What would you like to see continue with the advisory group?

- Continue outreach to expand services and address the provider shortage. Consider the locations of members since they know their areas the best.
- Asking for feedback is appreciated from all members.
- Appreciate the tie-in to research at the U of M.
- Appreciate the phone option.
- Appreciate the ability to submit feedback electronically.

What would you like to see improved about the advisory group?

- How do providers transfer from old funding sources to EIDBI and what are the barriers?
- Peer mentoring and hiring people with ASD.
- Familiarity of EIDBI providers and practice. What are the barriers and what are the benefits? Would like to hear from a panel of providers.
- Work to eliminate barriers for providers to enroll in the benefit and provide services.

Updates

- 45 Agencies; 71 CMDE providers
- Sign up for Provider News/Policy updates. Anyone is able to sign up for the provider news updates. You do not have to be an enrolled provider.
  - Sign up to receive provider news and other MHCP notices through our [free provider email lists](#).
  - Check the [policy manual updates page](#) for updates to EIDBI policy.
- Early Social Interaction modality is already a component of many of the current modalities and meets our definition of an evidence-based developmental and behavioral approach.
- Rather than adding the specific modality to legislation, we will be moving the focus to legislative language that is adaptable to changes in research.
- Multicultural training update:
  - Training was in-person
  - Now developing online
  - Please watch for an email asking for your feedback on the multicultural training online modules
  - Module will be online and accessible this summer
- Provider feedback meetings
  - July 23, 2019, 11 a.m. to 12:30 p.m. at the Elmer L. Andersen Building
  - October 15, 2019, 11 a.m. to 12:30 p.m.
- Reviewed outreach and resource events.
Wilder Updates/Presentation

- Reviewed autism prevalence data. One in 42 Minnesota children diagnosed with autism; 1 in 59 nationally.
- Potential concerns with data collected is that we are not necessarily capturing the managed-care organizations and private insurance. This would only reflect certain populations depending on the graph or data shown.
- Looking for a standard rating tool and the data we are collecting on developmental domains in the evaluation.
- Getting feedback
- The overall stress level of the parent/caregiver might not improve because of other factors in their lives.
- Concerns that the tool might not be sensitive enough to capture change.
- These are all questions and concerns that will be brought to the learning collaborative to discuss modifications to the screening tool in the CMDE. But keeping in mind it might be too soon to be coming to any major conclusions on the tool and evaluation since we still have a relatively small sample size.
- State scan showed that very few states are tracking their outcomes on their autism services.
- Will broaden question to see if states just don’t call out specific modalities in their benefit and if they do allow other types of intervention.

2020 Legislative changes:

- Propose to remove the wording of treatment modality from subdivision 9. And rewording subdivision to include evidence-based behavioral and developmental practices.
- Propose deleting section 9 (b).
- Concern about the removal of applied behavior analysis specifically because of the work it took to add that as a covered service in law.
- Support for broader language to encompass other methods.
- Propose to add intervention as a defined covered service.
- Propose adding a service for a high intensity intervention of more than one therapist per one person.
- Propose adding a functional behavior assessment service.
- Propose adding positive supports rule.
- Submit your feedback on the proposed legislation to ASD.DHS@state.mn.us