

LINDA LINGLE  
GOVERNOR  
JAMES R. AIONA, JR.  
LT. GOVERNOR

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LAWRENCE M. REIFURTH  
DIRECTOR

RONALD BOYER  
DEPUTY DIRECTOR

TO THE HOUSE COMMITTEE ON HEALTH

TWENTY-FOURTH LEGISLATURE  
Regular Session of 2008

Wednesday, February 6, 2008  
8:00 a.m.

WRITTEN TESTIMONY ONLY

**TESTIMONY ON HOUSE BILL NO. 2727 – RELATING TO HEALTH INSURANCE.**

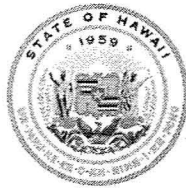
TO THE HONORABLE JOSH GREEN, M.D., CHAIR, AND MEMBERS OF THE  
COMMITTEE:

My name is J. P. Schmidt, State Insurance Commissioner (“Commissioner”), testifying on behalf of the Department of Commerce and Consumer Affairs (“Department”). The Department takes no position on this bill, which creates a mandated benefit for people under age 21 for the diagnosis and treatment of autism spectrum disorders.

The Department does not have the medical expertise necessary to express an informed opinion on the merits of this bill. In addition, mandated benefits help some patients, but also increase premiums for consumers. Weighing these complex issues is best left to the wisdom of the Legislature. It should also be noted that prior to enacting mandatory health insurance coverage, there must be a review by the Legislative Auditor pursuant to Hawaii Revised Statutes section 23-51.

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

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**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  
February 6, 2008

The Honorable Josh Green, M.D., Chair  
House Committee on Health  
Twenty-Fourth Legislature  
State Capitol  
State of Hawaii  
Honolulu, Hawaii 96813

Dear Representative Green and Members of the Committee:

**SUBJECT: HB 2727 - RELATING TO HEALTH INSURANCE**

The position and views expressed in this testimony do not represent nor reflect the position and views of the Department of Health.

The State Council on Developmental Disabilities recognizes the merits of this bill. The purpose of the bill is to require all health insurers, mutual benefit societies, and health maintenance organizations to provide mandatory coverage for all policyholders, members, subscribers, and individuals under age 21 for the diagnosis and treatment of autism spectrum disorders beginning January 1, 2009.

The Council brings to your attention that Section 23-51, Hawaii Revised Statutes (HRS), requires concurrent resolutions to be passed by the Legislature requesting the Legislative Auditor to prepare and submit a report to the Legislature that assesses both the social and financial effects of the proposed mandated coverage (see attached Section 23-51, HRS). Therefore, we feel it would be premature to pass this bill without having the Legislative Auditor assess the impact of this measure pursuant to Section 23-51, HRS. House Concurrent Resolution 62 - Requesting the Auditor to Assess the Social and Financial Effects of Requiring Health Insurers to Provide Coverage for Diagnosis and Treatment of Autism Spectrum Disorders addresses this section.

The Council appreciates the Legislature's interest and concern about autism spectrum disorders. Thank you for the opportunity to present testimony.

Sincerely,

  
Waynette K.Y. Cabral  
Executive Administrator

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**mizuno1-Edgar**

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**From:** Louis Erteschik [Louis@hawaiiidisabilityrights.org]  
**Sent:** Monday, February 04, 2008 1:49 PM  
**To:** HLTtestimony  
**Subject:** hb 2727 Relating to Health Insurance

**TESTIMONY TO THE TWENTY-FOURTH STATE LEGISLATURE, 2008 SESSION**

**To:** House Committee on Health  
**From:** Gary L. Smith, President  
Hawaii Disability Rights Center  
**Re:** House Bill 2727  
Relating to Health Insurance  
**Hearing:** Wednesday, February 6, 2008 8:00 AM  
Conference Room 329, State Capitol

Members of the Committee on Health:

Thank you for the opportunity to provide testimony supporting House Bill 2727, Relating to Health Insurance.

