before.

Being able to communicate, care for yourself, and socialize with peers are just a few skills that ABA treatment can teach a child with autism. These skills are things that many people take for granted, skills that are thought to come naturally over time. However, if one is on the autism spectrum, these skills are very complex and difficult to learn. It is through the ABA intervention and ABA programs tailored to the individual by a BCBA, who has completed rigorous training, that these skills are taught.

ABA is effective and an empirically validated treatment for individuals on the autism spectrum. Even if you haven't read the ABA scientific journals and articles, you can listen to the countless stories of families that been positively impacted by ABA therapy. Their stories are proof that ABA changes lives, and all individuals and families with autism should have the choice to access ABA therapy. Access to ABA treatment should not be limited to families that can afford it. I appreciate your time and thank you for the opportunity to submit my testimony on this very important piece of legislation.

Respectfully,

Nicole A. Herber, M.A., BCBA

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Nalani Subrona

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Mitchell

Last Name : Yano

Affiliation (optional) :

and Street Address : 1022B 9th Ave

City/Town : Honolulu

Island : Oahu

Email : mitchellyano@gmail.com

Message to legislators :

I am in favor of offering insurance for children affected with autism. Thank you.

I support removing the age cap.

I support removing the dollar cap.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Misty

Last Name : Kahuhane

Affiliation (optional) : Horizon's Academy

and Street Address : Kula

City/Town : Kula

Island : Maui

Email : mistykah@gmail.com

I am a service worker on Maui for those with special needs. I am willing and able to help and I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

To Whom It May Concern,

I am writing to show support for Autism insurance reform with no age or dollar caps on services. I live on Maui and am the mother of a 14 year old boy with severe Autism, as well as severe aggressive and self injurious behaviors. My son was born at Maui Memorial Hospital, with no major complications, and diagnosed with Autism at age 2.

He attended Imua Family Services and received extensive Early Intervention Services until age 3. He has been in the Department of Education system ever since then. We have done everything we could think of to gain progress in his skills and behavioral issues, but it can be extremely difficult to get services on Maui.

Applied Behavioral Analysis services have made a huge difference for my son, initially helping him learn basic skills like getting dressed, or learning his colors and shapes, but remaining important to his program as he has aged and his behaviors have become increasingly difficult to manage.

Because of ABA we have been able to gain some access to behavioral specialists who have helped us to identify some reasons why he is aggressive or self injurious, but we need more help! On Maui, there are not many people to turn to for support, and it is

almost impossible to pay for the services. Currently the Department of Health offers almost no behavioral help to children, perhaps one hour per month, which is far short of what is needed.

For my son, being aggressive means physically attempting to bite or grab whomever is in range when he becomes upset, and being self injurious means scratching himself or hitting his body against objects until he is bruised, bleeding, or stopped by whomever is with him. His behavior is severe to the point where it has, at times, taken 5 people to contain him. He has broken bones, cracked ribs, and caused cuts requiring stitches on both family members as well as professional staff during aggressive episodes. During self injurious episodes he has caused bruising and scrapes on his own body which required medical attention before he could be stopped. Currently he is under management by Shriners's Children's Hospital on Oahu, but has to travel to seek medical attention and advice. It can be extremely difficult to travel with him, as you can probably imagine.

It has already been suggested by certain doctors that he may need a certain period of inpatient care, which I have decided is not right for our family, but one day we may not have a choice. My hope is to continue to provide him with intense services on a daily basis and work towards behavior management at home. In my view, the more we invest in him now, the less likely he will need comprehensive inpatient care as an adult.

The need for intensive ABA services does not end at age 7. Intensive services continue to be essential to gain skills and mitigate future needs.

Hopefully this narrative has helped you to gain a glimpse into the daily life of a family who deals with the challenges of severe Autism. The bottom line is, Autism is

hard to handle. We need help getting qualified help for our children. I truly hope that we can count on your support for Autism insurance reform with NO age or dollar caps.

Thank You,

Crystal Joseph

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Mikey
Last Name : Kukahiwa-Haruno
Affiliation (optional) : Bayada
and Street Address : 2170 Jennie St
City/Town : Honolulu
Island : HAWAII
Email : mkukahiwaharuno@gmail.com

Message to legislators : I work as a skills trainer/paraprofessional in the school setting and have mostly dealt with children with ASD. For all my clients, they have always seen me as their helper and they seem to understand that. They appreciate the support they get from their skills trainer. Based off data, they seem to become better, academically, socially, and behaviorally. Most times, this is due to the support they receive from their skills trainer or other resources that help with their daily challenges and struggles. I've learned and used ABA strategies with my clients and in some way or another, there always seems to be a solution to help with their needs. I support this cause.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Michelle Cameron

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Michelle Bradley

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Michele Kuahine

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Melissa Hoyre

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am writing to you today to voice my strong support for SB791, which would extend insurance benefits to the thousand of families in Hawaii that are affected by Autism Spectrum Disorder. As a father with a 9 year old girl with ASD, my wife and I have first hand experience with the day to day challenges of raising and supporting a child with this disorder. The good news for families like us is that there have been tremendous scientific advances in the last 15 years in the areas of Speech Pathology, Applied Behavioral Analysis and Early Childhood Intervention that have had dramatically improved the outcomes of children with ASD. These medical breakthroughs have changed our lives and have given us hope that our daughter will someday be able to be an independent, happy and productive member of the community. The problem is that these therapies are prohibitively expensive for the average family.

In the case of my daughter Lily, who was diagnosed with ASD at age 6 but began childhood intervention at age 2, we have been paying out of pocket medical expenses averaging over \$20,000 a year for ABA services, speech

therapy, and extra tutoring on top of regular medical bills. The insurance plans for military families cover ABA and the clinics in Hawaii seem to cater cater exclusively to them and the wealthy people that can afford them. We know firsthand that the financial burden is tough to bear, but we do it because we have hope for a brighter future for our daughter. But we are at our limits financially and there are many other families who can't afford basic services at all. This bill would give our children at very least, access to the same services that other insurers are offering in Hawaii.

