

MIPCT Opening Remarks

- **New model for webinars this year - we will follow each webinar with a conference call for discussion.**
- **This is similar to the teaching and learning strategy of lecture followed by recitation session.**
- **Follow up conference call on February 21, 2014, at 10 am.**

Autism and the medical home

Presenter name

Jane Turner, MD

Webinar date January 24, 2014

Jane Turner, MD

- **Professor, Pediatrics and Human Development, Michigan State**
- **Assistant Medical Director, Office of Medical Affairs, Michigan Department of Community Health**
 - **Chief Medical Consultant for Children's Special Health Care Services**
- **Member of the Governor's Autism Council**
 - **Co-chair of Early Identification Subcommittee**

Objectives

- **At the conclusion of this webinar, participants will be able to:**
 - Tell a friend what the term autism means
 - Describe the systems of care that are emerging for children/youth with autism
 - Help their practice meet their responsibilities as a medical home for children/youth with autism

What is autism?

- **Neurodevelopmental disability**
 - **Impairments in social interactions, communication and presence of repetitive, restricted behaviors/interests**
- **Current estimate of prevalence = 1/88 children**
- **Much more common in boys (4:1 boys:girls)**

Video from Kennedy Krieger

- <http://www.kennedykrieger.org/patient-care/patient-care-centers/center-autism-and-related-disorders/outreach-training/early-signs-of-autism-video-tutorial>

What are the treatments?

- **Applied Behavior Therapy**
 - **ABA = Applied Behavior Analysis**
- Speech Therapy
- Occupational Therapy
- Peer interaction
- Skill Development
- Psychotropic medications help with some behaviors in some children/youth

What's new in services for families with commercial health insurance?

- **Autism insurance reform – October 2012**
 - Michigan based commercial insurance **must** cover services for autism.
 - Insurance company is reimbursed by the state
 - Birth through 18 years
 - Many, many companies are not subject to the mandate (i.e. self funded; out of state).
 - Each insurance company decides on the process for diagnosis.

What's new in services for children covered by Medicaid or MiChild?

- **Medicaid benefit launched April 2013**
- **Covers intensive therapy including Applied Behavior Analysis for children 18 to 72 months (until their 6th birthday)**
- **Evaluation, diagnosis and treatment provided by the Community Mental Health/PIHP system**
- **Children/youth 6 years and older can receive services from CMH but not intensive ABA**

What does this mean for children?

- **175-200 children/youth with autism are receiving services covered by commercial insurance thanks to the legislative mandate.**
- **360 + children 18 to 72 months covered by Medicaid/MiChild are receiving ABA and other services.**
- **The number of Certified Behavior Analysts in Michigan has more than doubled in last 18 months.**

Services in the educational system

- **Early On and Early Childhood Special Education serves children with developmental disabilities including children with autism**
- **Older children receive special education services in the classroom and/or in special programs**

What are the needs?

- **Early identification and rapid turnaround on assessment to facilitate early engagement in treatment.**
- **Assistance to families and professionals navigate complex and changing systems of care**
- **A system with no gaps**

Responsibilities of the medical home

- Identify
- Refer
- Coordinate
- Manage health issues

Identify - Screening

- **Screen – AAP Bright Futures:**
 - M-CHAT at 18 and 24 months
 - ASQ or PEDS at 9, 18, and 30 (or 24 months)
- **Older children if there is concern:**
 - SCQ (Social Communication Questionnaire for 4 years and older)

Identify - Surveillance

- **Recognize “red flags”**
 - **No babbling or gestures by 12 months**
 - **No single words by 16 months**
 - **No two word phrases by 24 months**
 - **Loss of language skills at any age**
- **Parent or other care giver is concerned**
- **Sibling with autism**

When to refer

- “fails” the M-CHAT
 - More specific if follow up interview completed
- Child exhibits “red flags”
- Parent has a concern
- Someone else has a concern (i.e. child care)

Where to refer?

- **Hearing evaluation**
- **Educational system – Early On or Early Childhood Special Education**
- **Diagnostic evaluation**
 - **Medicaid/MiChild: Community Mental Health**
 - **Commercial insurance: it depends.....**

Educational system

- Early On for 0 to 36 months
 - Call 1 800 Early On
 - <https://1800earlyon.org/>
- Intermediate school district or local school district for 36 months and older

Note: Early On/Project Find no longer manages referrals for children older than 36 months. Project Find referral line 1 800 252 0052 is NO LONGER in operation.

Diagnostic evaluation:

Medicaid/MiChild - up to 6 years age

- **Refer to the Community Mental Health/PIHP in your region:**
 - <http://www.michigan.gov/autism>
 - http://www.michigan.gov/autism/0,4848,7-294-63682_66069---,00.html for a map of counties with contact information for each county.

Diagnostic evaluation

Medicaid/MiChild - 6 years and older

- **Refer to the Community Mental Health/PIHP in your region:**
 - <http://www.michigan.gov/autism>
 - http://www.michigan.gov/autism/0,4848,7-294-63682_66069---,00.html
 - **Does not open the door to ABA**
- **Refer to local mental health provider on contract with the child's Medicaid Health Plan**

Diagnostic evaluation: Commercial insurance

- **A GUIDE for FAMILIES** – *see attachments*
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- **FIRST STEP**: Call the number on the insurance card. Immediately ask to be connected to the behavioral health/mental health/substance abuse division of the company (these are the only individuals trained to respond to autism issues).
- My doctor told me my child may have autism and that our health insurance may cover services for children with autism. Can you give me information about what is covered for autism or connect me to someone who knows about your autism benefit?

Coordination

- This is what care managers do so well.
- Pave the way for mental health referrals – make sure the provider is accepting referrals and is a good fit for the family.
- Follow up on referrals – make sure the family gets there and gets what they need.
- Communicate with all professionals involved.
- Arrange team conferences if possible.

Other services/resources

- **Speech and occupational therapy may be available to children who do not have an autism specific benefit.**
- **Learn who provides these services in your area and who has developed expertise in autism.**
- **Don't forget community services, respite and recreation.**

Responsibilities of the medical home

- **Routine health maintenance**
- **Anticipatory guidance**
- **Recognize co-morbid conditions such as seizures, ADHD, constipation**
- **Help family with common problems like restricted diet and sleep disturbance**
- **Manage acute illnesses**
- **Emotional and social support**

Psychotropic medications

- Many children and youth with autism benefit from psychotropic medications
- Medications do not treat the autism but help manage some symptoms and behaviors
 - Stimulants for problems with attention
 - Atypical antipsychotics (risperidone) for meltdowns and aggressive behavior
 - Clonidine for mood and sleep issues

Role of the medical home

- Identify
- Refer
- **Coordinate care**
- Manage primary care health needs

Intensive coordination of care between mental health providers, school professionals and family members can improve the quality of life for a child tremendously.

Summary:

- **At this point, I hope you can:**
 - Tell a friend what the term autism means
 - Describe the systems of care that are emerging for children/youth with autism
 - Help your practice meet its responsibilities as a medical home for children/youth with autism

Next Webinar: February 21@ 10 am

- **Autism discussion**
- **Come prepared to share experiences.**
- **What has worked for you in your practice?**
- **What barriers have you encountered?**

Questions for (Name of presenter)

- **At this time we will unmute those with raised hands to provide an opportunity to ask (presenter name) questions.**