I am Gary L. Smith, President of the Hawaii Disability Rights Center, formerly known as the Protection and Advocacy Agency of Hawaii (P&A). As you may know, we are the agency mandated by federal law and designated by Executive Order to protect and advocate for the human, civil and legal rights of Hawaii's estimated 180,000 people with disabilities.

We support this bill. It is not clear to us what the legal basis would be for a medical insurance policy to not cover the treatments described in this bill for autism spectrum disorder. Yet, there are many advocates in the community for the needs of autistic children who have relayed experiences of that nature. If that is true, then the legislature should in our view mandate such coverage. This is a serious condition which can be ameliorated with proper treatment.

We realize that under state law, a Report from the Legislative Auditor may be required before the legislature can mandate such coverage. In that event, we hope the Committee will entertain an appropriate Concurrent Resolution to that effect at a later time during this session.

Thank you for the opportunity to provide testimony in support of this bill.

**OFFICERS**

Cynthia Jean Goto, MD  
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Hawaii Medical Association  
1360 S. Beretania St.  
Suite 200  
Honolulu, HI 96814  
(808) 536-7702  
(808) 528-2376 fax  
www.hmaonline.net

February 6, 2008

To: Rep. Josh Green, M.D., Chair  
Rep. John Mizuno, Vice Chair  
House Committee on Health

From: Cynthia Goto, M.D., President  
Linda Rasmussen, M.D. and Philip Hellreich, M.D., Legislative  
Co-Chairs  
Paula Arcena, Executive Director  
Dick Botti, Government Liaison

RE: HB 2727 Relating to Health Insurance (Requires all health insurers, mutual benefit societies, and health Maintenance organizations to provide mandatory coverage for all policyholders, member, subscribers, and individuals under age 21 for the diagnosis and treatment of Autism spectrum disorders).

The HMA supports the intent of HB 2727 to provide for needed medical care, but has concerns about adding to Hawaii's already long list of mandated health insurance benefits. The addition of more benefits increases health care costs, thereby increasing premiums and putting health care coverage out of reach for more of our residents. For that reason and those explained below, the HMA is opposed to mandated benefits.

Mandated benefits should consist of core benefits that are limited to medical needs. Many existing benefits, such as mammograms, immunizations, mental health and alcohol and drug dependence treatment, are necessary to maintain the health of Hawaii's citizens. These benefits warrant mandating because they are cost effective by preventing future illness, which would be far more costly to treat and cure. The HMA strongly believes that every member of our society needs and deserves a core group of medical and surgical benefits, including psychiatry and addition medicine.

Over and above these benefits, the HMA generally favors free market solutions and opposes mandated benefits, because they significantly increase the cost of health care and ultimately increase the number of uninsured or underinsured people. However, it is important to retain some flexibility in order to reflect advances in medical science and to address those instances in which the free market does not induce third party payers to cover new diagnostic and therapeutic services.

Please deliver to:  
House Health  
Comm.  
2-6-2008, Wed.  
8am  
Conf. Rm.329

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While it is vitally important to consider the cumulative cost of mandated benefits, the delivery of quality health care should not be prohibited with an arbitrary cap.

Following the 2001 legislative session, the HMA participated in the Mandated Benefits Task Force, convened by the Insurance Commissioner, and served on committees led by former Representatives Ken Hiraki and Dennis Arakaki and Senator Brian Taniguchi. The task force and its committees spent a significant amount of time discussing this issue.

Unfortunately, the legislature did not act upon the recommendations of the task force. While the report is 6 years old, we think it would be helpful for this committee to review the Task Forces' report and re-visit this issue before adding mandated benefits.

Thank you for the opportunity to testify on this matter.