My family and I urge you to pass this bill. The difference that these services make in a child's life is remarkable. If you have any doubt, I urge you to come visit us and meet our daughter Lily. She will change your mind.

Thank you,

Michael D. Saines

133 Lumahai Street

Honolulu, HI 96825

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Michael Kormanik

Derrick K. Abe, O.D.

1441 Kapiolani Blvd., Suite #805

Honolulu, HI 96814

PH: (808) 946-6136

FAX: (808) 943-6236

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a small business owner in Hawaii, and I am writing to ask you to support SB791. As you know, children with autism in Hawaii currently aren't covered under most medical insurances.

I have been a small business owner for 11 years, and I understand the impact of high insurance premiums. However, I am also aware of the impact of autism on families in Hawaii, and there is simply no comparison between the struggles. Families with autism struggle daily – emotionally and financially – to provide for their children. Our state should act to relieve some of the financial burden on these families who did nothing to deserve their dire situations. The increase in cost that the insurance industry will pass on to small businesses is truly minuscule (0.2 percent, based on experience in other states) and is simply not a valid reason to turn our backs on children with autism.

Please support SB791. Not only does it make good fiscal sense for our state, it is morally and ethically the right thing to do.

Mahalo,



Derrick K. Abe, O.D

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Name : Melissa
Last Name : Kamber
Street Address : 600 queen st. apt. 3408
City/Town : honolulu
Island : oahu
Email Address : misty23m@yahoo.com
Company : Bayada
Position : substitute skills trainer/ supervisor

Tell us where you stand on the bill : I support autism insurance

Is there anything else you would like to share? : I have been working with children with special needs since 2008. I knew I would like this field when I volunteered in college for a program we had. It was nice bringing the kids together and watching them explore and grow their talents. Creating this environment for children brought so much growth in different areas. Over the years I have seen kids who were given little hope of speaking into having full conversations. I had worked with a girl for five years when I first met her everyone just felt sorry for her. Over the years she grew to be the first in her class in spelling. I didn't even have to give her spelling tests because she memorized her entire spelling list in order! Being able to help children has blessed my life in so many ways and I know that being able to give someone with special needs that one to one attention they need makes a huge lifelong impact on their lives.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Marla Bator

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Melissa

Last Name : Carley

Affiliation (optional) :

and Street Address : 3418 Ho'okipa

City/Town : kihei

Island : Maui

Email : maclifford3@yahoo.com

Message to legislators :

I work with children with these conditions; services are necessary beyond these cut off points.

I support removing the age cap.

I support removing the dollar cap.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Mele
Last Name : Stoner
Affiliation (optional) :
and Street Address : 1633 Pali Hwy
City/Town : Honolulu
Island : O'ahu
Email : melestoner@yahoo.com

Message to legislators : I support the intent of SB 791. I currently work in the field of special needs and have seen ABA impact and change individual lives. I have seen children who were unable to speak starting with eye contact to tell what they want, then to sounds, then to words, and then to phrases. Years down the road their language was at the same level as peers. I have also seen high problem behaviors like slamming their heads on the ground because they were unable to appropriately communicate their wants and needs with intensive behavior training this child can now speak and no longer uses Self Injurious Behaviors to attempt to get what they want.

Each child with autism is different. There is no cookie cutter definition. Each child is diagnosed and assessed by professionals who have been trained and are seeking the best for that child. Coverage limits deny the capabilities of ALL children receiving the appropriate intensity that is required.

BCBA are highly qualified in assessing the needs of children and have had education and training to become certified by the BACB.

Please vote in favor of the SB791.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

May Hoang

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Mary Sadler

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Marcela Bator

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Mark

Last Name : Martins

Affiliation (optional) :

and Street Address : Kahului

City/Town : Kahului

Island : Maui

Email : martinsmarc@hotmail.com

Message to legislators : I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Marissa Ayala
Behavioral Technician, Behavior Analysis No Ka Oi Inc.

Dear elected State Officials and Federal Officers of Hawai'i,

I, Marissa Ayala am writing this testimony in support of autism insurance coverage. This bill if passed will help families struggling with autism receive proper assistance through insurance to receive Applied Behavior Analysis (ABA) treatment.

I've received my bachelor's degree in Speech Pathology from California State University, Long Beach. Since my degree was in speech pathology and communicative disorders I naturally did not know too much about Autism, and especially not about ABA. I have been working with children with Autism Spectrum Disorders (ASD) for over two years now. I have learned so much about ABA and how it helps children, and I have seen it with my own eyes. I have also learned that ABA is the only empirically supported intervention for those with autism, which makes it that much more valuable. I have seen parents amazed to see the progress and vast improvements their children make from year to year receiving ABA services. In my experience the earlier a child receives services; the better chances are for successful treatment. That is the essence of why this bill is so important –to detect earlier onset, diagnosis, and treatment. Currently in Hawai'i only families through Tricare receive funding for ABA services. This should not be limited to only Tricare, but to all insurance holders of Hawai'i. Today one in every sixty-eight children are diagnosed with autism according to the Center for Disease Control and Prevention, and as that number rises more and more children will need intervention. The people and families of Hawai'i should have the right to proper treatment for children and young adults with autism.

In conclusion, I encourage you to support SB791..

Thank you for your consideration,

Marissa Ayala

Via email: meayalacsulb@yahoo.com

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Margart
Last Name : Aguiar
Affiliation (optional) :
and Street Address : Lahaina
City/Town : Lahaina
Island : Maui
Email : tma1301@gmail.com

Message to legislators : I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Lupe Chavez

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Dear Legislators,

I support the autism insurance bill. I worked with an ABA provider for a year as a Behavior Technician under several Behavior Analysts. I've seen firsthand the effectiveness of Applied Behavior Analysis. The positive changes that ABA can make in the life of a person with autism are priceless. Please take care of our keiki and our state and pass Autism Insurance reform.

