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Minnesota receives federal approval for new autism benefit

Benefit focuses on early intervention for children with autism spectrum disorder

Minnesota will soon provide early intensive intervention for children and young adults with autism spectrum disorder. The Centers for Medicare and Medicaid Services recently approved the Minnesota Department of Human Service's Early Intensive Developmental and Behavioral Intervention benefit, which is a significant move for the state.

Autism spectrum disorder, with its complex symptoms and treatments, is an increasingly prevalent diagnosis. While Minnesota has provided supports in the past for children with autism spectrum disorder under Medical Assistance, the state's Medicaid program, it has not offered a medically necessary intensive intervention benefit with early intervention services believed to be critical for children on the autism spectrum.

"Evidence shows that the earlier the intervention, the greater possibility for success," said Human Services Commissioner Lucinda Jesson. "Currently in Minnesota, the average age of diagnosis is 4 years and up. We are excited to see this benefit move forward because it means we can get children, young adults and their families the help they need earlier so they have their best chance to thrive."

Under the new benefit, covered services will be designed to improve social interaction, communication and behavioral regulation skills at a critical time in development, promoting fuller participation by children in their family, schools and community life. Over time, services are expected to reduce the need for institutional placement and intensive interventions, and promote successful integration into adulthood.

Development of the benefit began following 2013 legislation that provided funding for early intervention services for autism spectrum disorder. Over many months, DHS gathered extensive input from the broad and diverse community of Minnesota autism stakeholders, as well as consulted with local and national experts in the field to define the benefit before seeking federal approval. DHS worked closely with the Centers for Medicare and Medicaid Services and the autism stakeholder community to further refine the benefit.

Roll out is anticipated to begin summer 2015. In the first year, the benefit will serve an estimated 325 individuals with autism spectrum disorders and related conditions from birth to age 21 who meet medical necessity for intensive developmental and behavioral treatment. The number served is expected to grow to about 1,000 per year as provider capacity is developed. The total first-year cost is expected

to be \$15 million split between the state and federal government. As more children are served, the annual cost will grow in proportion to the numbers served, with a continued state-federal match, however, these early investments are anticipated to reduce costs over an individual's lifetime, as early interventions decrease the need for more intensive long-term supports.

Among states that have opted to provide autism treatment benefits, Minnesota will have the most flexible benefit structure. In addition, it has a research and evaluation component to study outcomes to learn what type of treatment works best, for which children and in what doses, including what impact involvement from parents and caregivers might play.

“Autism spectrum disorder is a complex and multifaceted condition that presents in a wide range of symptoms and often includes co-occurring conditions,” Jesson said. “The comprehensive medical necessity determination in this benefit will carefully evaluate each child’s needs and family needs and preferences. Individualized treatment will be based on a coordinated multi-disciplinary evaluation and treatment plan process.”

DHS will continue to develop the details of the new benefit in coordination with other related services and in collaboration with the dedicated community of stakeholders as the projected implementation date nears. More information is available on the DHS webpage about [children with autism spectrum disorders](#).