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Kalma K. Wong  
46-220 Alaloa Place  
Kaneohe, Hawaii 96744  
(808) 393-5218

February 5, 2008

Representative Josh Green, M.D.  
Chair, House Committee on Health  
Hawaii State Capitol, Room 327  
415 South Beretania Street  
Honolulu, Hawaii 96813

Representative John Mizuno  
Vice-Chair, House Committee on Health  
Hawaii State Capitol, Room 436  
415 South Beretania Street  
Honolulu, Hawaii 96813

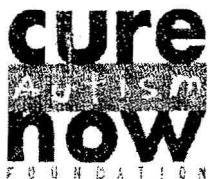
Re: In strong support of Dylan's Law HB2727, Relating to Health Insurance  
Coverage for Autism Spectrum Disorders  
House Committee on Health, February 6, 2008, 8 a.m., Room 329

Dear Chair Green, Vice-Chair Mizuno, and members of the House Health  
Committee:

I am writing to express my strong support of House Bill 2727, otherwise  
known as Dylan's Law. This important bill mandates health insurance coverage for  
autism spectrum disorders.

Autism is a complex neurobiological disorder that currently affects 1 in 150  
children, according to the Center for Disease Control. Autism impairs a person's  
ability to communicate and relate to others, and is often associated with repetitive  
behaviors, poor eye contact, and rigidity in routines. Children with autism often  
have co-occurring conditions, such as behavioral problems, speech disorders,  
depression, anxiety, muscle or joint problems, ear infections, vision and hearing  
problems, and allergies. The wide range of co-occurring problems leads to their  
need for services from trained medical professionals and for a full-range of  
therapies. The therapies include speech therapy, occupational therapy, and intensive  
behavioral therapy, such as Applied Behavior Analysis (ABA), among others. With  
proper medical intervention and intensive therapies children with autism can  
improve to such an extent that they can enter mainstream classrooms unassisted.

Unfortunately, children with autism are often denied coverage for necessary  
therapies by private health insurance companies. One important therapy denied by  
insurers is Applied Behavior Analysis (ABA). ABA has a decades-long record of



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efficacy. It is a data-based intervention for autism that has over forty years of research behind it. In a 1987 study by Ivar Lovaas, the children who underwent early intensive ABA therapy achieved higher educational placement and increased IQ levels than those who did not. ABA is recognized by The U.S. Surgeon General's 2001 Report on Mental Health as the treatment that is widely accepted as being effective for autism, and the National Institute of Child Health and Human Development acknowledges that Applied Behavior Analysis is an effective treatment for autism. Although ABA is the single intervention most often sought by parents of children with autism, insurers frequently deny it as a benefit. As a result, families often pay for these costly services out of pocket. But many families cannot afford these effective therapies and are forced to go without them at all, leaving children with autism even farther behind.

The failure of insurance companies to provide coverage for effective treatments for autism is not only an injustice to families affected by autism, it is also a gross disservice to Hawaii and to the citizens of this state. It has been estimated that the cost of caring for someone with autism is \$3 million over his or her lifetime, and the cost to the country per year is \$13 billion. However, with effective treatments, it has been estimated that the cost savings per child is \$2.4 to \$2.8 million to age 55. Mandated insurance coverage for autism will result in a huge cost savings for everyone in the long run.

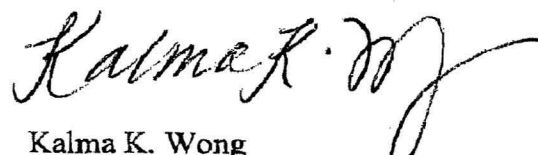
Yet, the cost of autism is more than just financial. Yes, too many families with children affected by autism are deeply in debt as a result of the lack of insurance coverage for these necessary therapies. Yes, there is a huge financial cost to the state. But autism also results in heavy emotional distress for those directly affected. For many of these families, the stress is more than they can bear and many (in fact, 80 %) of the marriages end in divorce. There is also the heavy burden placed on the siblings of those affected by autism. These siblings not only are forced to grow up too soon because they must help out with their autistic brother or sister, they also lose the time they should have had with their parents.