Sincerely,

Mandy Stieb

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Mali

Last Name : Tsurudsto

Affiliation (optional) :

and Street Address : Wailuku

City/Town : Wailuku

Island : Maui

Email : Maiekona@gmail.com

Message to legislators : I support autism insurance.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Name : Magnolia
Last Name : Centeno
Street Address : 87365 Heleuma Street
City/Town : Waianae
Island : Oahu
Email Address : mcenteno74@gmail.com
Company : Bayada Habilitat
Position : Paraprofessional

Autism has greatly impacted my life. I am a paraprofessional that works with children and parents that are affected with autism. I believe that this bill will greatly support those with autism and their families.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Madea
Last Name : Owen
Affiliation (optional) :
and Street Address : 1027 Morris Lane
City/Town : Honolulu
Island : Oahu
Email : madea.d.owen@gmail.com

Message to legislators : I am in support of the intent of SB 791.. I have been working with children with disabilities for about four years. I have noticed a lack of services for children with Disabilities in Hawaii, and many children seem to "fall through the cracks". Many family's and parents cannot afford the services their children need. Providing coverage for autism treatment and treatment for other disabilities is most cost effective for families, the state, and our government. This is especially true with early intervention treatment which has good outcomes. Please Malama our Keiki and invest in the future of Hawaii and Hawaii's children.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

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415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Deserie Waipa

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

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415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Lesley Bailor

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

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I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Destin Cadelinia

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

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I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Lisa May Dominia

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Lindsey
Last Name : Shepherd
Affiliation (optional) :
and Street Address : PO Box 1284
City/Town : Lihue
Island : Kauai
Email : lshepherd@aptitudeservices.com

Message to legislators : My 52 year old cousin from California was diagnosed with moderate Autism as a child. His traits were similar to many of the children that I work with today, repetitive behaviors, delayed language, and frequent meltdowns. His parents were told that he could not receive adequate care living with them, so they relinquished their rights to him and he became a ward of the state. He was moved to a state facility where he was treated as if he had a mental illness. In recent years my cousin was able to receive aba services to help him develop self help skills and he is currently living in a group home with 4 other men. He is working with the assistance of an aide at a local grocery store.

Knowing the amount of progress he has made as an adult with minimal services it pains me to think of where he could be if he had been able to live at home with his parents and receive aba services as a child.

People are always citing that it will cost too much money to provide aba services to children, but I disagree. For my cousin the state still pays for his care. If they had invested in him as a child with research proven services he would be completely independent, I am sure of it. My cousin inspired me to get into the field and become a Board Certified Behavior Analyst. I have worked with several children who when given appropriate ABA services at a young age were able to join kindergarten with their typically developing peers. I have worked with several children who when given ABA services were able to stop engaging in dangerous and aggressive behavior. I have worked with several children who when given ABA services were able to make friends.

I would ask that you support families as they do their best to provide for their children with Autism and pass the Autism Insurance Bill.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Aloha,

I am writing this testimony to express my support in favor of Autism Insurance Reform. As a behavioral health professional for many years, I know first hand how necessary behavioral health services are for people with special needs. I have been trained in Applied Behavioral Analysis, and have actually applied these behavioral interventions and techniques in the field, with clients ranging from age 5 to 54 on Maui and Hawaii Island. Many people with special needs are able to vastly improve the quality of their lives from the support they receive from professionals in this field. As the client's quality of life improves, so does the lives of their families. I strongly support autism insurance reform with no age or dollar caps on services.

Sincerely,

Dr. Don "Kona" Powell

Don "Kona" Powell ND, M.Ed.

BAYADA Home Health Care | Habilitation Manager, Maui Behavioral Health

2200 Main Street, Suite 650 | Wailuku, HI 96793

Office 808-244-6879 | Fax 808-244-7575

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Liane
Last Name : Chu
Affiliation (optional) : Bayada
and Street Address : 45-357 Nakuluai St.
City/Town : Kaneohe
Island : Oahu
Email : liane_chu@yahoo.com

Message to legislators : I have been working with children, adolescents, and adults with Autism Spectrum Disorders for 10 years. In that short amount of time, I have seen first-hand how much the treatment of Autism has changed, and improved, as the practice of ABA (Applied Behavior Analysis) has become more wide-spread in Hawaii.

Research shows that ABA is a scientifically proven method of treating people with Autism. It does not cure Autism, as there is no cure for Autism, but ABA therapy improves the quality of life of people with Autism by teaching them how to replace inappropriate behaviors with functionally-equivalent appropriate behaviors and by teaching them communication, social, and functional skills in a systematic way.

I work in various settings as a BCBA (Board Certified Behavior Analyst). I work in several public schools under a DOE contract, and I also work in home and community settings under Tricare contracts. While the value of ABA in schools is tremendous, every child with Autism within the DOE system does not receive ABA therapy. As a parent of two children who have received special education services through the state, I can honestly say that acquiring and maintaining appropriate services for special needs children is often a difficult and sometimes heart-breaking task. What I have experienced through my work with Tricare contracts is access to ABA therapy for all children with Autism. Parents do not have to fight for services for their children; they receive what they need. Imagine how much better life would be for families if all children simply were given the services that they needed...

Even when ABA is provided in a public school setting, it is important to remember that the environment is so constrained that programs that are truly ABA-based are difficult and almost impossible to create and sustain. Teachers needs to integrate common core

curriculum, GLOs, state assessments, and alternate assessments into a daily schedule, leaving far too many ways for providers to have to stray from a true ABA-based program. What I have experienced under Tricare contracts are faster rates of acquisition and faster generalization of skills, often due to the ability of therapists to implement true ABA programs. Imagine how much faster and quicker children with Autism would progress if they all received ABA therapy through private insurance.

How can you deny children and their families the right to receive a scientifically proven method of treating Autism? How do you say "no" to a better quality of life to children who already have the odds stacked against them?



