



Ohio Autism & Special Education Reform October Newsletter



News to Know

The Medicaid program's benefit for children and adolescents is known as Early and Periodic Screening, Diagnostic and Treatment services, or EPSDT.

EPSDT provides a comprehensive array of prevention, diagnostic, and treatment services for low-income infants, children and adolescents under age 21, as specified in Section 1905(r) of the Social Security Act (the Act).

States have an affirmative obligation to make sure that Medicaid-eligible children and their families are aware of EPSDT and have access to required screenings and necessary treatment services.

The EPSDT benefit is more robust than the Medicaid benefit for adults and is designed to assure that children receive early detection and care, so that health problems are averted or diagnosed and treated as early as possible.

The goal of EPSDT is to assure that individual children get the health care they need when they need it – the right care to the right child at the right time in the right setting.

EPSDT Lawsuit

In September a federal lawsuit was filed in the United States District Court for the Northern District of Ohio against CareSource, one of the state's largest Medicaid managed care organizations, for refusing to cover medically necessary applied behavior Analysis (ABA) treatment for children with autism.

By law, Medicaid is required to cover all medically necessary treatments for children under the age of 21 and an estimated one-third of all children with autism receive primary coverage through Medicaid. This may include ABA treatment, speech, occupational and physical therapies, and other therapies and devices depending on the individual needs of the child.

If a Medicaid beneficiary is denied treatment, they have a right to appeal the decision in court. Unfortunately, most Medicaid beneficiaries are low-income and do not have ready access to legal counsel. "It is unfortunate that too often the only way to guarantee access to needed treatment under Medicaid is via the courts, and this is wholly unacceptable," says Angela Lello, a member of the Autism Speaks advocacy team.

If you or your child are receiving Medicaid and have been denied medically necessary treatments related to autism, contact the Autism Response Team at 888-288-4762 or en Español 888-772-9050, or via email at familyservices@autismspeaks.org. Remember when making a request for

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services to insure that all documents you have showing that a qualified healthcare professional has determined the treatment to be medically necessary are included.

If your state does not currently have a coverage plan for the service or if you are advised that what you seek is "not a covered service", you should include in writing that you are making the request pursuant to EPSDT which requires medically necessary care even if it is not currently a "covered service."

Recent Action for Edu Reform

In September, Ohio Autism & Special Education Reform presented in front of the State Board of Education. We had surveyed over 150 parents in the state of Ohio and determined that special education is badly in need of reform. School districts are denying students a Free and Appropriate Public Education (FAPE) all across Ohio by refusing to establish, follow, or update IEP's, refusing to provide parents with testing and ETR's, and sometimes refusing to allow students to attend school at all.

(See Edu Reform on back)

(Edu Reform continued)

The State Board of Education was largely unaware of many of the issues that we brought to light, but they were very receptive and willing to listen. We left feeling that members of the State Board of Education had a genuine desire to help.

One week later a member of our group was contacted by the office of Governor John Kasich. After speaking for about an hour on the issues and troubles that families in Ohio are facing, the representative from the Governor's office felt that the issues we've presented were pressing and pervasive enough to warrant a meeting with the Governor. We're working to set a date for this meeting.

Earlier this month we were invited to meet with the directors of The Office for Exceptional Children and OCALI (Ohio Center for Autism and Low Incidence). This meeting took place this past Friday (Oct. 9. 2015) and we're very excited to work with both OCALI and The Office for Exceptional Children as we move forward with legislative changes in Ohio that will hold districts accountable for providing the services legally guaranteed to children with special needs.

If you're having trouble with your local public district and would like to speak with someone, please contact us by emailing nstiles@makeitfit.org.

What you should know about the ABLE Act

In December 2014, the U.S. Senate overwhelmingly passed the Achieving a Better Life Experience (ABLE) Act of 2014 by a vote of 76 to 16. First introduced in 2006, and subsequent sessions of Congress, the ABLE Act will allow people with disabilities (with an age of onset up to 26 years old) and their families the opportunity to create a tax-exempt savings account that can be used for maintaining health, independence and quality of life.

"Today marks a new day in our country's understanding and support of people with disabilities and their families," Michael Morris, National Disability Institute (NDI) Executive Director, said. "A major victory for the disability community, ABLE, for the very first time

in our country's policy on disability, recognizes that there are added costs to living with a disability." He continued. "For far too long, federally imposed asset limits to remain eligible for critical public benefits have served as a roadblock toward greater financial independence for the millions of individuals living with a disability."

For more information visit http://www.realeconomicimpact.org/ public-policy/able-act.aspx

Support HB 350 Mandated coverage of autism treatment

HB 350 would require insurance coverage for screening, diagnosis, and treatment of autism spectrum disorder, and would make it illegal for an insurance company to drop an individual's coverage solely based on an individual being diagnosed or treated for ASD.

Here are a few of the basic provisions the bill would allow for:

-Speech and language therapy or occupational therapy for an enrollee under the age of twenty-one that is performed by a licensed therapist - twenty visits per year for each service.

-Clinical therapeutic intervention for an enrollee under the age of twentyone that is provided by or under the supervision of a professional who is licensed, certified, or registered by an appropriate agency of this state to perform such services in accordance with a health treatment plan - twenty hours per week.

-Mental or behavioral health outpatient services for an enrollee under the age of twenty-one that are performed by a licensed psychologist, psychiatrist, or physician providing consultation, assessment, development, or oversight of treatment plans - thirty visits per year.

Show your support for HB350 by visiting the following link: http://bit.ly/HB350

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Meet Our Team



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