And still, let us not lose sight of the fact that the focus of this issue is, and should always be, the CHILDREN. In spite of the cost of autism to the insurance companies, the government, the families, and even to society as a whole, the fact remains that the highest cost of autism is felt by the innocent children who must work a thousand times harder than anyone else to do the simplest things. The children with autism deserve so much more than they have been receiving from a society that chooses to ignore them, that chooses to toss them aside simply because they are too much trouble. They deserve every opportunity to thrive. Dylan's Law is about all children with autism who deserve to have a better quality of life.

I urge you to pass Dylan's Law House Bill 2727 and make insurance coverage for autism a reality and help improve the lives of children with autism in Hawaii.

Thank you for your consideration.

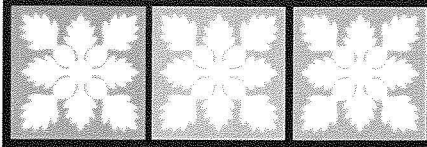
Sincerely,



Kalma K. Wong  
Hawaii Chapter President &  
Advocacy Chair for Hawaii,  
Autism Speaks / Cure Autism Now







## Hawaii Association of Health Plans

February 6, 2008

The Honorable Josh Green, M.D., Chair  
The Honorable John Mizuno, Vice Chair

House Committee on Health

**Re: HB 2727 – Relating to Health Insurance**

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

My name is Rick Jackson and I am President of the Hawaii Association of Health Plans (“HAHP”). HAHP is a non-profit organization consisting of seven (7) member organizations:

AlohaCare  
Hawaii Medical Assurance Association  
HMSA  
Hawaii-Western Management Group, Inc.

MDX Hawai‘i  
University Health Alliance  
UnitedHealthcare

Our mission is to promote initiatives aimed at improving the overall health of Hawaii. We are also active participants in the legislative process. Before providing any testimony at a Legislative hearing, all HAHP member organizations must be in unanimous agreement of the statement or position.

Thank you for the opportunity to testify in opposition to HB 2727, which would require health plans to cover screening for diagnosis and treatment of autism spectrum disorders for individuals under the age of twenty one “when ordered by a physician, psychologist or certified registered nurse practitioner.” HAHP recognizes that legislative health mandates are often driven by the desire for improved health care services to the community; as health plans, our member organizations are committed to the same ideal.

This bill, however, would seem to have the intended effect to shift 100% of treatment responsibility and cost for autism spectral disorder to licensed health plans, including all of HAHP’s member organizations. Currently, a broad range of organizations and support groups assist in dealing with this developmental disorder: Department of Education (DOE), Department of Health – Developmental Disabilities Division, the Department of Human Services through Medicaid and other community-based organizations. As we understand the bill, treatment “prescribed, provided, or ordered for an individual diagnosed with an autism

• AlohaCare • HMAA • HMSA • HWMG • MDX Hawaii • UHA • UnitedHealthcare •  
HAHP c/o Howard Lee, UHA, 700 Bishop Street, Suite 300 Honolulu 96813  
[www.hahp.org](http://www.hahp.org)

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spectrum disorder by a licensed physician, licensed psychologist, or certified registered nurse practitioner if the care is determined to be medically necessary” will be mandated to be covered by health plans. Additionally, we would point out that the bill’s broad definition of medical necessity is not consistent with the one stated in the Patient Bill of Rights.

Health plans already are, by Division of Insurance rules, responsible for reimbursing diagnostic testing for autistic disorders. Cost-shifting the entire treatment responsibility to health plans away from the current Government-sponsored programs to private plans may appeal to someone, but not to HAHP members or the employers who pay the premiums for their employees.

We urge you to hold this bill.

Thank you for the opportunity to testify.

Sincerely,

A handwritten signature in black ink, appearing to read "Rick Jackson". The signature is fluid and cursive, with a long horizontal stroke at the end.