March 17, 2015

To: COMMITTEE ON HEALTH
Rep. Della Au Belatti, Chair
Rep. Richard P. Creagan, Vice Chair

From: Ron Brandvold, President & CEO

Re: **Support the Intent of SB 791/SD 1, RELATING TO AUTISM SPECTRUM DISORDERS
Hearing Scheduled for March 18, 2015 (8:45 am)**

For over 60 years, Easter Seals Hawaii has provided exceptional, individualized, family-centered services to empower infants, children, youth and adults with disabilities or special needs to achieve their goals and live independent fulfilling lives. Easter Seals Hawaii is a statewide CARF accredited organization with 15 facilities from Waimea, Kauai to Hilo, Hawaii providing a variety of programs including Autism Services. These services include Applied Behavior Analysis /Verbal Behavior-Based Therapy, Speech/Language Pathology, Assessment, Training, Education and Consultation. Easter Seals Hawaii strongly supports mandated coverage for services to individuals within the Autism Spectrum and therefore supports the intent of SB 791/SD 1 and offers the following recommendations:

1. Amend the Age and the Annual Maximum Benefit
To adequately address the needs of individuals within the Autism Spectrum, amend the mandated benefit age cap to provide medically necessary services through age 21 yrs. to encompass the EPSDT as well as the IDEA eligibility range.
2. Amend the mandated annual benefit cap to \$50,000 per year to ensure the effective support of those individuals needing intensive Applied Behavior Analysis at 30-40 hours a week.
3. Clarify certain matters to assure that care, treatment, intervention, or services **other than applied behavior analysis** are **not affected** by the maximum benefit amounts:
 - The definition of “treatment for autism” recognizes that care for an individual with autism may be ordered and provided by a variety of health care professionals – e.g. licensed psychologists, licensed psychiatrists, licensed clinical social workers, etc. The care ordered may include, but is not limited to, “behavioral health treatment.”
 - The definition of “behavioral health treatment” speaks to evidence based counseling and treatment and includes “applied behavior analysis.” However, that same definition indicates that behavioral health treatment of whatever kind must be provided or supervised by an “autism service provider.”
 - The definition of “autism service provider” indicates the provider (a person, entity or group) must have education and training in applied behavior analysis and meet licensing requirements. Therefore, is behavioral health treatment or care other than applied behavior analysis covered by the maximum benefit amount?
4. Creation of the Process for Licensure
Without the provisions for licensure, access to BCBA's and therefore services will continue to be severely constricted. Easter Seals Hawaii is aware of and supports other proposed legislation related to licensure (SB40/SD3) welcomes the opportunity to work with this Committee and other community stakeholders to address this issue.

Thank you for the opportunity to present these comments.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Lauren Baniqued

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

My husband and I strongly support passage of autism insurance reform SB791 which will provide insurance coverage for services for children on the autism spectrum which are not currently covered.

We have a son diagnosed with autism. He is a preschooler and is in special education classes. His diagnosis makes things that many parents take for granted much more difficult--little things like answering to his name, going to the bathroom, feeding himself, playing with another child, saying someone's name, or even hugging his grandparents. We cannot even begin to describe the tantrums, dangerous behavior like running into the road, or bouts of head-banging that we have gone through. Like many parents, we have been through a whole battery of medical professionals, different therapies, and school Individualized Education Programs since he was 2 years old. We are completely exhausted!

In 2013 we started him at an autism clinic where his primary services are in Applied Behavioral Analysis. Since then he has shown slow but steady progress. He now says thank you at times, can answer a question and look at the other person, and even go to the bathroom with minimal help. Recently, he even told us he has a friend, and the friend's name. For parents who feared for his well-being--even just his being able to go to the bathroom safely--these things are more than progress points. They are small miracles. These are some of the things that Applied Behavior Analysis has done for him. This particular clinic has even reached out to his school to integrate his treatment.

We understand that Applied Behavior Analysis can result in improved behavior which should transfer into adulthood. These services run about \$1,200+ per month, not an insignificant sum for us. We are blessed to be in a special pilot program right now with our private insurance, but if that pilot ends or there is the smallest change in employment for us, we would be unable to cover the entire cost. We have older parents we help care for as well.

Children on the autism spectrum can become a huge drain on families, society, and themselves when they become adults. However if provided appropriate services as children, they can lead productive lives

as adults. There is that saying "It is much easier to build a child, than fix an adult!"

We urge you to pass Bill SB 791 so that children on the autism spectrum can get what they need the most – a chance in life.

Thank you.

Aloha,

L. Wolfe

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Dear Representatives Belatti, Creagan, and Members of the Committee,
Thank you for the opportunity to submit testimony supporting autism insurance reform which would mandate health insurers to fund treatments for individuals on the autism spectrum. I am a Licensed Clinical Social Worker with more than 10 years of experience working with individuals with developmental disabilities. I am currently the Director for BAYADA Habilitation on the island of Maui.

I have lived in Hawaii for 8 years and have met and worked with over 100 of individuals with autism in Hawaii. During my experience working in the schools, homes and clinics I have experienced firsthand the positive outcomes of Applied Behavior Analysis. People can tell you over and over again that ABA is effective, it's evidence-based, it's the only treatment recommended by the Surgeon General etc. but until you actually see a child start maintaining eye-contact or start speaking for the first time, you will not fully understand the impact this bill will make for Hawaii. The impact will not only effect families but also the community.

As a professional and as a community member, I humbly ask for your support.

Thank you

Eliza Lipp, LCSW

BAYADA Home Health Care and Habilitation | Director – Maui Habilitation (MAB)

2200 Main Street, Suite 650 | Wailuku, Hawaii, 96793

Telephone: 808-244-6879 | Fax: 808-244-7575

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Kendra Singletary

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Kristian

Last Name : Canne

Affiliation (optional) :

and Street Address : 91-1093 Namahoe St. #5E

City/Town : Kapolei

Island : Oahu

Email : kristian.canne@yahoo.com

Message to legislators : I am in support of the intent of SB 791, and think it is long overdue. To pay for services out-of-pocket puts such a strain on families. I know this because a family member of mine was diagnosed with autism, and finding affordable therapy for him was a struggle.

I also work with children who have been diagnosed with autism and can attest to the positive developments, learning, and progress that our kids make with ABA therapy. If services were made more widely available, I believe that more kids would be able to access therapy and not be left behind because of not being able to afford to learn.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Kevin

Last Name : Abella

Affiliation (optional) :

and Street Address : 661 ILIAINA STREET

City/Town : KAILUA

Island : OAHU

Email : kevinabella04@gmail.com

Message to legislators :

Not only as a professional but most importantly as a family member of multiple individuals on the autism spectrum, we should not be limiting the services these individuals receive by placing an age cap or a dollar cap on the support they deserve. To say that all individuals with autism should stop receiving support in therapy at a specific age is shocking to me. We should be supporting the Ohana that continue to fight and push through such a unique disorder. Other states in the US have supported their community and have seen promising results in therapy and even allowed parents the peace of mind knowing that they are capable of helping their child. We have an opportunity to help such a unique population, let's not continue to push such an important issue to the side. Let's make a difference now.

I support removing the age cap.

I support removing the dollar cap.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First off, I wanted to thank you for your time to read my testimony in regards to SB791 which would mandate health insurers to fund treatments for individuals on the autism spectrum. I am a Students Services Coordinator (SSC) with the Hawaii Department of Education. Prior to being an SSC, I was a special education teacher. I have an undergraduate degree in Psychology and a Graduate degree in Early Childhood Special Education. I have been with the Hawaii Department of Education for five years at Honowai Elementary School.

In my five years with the Hawaii Department of Education, I have dealt with a wide range of disabilities. By far, the most challenging students I worked with were the students with autism. When I began with the Hawaii Department of Education, I was a new teacher with not a lot of experience working with kids with autism. I taught preschool and students can begin preschool services at the age of three. An evaluation would be given and on their third birthday, they show up in my classroom. Teachers are not given a manual on how to make every child reach his/her potential but I tried my best with each child. As hard as I worked with my students with autism, I never felt like it was enough. I attended trainings and read some books on autism, but I always felt like my students could learn more. It wasn't until about a year ago that I started working a second job in the field of Applied Behavior Analysis (ABA) that I felt like I could really help students that are on the autism spectrum. The gains I have seen in kids that have been receiving ABA are tremendous compared to the students at my school that do not receive any ABA treatment. Now that I am an SSC, I don't work with kids at Honowai but I do supervise special education classrooms. Our preschool has added 7 students in the past year that are on the autism spectrum. None of the kids at my school have Tricare insurance (the only insurance that covers treatment in ABA), therefore none of those students receive or have received ABA. I see the similarities in the students at my school and the ones I work with at my second job in ABA, and it worries me that these kids are not getting the treatment they need to be able to learn to their potential. The kids that receive ABA have such remarkable gains in their academics, social, motor, speech and other skills. The kids that don't receive ABA services are not making the same gains that I know would be possible if they were receiving the correct treatment.

Please consider supporting SB791 to ensure that ALL kids with autism have the opportunity to learn to their potential. Thank you for your time.

Sincerely,

Elizabeth Smith

SSC at Honowai Elementary

Smittin25@msn.com

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Kenneth Kochersperler

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Eileen K. Tan

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Kenneth

Last Name : Ballard

Affiliation (optional) :

and Street Address : 827 Kinau St. Apt. 805

City/Town : Honolulu

Island : Oah

Email : kballard215@gmail.com

Message to legislators : I support insurance companies covering ABA services for individuals with autism spectrum disorder

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Josh Rand



3/18/15
COMMITTEE ON HEALTH
Representative Della Au Belatti, Chair
Representative Richard P. Creagan, Vice Chair

Conference Room 329
Hawaii State Capitol
415 South Beretania Street

Honorable Representative Belatti, Vice-Chair Creagan, and Committee Members,

Children with Autism have been a part of my life for the past 15 years. I worked as a Skills Trainer for a little boy with Autism and never looked back. I have worked in several disciplines as a Special Education Teaching Assistant to Developmental Specialist to a Behavior Analyst. I have always been passionate about improving the lives of children, particularly those with disabilities but it wasn't until I studied Behavior Analysis that I had the skills to help make significant and long lasting changes in children's lives. Applied Behavior Analysis (ABA) has given me the skills to teach children to become part of the world around them, to find the joy and happiness they deserve, and allow them to be live a life with as much independence as they can.

Now that myself, and a lot of other talented Behavior Analysts, have the skills and knowledge to teach children who are difficult to teach, not having the resources to do so is devastating. Insurance companies not covering effective treatment is detrimental to children's quality of life but also drastically affects the amount of resources that will be required to care for these children in the future without independent skills. Bills HB 1108 and SB 791 will give my children the chance to get evidence based treatment that is effective. Children with Autism deserve the chance to succeed and in my experience they need Applied Behavior Analysis to do so.

Thank you for your time and for hearing my point of view of why you should amend SB 791

Respectfully,

Kelly Deacon, BCaBA



Autism Behavior Consulting Group, Inc. / ABC Group
PO Box 1162, Waiialua, Hawaii 96791-1162
Phone: 808-277-7736 Fax 808-748-0202
E-mail: info@autismbehaviorconsulting.com
www.AutismBehaviorConsulting.com

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vs: 10/2012

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Eugenia

Last Name : Whittenburg

Affiliation (optional) : parent

and Street Address : 412 Austin Rd

City/Town : Honolulu

Island : Oahu

Email : eawhittenburg@gmail.com

Message to legislators : I am the parent of an 19 year old son with Autism. I am very lucky to have had the access to covered benefits that many families are denied. My son has gone from a completely non verbal 3 year old to a high functioning adult about to graduate from high school with a full diploma. With out OT, PT, and ABA I'm sacred to think of where we might be today. You can pay for services for these kids as they grow up, or care for them the rest of their lives. These services do make a difference.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Kaumi

Last Name : Fukumuro

Affiliation (optional) :

and Street Address : 223 Saratoga rd,

City/Town : Honolulu

Island : Oahu

Email : happyroom3@gmail.com

Message to legislators :

I support Autism kids.