Rick Jackson  
President

# HMSA



An Independent Licensee of the Blue Cross and Blue Shield Association

February 6, 2008

The Honorable Josh Green, M.D., Chair  
The Honorable John Mizuno, Vice Chair

House Committee on Health

**Re: HB 2727 – Relating to Health Insurance**

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

The Hawaii Medical Service Association (HMSA) appreciates the opportunity to testify on HB 2727 which would require health plans to provide coverage for the diagnosis and treatment of autism spectrum disorders for covered individuals less than twenty-one years of age.

The first problem with HB 2727 is the language in the measure itself. We believe that it is flawed in its definition of medical necessity and treatment. The term “medical necessity” is already statutorily defined in HRS 432E-1.4 in the Patient’s Bill of Rights and Responsibilities Act. This definition was designed not only to protect a health plan’s members but to allow the plan the ability to ensure that services and treatments provided meet a scientific standard for effectiveness, are necessary and appropriate. The definition of “medical necessity” and “treatment” in this measure differs significantly from what already exists including the removal of the scientific standard.

In addition, we believe that prior to passing any new legislation which would require health plans to provide benefits not currently covered in their plan offerings, the Legislature should request an Auditor’s study as required under Hawaii Revised Statutes 23-51 and 23-52. This study will provide decision-makers with objective information prior to including these new benefits. With health care costs continuing to escalate it is important to consider the impact that requiring such benefits will have on the cost of health care, especially for local employers who typically bear the brunt of such cost increases.

Thank you for the opportunity to provide testimony on HB 2727.

Sincerely,

A handwritten signature in black ink, appearing to read "Jennifer Diesman".

Jennifer Diesman  
Director, Government Relations

## May Mizuno

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**From:** tony@lokelaniohana.org  
**Sent:** Monday, February 04, 2008 1:39 PM  
**To:** HLTtestimony  
**Subject:** Testimony

Thank you for the opportunity to give testimony.

One can only speculate on how an early diagnosis of an astonishing 1 in 150 persons might help free these individuals from the yoke of this spectrum disorder.

I strongly support bill HB2727.

Please vote "Yes" to support all Children with autism and make a future for them where there can be change and perhaps then, through discovery and documentation, will come a solution for this epidemic.

Mahalo& Aloha,  
Tony Leone  
President  
Lokelani 'Ohana  
3578 Piikea Pl.  
Makawao, HI. 96768.  
Phone/fax 808.572.6284  
[mauitectony@aol.com](mailto:mauitectony@aol.com)

Dear Chair Green, Vice-Chair Mizuno, and members of the House Health Committee:

I am writing to express my strong support of House Bill 2727, otherwise known as Dylan's Law. This bill mandates health insurance coverage for autism spectrum disorders.

My family, personally, is affected by autism. My son, age 10, is diagnosed with Pervasive Developmental Disorder, a form of autism. When we first received the heartbreaking diagnosis when he was just two and a half years old, he was considered "moderately severely affected," just borderline of severe. Prior to age two, he was a typically developing baby, very loving and interested in the world around him. After receiving his MMR vaccines at age two, he immediately became very sick and began to withdraw into himself. (Prior to this, he was not sick a day in his life.) He developed a fever, bronchitis and became severely asthmatic. Over the next few months, he had to be given two rounds of antibiotics. He started waking up in the middle of the night, screaming and crying as if he were in pain.

He lost the few words that he had before, lost interest in people or what was going on around him, and spent most of his time "stimming" or in self-stimulatory behavior. For example, he didn't play with his toys. Instead of playing, he would line them up, or organize them by color or size. He would push his trains back and forth to see the wheels turn. He had no imaginary play as other kids his age did. He did not communicate with me, my husband, or his older sister anymore. I would take him to play groups and library story times, and while other children sat in their mother's laps and listened eagerly to the stories being read or participated in activities, my son would be running around or finding something he could "stim" with. When I took him to the zoo, he had no interest in the animals. We once were right up close with a beautiful elephant, and my son just squatted down to look at the dirt. I spent most of my time chasing after him because he would run everywhere and not even look back at us.