I support removing the age cap.

I support removing the dollar cap.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Dear Senators,

My name is Kathryn Larson and I am writing in support of SB791 which would mandate insurance coverage for autism spectrum disorders. I have been working with individuals with autism using ABA (Applied Behavior Analysis) for over 10 years and have been a BCBA for the past 4 of those years. I have worked in multiple settings, primarily in Connecticut and Virginia and moved to Hawaii during 2014.

During my time working with individuals with autism I have worked with children and adolescents between the ages of 16 months and 16 years, though the effectiveness of ABA goes far beyond those ages all the way through the lifespan. Decades worth of studies have shown the effectiveness of ABA with individuals with autism, and I have had the privilege of witnessing this effectiveness first hand. In addition, I have witnessed the vastly different outcomes in states where children have more access to ABA as compared to states where access is limited. When I moved from Connecticut to Virginia in 2008, I was shocked by how few individuals were able to access ABA services and how much more limited the services were. Both states have since enacted legislation mandating autism coverage. Hawaii should be next.

I have had the privilege to work with young children who were nonverbal or minimally verbal and were able to become indistinguishable from their peers. Though this is an ideal scenario it is possible for a number of children with autism assuming they have access to the appropriate services, in particular ABA. Even outside of the ideal progress made by individuals is striking. ABA can make it possible for an adolescent to have their first conversation, can teach an adult important job skills, and enable an individual to sit down and eat a nutritious meal when previously their diet was severely restricted. These are just a very few examples of things which are possible with adequate services.

ABA is an individualized therapy, tailored to the specific needs of each individual with the ultimate goal of increasing independence as much as possible. This means that accessing ABA services now will reduce the individuals need for services, often more costly services, in the future. It also means that the individual will have more to offer their community throughout their life. As more and more individuals are diagnosed with autism spectrum

disorders each year, it is imperative that they receive the necessary services now to help prevent over burdening the community services available in the future.

Research supporting ABA with individuals with autism has been amassing for decades and continues to show the same result, that ABA is effective for individuals with autism of all ages. Time and time again, ABA has been ruled to be medically necessary. It is endorsed by the US Surgeon General, the American Academy of Pediatrics, and numerous other related organizations. In addition to this, the Behavior Analyst Certification Board ensures that those with the BCBA-D, BCBA, BCaBA, and now RBT credentials are rigorously trained with continually increasing requirements to obtain and maintain certification. These requirements include not only obtaining the necessary knowledge on ABA and demonstration of that knowledge on a difficult exam, but includes hours' worth of supervised experience to ensure providers can successfully implement that knowledge. Only those at the masters level or higher are able to provide services without continual supervision which ensures consistent and appropriate services are being provided.

Currently I work solely with military families, due to their insurance providing ABA coverage. I feel this is unfair to the local community. It is my sincere hope that in the near future ALL children in Hawaii will have equal access to these necessary services, and passing this bill would be the first step.

Sincerely,

Kathryn Larson, MA, BCBA

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Aloha! We are living in an age of epidemic. Autism is estimated to affect 1 in 68 children. These children experience a number of severe challenges in their everyday life, to the point of relying on multiple family and community members for assistance for the simplest tasks, every single day of their lives.

Having personally spent 7+ years working with children with special needs, I have witnessed the toll it takes on families first-hand. Their inspiring courage is more that can ever be measured. By providing therapy, especially at a young age, we can help ease that burden on both families and society.

Autism is not the only epidemic that plagues the people of Hawaii. There are thousands and thousands of people currently living at or below the poverty line, many who work multiple jobs and make minimum wage. Couple that with the cost of living in Hawaii being one of the highest in the world, and a majority of families, even middle to upper class families, simply cannot afford to pay for their child's services.

Yet these same families, each and every one of them, deserve to be able to give their children the help that they need. They deserve the opportunity to give their son or daughter a chance at life. The families of Hawaii need our help now more than ever.

The children are our future. Encouraging their development should be our priority. That is why I write in support of autism insurance coverage, SB791. It is my hope that Hawaii joins in with the 38 other states that have already taken that step to provide their children a brighter future.

Mahalo,

Geoffrey Sato

Dream Float Hawaii, LLC

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Kate
Last Name : Disney
Affiliation (optional) :
and Street Address : 2847 Kanaku St
City/Town : wahiawa
Island : Oahu
Email : katemdisney@gmail.com

Message to legislators : I am the mother of two sons; and one of them, Jake, has Autism. We began receiving care from our BCBAs while living in Kentucky when he was 3.5 years old. Prior to receiving services, Jake spoke 3-5 words, could not transition through his daily activities without tantrums and was frustrated much of his day because he could not communicate his needs. Within 6 months, Jake could speak to us and tell us what he wanted, answer basic yes/no questions, could transition to and from activities better and began potty training. He was receiving between 15-25 hours of ABA per week, both center-based and home-based; and the tools we were taught by his BCBAs were invaluable for Jake and our entire family's happiness.

Is there anything else you would like to share? : Our move to Hawaii challenged us with access to quality care, but since we are Tricare beneficiaries we at least had access to services. Losing ABA services would mean a detrimental impact on his progress. Schools are ill-equipped to analyze, plan and implement the type of care, therapy or education needed for children like Jake. By denying coverage for ABA services by trained professionals for the Keiki of Hawaii, you are sentencing them to continued frustration and desperation for them and their families.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

My name is Kailey Reyes and I am a professional who works with children and families affected by autism. I'm writing to show my support for autism insurance reform/Lukes Law. I'm looking forward to seeing Hawaii join the other 38 states in providing insurance coverage for families impacted by autism.

I have lived in Hawaii all of my life. In 2002, I received my Bachelors in Elementary Education, after working in the classroom for a year, I decided to make a shift in my career. I was immediately drawn to working with individuals diagnosed with autism. I worked as a direct service worker for 7 years before taking an office position as a client services manager. I've always had a passion for helping children and adults succeed in their neighborhood schools, local communities and home settings. My experience in the field and now currently working directly with scheduling and staffing these individuals in need of services has made me aware of how important these services are. I've witnessed and been directly involved in successful program implementation to decrease behaviors and dependence, creating a better quality of life for the individuals I worked with. ABA has played a major role in program implementation with most of the clients I have worked with. Studies show that ABA really makes a positive impact on the lives of individuals diagnosed with autism and their families.

I appreciate your time,

Kailey Reyes

BAYADA Home Health Care - Habilitation MAB, Client Services Manager

2200 Main Street, Suite 650 Wailuku, HI 96793

Office 808-244-6879 | Fax: 808-244-7575

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Jasmine Buck

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 17, 2015 6:30 PM
To: HLTtestimony
Cc: joshuaperallon000@gmail.com
Subject: Submitted testimony for SB791 on Mar 18, 2015 08:45AM

SB791

Submitted on: 3/17/2015

Testimony for HLT on Mar 18, 2015 08:45AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Joshua Perallon	Individual	Support	Yes

Comments: I would like to submit my testimony in support of SB791. I would like to see this measure passed because it would benefits autistic children going forward. As a borderline autistic child myself, I wish that this measure was in place when I was a child. Kno wing what I know now, I fully understand why my mom child abused me when I was ten years old because the services that I received in my childhood only lasted until I was nine years old. Furthermore, I would like to see an amendment added so that the age could be extended until at the very least 18 years old, so that no autistic children goes through what I went through when I was an autistic child myself. Thank you very much.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Gina

Last Name : Martino

Affiliation (optional) :

and Street Address : 827 Kinau St. Apt. 805

City/Town : Honolulu

Island : Oahu

Email : gina_martino@hotmail.com

Message to legislators : I think it is imperative that individuals diagnosed with ASD, regardless of age, have the necessary treatment options available to them. I am in support of insurance companies covering ABA services for individuals diagnosed with autism spectrum disorder.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

My name is Joshua Levine and I am a Board Certified Behavior Analyst practicing applied behavior analysis (ABA) in the state of Hawaii. The legislation addressing autism insurance coverage is of high importance to me because it will help ensure all families affected by Autism Spectrum Disorder (ASD) in Hawaii have equal access to ABA services.

Research has shown that ABA-based interventions are effective in reducing problem behaviors and increasing appropriate skills for individuals with intellectual disabilities (ID), autism and related disorders. Noteworthy reviews include ones conducted by the Agency for Healthcare Research and Quality which found evidence to support the effectiveness of ABA-based interventions¹. The American Academy of Pediatrics endorsed intensive behavioral interventions as having Level 1 (Best Support) among psychosocial interventions for autism². The Rand Corporation study, Nonmedical Interventions for Children with ASD, also endorses ABA as effective with moderate support, with no studies to date categorized as having strong support based on the study's criteria³. The National Standards Report issued a comprehensive manual assessing the level of evidence for treatments available for individuals with autism, and found that treatments from the behavioral literature (ABA) have the strongest research support at this time⁴. The Centers for Disease Control (CDC) lists ABA as a widely accepted notable treatment that can be combined with occupational therapy, speech therapy, Sensory Integration Approaches and Diet to improve outcomes.

It is significant that thirty-seven states and the District of Columbia have laws that mandate commercial insurers to cover treatments or offer coverage for ASD either through specific or limited coverage requirements or mental health parity. At least 37 states-Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, Florida, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Massachusetts, Michigan, Minnesota, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, Oregon, Pennsylvania, Rhode Island, South Carolina, Texas, Utah, Vermont, Virginia, West Virginia and Wisconsin-specifically require insurers to provide coverage for the treatment of autism. Although there are variations in specific terms of these requirements, most limit

coverage to treatments and/or care that is deemed medically necessary and, despite differences in language, all require ASD coverage to include some level of ABA coverage.

I ask that you support autism insurance coverage.. In supporting this bill families affected by ASD in Hawaii will receive the needed health coverage for ABA services. All children should have the opportunity to lead the most independent, fulfilling lives possible. I believe that in supporting this bill you will positively impact the lives of countless children and families affected by ASD.

Thank you for your consideration of my viewpoint on this matter.

Sincerely,

Joshua Levine, Ph.D., BCBA
41-838 Mahiku Place
Waimanalo, HI, 96795
808-258-2375
JoshuaLevine9@gmail.com

1 Warren, Z., McPheeters, M. L., Sathe, N., Foss-Feig, J. H., Glasser, A., & Veenstra-VanderWeele, J. (2011). A systematic review of early intensive intervention for autism spectrum disorders. *Pediatrics*, 127, e1303-e1311.

2 American Academy of Pediatrics (2010). Appendix S2: Evidence-based child and adolescent psychosocial interventions, *Pediatrics*, 125, S128.

3 Maglione, M. A., Gans, D., Das, L., Timbie, J., & Kasari, C. (2012). Nonmedical interventions for children with ASD: Recommended Guidelines and further research needs. *Pediatrics*, 130, S 169-78.

4 Wilczynski, S., Green, G., Ricciardi, J., Boyd, B., Hume, A., Ladd, M., Ladd, M., Odom, S., & Rue, H. (2009). National Standards Report: The national standards project-addressing the need for evidence-based practice guidelines for autism spectrum disorders.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Dear Hawaii State Legislators:

I offer a different perspective in support of the passage of SB791. I am the mother of a 44 year old Down's Syndrome, the grandmother of a 13 year old nonverbal autistic grandson with sensory issues, social issues as well as a myriad of other issues and the daughter of a 95 year old mother with Alzheimer's.

I share this with you because I think you understand Down's Syndrome and Alzheimer's but I don't think you understand autism. So let me share, through experience, as someone who helps care for our autistic grandson, that caring for him is like caring for a very Autistic Down's Syndrome requiring the same kind of patience needed to care for a geriatric with Alzheimer's. It is difficult taking him into the community. It is difficult leaving him at home because he requires 24-hour adult supervision. Family life becomes very difficult.

Autism is a spectrum disorder. It varies in severity and is inconceivably individualized presenting a wide range of issues. Not every person with autism will require additional help and there are many who can be placed within the DOE system and thrive. But there are also those like my grandson who had to be taught "the pre-requisites to learning" and who would never be able to do this in a "group setting". These autistic individuals are those who need to attend a "private school" to learn the basics because only after a child learns the basics – including but not limited to socialization, focus, feelings, confidence -- can he or she move forward. His social interaction requires trust and without his trust you will never reach first base. It's a deliberate sequence that requires ABA.

The autism logo is "a puzzle piece" because autism is puzzling. Parents of autistic individuals need help putting the pieces together so they can see the big picture. You can only help that which you understand. This can only be done through ABA. They hold the expertise. I know this because we have tried it and have experienced the results. The financial investment for a family of average means spells hardship, painful decisions and extreme sacrifices. It's going to take a community.

Glenna K. Arakaki

Aiea, Hawaii 96701

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : James

Last Name : Panetta

Affiliation (optional) :

and Street Address : 589 Kawaiiloa Rd

City/Town : Kailua

Island : Oahu

Email : jdpanetta@yahoo.com

Message to legislators :

I support autism insurance reform.

I support removing the age cap.

I support removing the dollar cap.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Janine

Last Name : Horhager

Affiliation (optional) :

and Street Address : Po box 880842

City/Town : Pukalani

Island : Maui

Email : horrasjanine2@gmail.com

Message to legislators : To whom it may concern,

I have chosen to work with children that are afflicted by ASD and from personal knowledge of how early diagnosis and early intervention can be life changing for some people that have ASD there are the others that fall on the spectrum that have more serious developmental problems that will forever leave a legacy on their abilities . They may need medical funding for further care as they get older , it seems unfair to put a cap on a persons need for help . What are we to do for our citizens that age out of the system and obviously need help to live their daily existence ? We live in Hawaii and we have always lived by taking care of our ohana . I implore our senators and congressmen to not put an age cap on insurance . Thank you .

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Elizabeth Vazquez

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

We are asking your support in the passage of SB791, which would provide much-needed additional insurance coverage for those having been diagnosed as falling within the autism spectrum.

We are parents of a 13-year-old boy who was diagnosed with autism at the age of 2 ½ and shortly thereafter attended the DOE special education preschool program. He continued his education in the public school special education programs through his 7th grade year. This 8th grade year, he is being home schooled. Let me share that throughout his years in the public school system our son's autism required the assignment of a Para-professional (aka skills trainer) who guided him throughout his school day.

However, over the past 10 years, we have had to look for ways to supplement the programs he received from the Hawaii Department of Education as they could never meet the individualized and intense program standards he required and educators fell short in autism expertise. Through weekly private pay speech and occupational therapies, we discovered Applied Behavior Analysis (ABA). We had finally found a qualified group of specialists who were able to create, deliver and support the intense, individualized, one-to-one program our son required. Through ABA our son had to be taught to focus. He had to be taught to try different foods. He had to be taught to

socialize. He had to be taught to give us eye contact. He had to be taught to speak. We have experienced the results of privately-paid ABA as we are now able to see our son sit at a table and do his studies. We see social interaction. We see the development of eye contact. We see him try new foods. Through ABA we also learned how to help him overcome bad behaviors and develop new positive behaviors. Through ABA we are managing the complexities of an autistic teenager. Through ABA, we know that there is hope and a future. But ABA came at a cost – financial hardship. The sacrifice of living on one income in order that the other parent could learn to manage our autistic son all while covering the costs of private-pay ABA drained our savings. We have a younger daughter to raise as well and we know we are not alone in our story. The passing of SB791 will benefit families of children on the spectrum. It will benefit the community because even autistic children will someday be adults who, having been provided the necessary supports and opportunities, will become contributing members to their families and to society.

Thank you.

Jeffrey Nakama Erin Nakama

Aiea, HI 96701 Aiea, HI 96701

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

Name : Jennie

Last Name : Immanuel

Street Address : 1329 Kilauea Avenue, Ste 60

City/Town : Hilo

Island : Hawaii

Email Address : jimmanuel@bayada.com

Company : BAYADA

Position : Associate Director

Tell us where you stand on the bill: I support the autism insurance bill. The need for autism services and support is greatly needed here on the Big Island. Passing the autism insurance bill will be a great help for those individuals striving for better care in their lives.

Is there anything else you would like to share?

I support removing the age cap.

I support removing the dollar cap.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

First Name : Jeremy

Last Name : Castillo

Affiliation (optional) :

and Street Address : 45-1024A Kamehameha Highway

City/Town : Kaneohe

Island : Oahu

Email : jeremycastillo@gmail.com

Message to legislators :

I'm surprised and saddened that Hawaii already doesn't protect the autistic community. Maybe it's because they don't build high rises or giant monorails or expensive oceanfront property.

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Gina Davidson

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Jonathan Bailor

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Jordan Aceves-Foster

3/18/15

COMMITTEE ON HEALTH

Representative Della Au Belatti, Chair

Representative Richard P. Creagan, Vice Chair

Conference Room 329

Hawaii State Capitol

415 South Beretania Street

I am a local resident in Hawai'i and I support children with autism. I support autism insurance campaigns in Hawai'i.

Joseph Ginapp