He became sensitive to touch and no longer wanted to be cuddled. He also had to be held down in order to get a haircut or get his teeth cleaned at the dentist. He would spend most of his time at the beach, picking sand off of his legs and hands. It was as if he were in a world of his own, and I could not reach him. I feared that I would never get the privilege of getting to know my own little boy.

Thankfully, today I can say that I have my son back! He talks my ears off, has such a wonderful, bubbly personality, and is very thoughtful of others. People tell me all the time how helpful he is. He is once again very loving and gives me big teddy bear hugs! He and his sister are best friends and play (and argue) together all the time. He is doing well in school (with the help of an educational aide), and I am even told that I should enroll him in speech and drama since he has such wonderful confidence, poise, and voice projection (and he's also very dramatic!). Now he has no problems getting hair cuts or going to the dentist. He also loves the beach and makes sand castles and hunts for buried "treasure." If you met him now, you would never suspect that he was so severely affected by autism. He seems as though he is just another happy child in the fifth grade who loves to play video games and soccer.

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I thank God for his wonderful progress and for an intensive ABA (applied behavior analysis) program, speech therapy, occupational therapy, a modified diet (gluten, casein, and yeast free), chelation therapy (to remove heavy metals-- mercury was one that he tested very high in), acupuncture treatments, brain gym, homeopathy, and nutritional therapy.

We were fortunate enough to have received the ABA, speech, and occupational services through the "Zero to Three" program until he was age three, and then through the Department of Health/Department of Education thereafter. We had to fight very hard to keep his much needed services once he transitioned into the D.O.E.

We could not afford to pay for all these therapies on our own. It is a huge financial burden to have to pay for the biomedical therapies, nutritional supplements, and special diets alone, but on top of that, to pay for the Therapists, Skills Trainers, and Speech services too would be nearly impossible for us.

If my son did not receive the therapies that he did , I really do not know what his future would hold. He would probably still be that boy who could not communicate and interact with others-- that boy in a bubble, and always dependent upon others-- physically, mentally, and financially. But instead of that bleak future, I can say thankfully, because of the much needed therapies-- behavior and biomedical, I am confident that he will one day be able to be an independent, productive citizen of our country and give back to the community.

I urge you to please pass Dylan's Law House Bill 2727. Ensuring health insurance coverage for the diagnosis and treatment autism can help our children to reach their fullest potential and make life changing improvements. I truly believe that it will change the lives of countless children and their families, and ultimately, the world in which they live.

Thank you very much for your consideration and for taking the time to read my letter.

Sincerely yours,

Carolyn K. Nomura

To: House Committee on Health  
From: Daniel Santos 226-0398 *Daniel Santos*  
Re: "Dylan's Law" HB2727  
Hearing: Wednesday, February 6, 2008, at 8 a.m. in Room 329

**Members on the Committee on Health:**

I appreciate the opportunity to provide testimony on HB2727 also known as "Dylan's Law". I would like to offer my SUPPORT for this bill which offers the in-depth real needs services for children with Autism Spectrum Disorders. Autism is a complex neurological disorder that is affecting more and more children. They have difficulty with social interactions and communication. It is estimated 1 in 150 children are on the Autism spectrum. It is truly an epidemic here in Hawaii which has a higher rate of the condition than the rest of the nation. It behooves us to provide our keiki with the kind of proven therapies that will allow them to be fully functioning productive members of society.

This bill mandates insurers provide the comprehensive habilitative services needed by a child with autism. The gold medal standard, the proven therapy for children with autism is ABA (Applied Behavior Analysis). Although it is very effective ABA is expensive. Most insurers, including mine, will not cover the service even though it is the only proven therapy for my child. The cost to employ of a qualified ABA therapist can be \$40-\$55/hour. A child often needs intensive 35-40 hours/week of services for 2-3 years. As you can imagine, the cost of providing this care is out of reach of most of us who are not independently wealthy. Some of us have to sell our homes. We go into debt. Our marriages fall apart. We are paying through the nose for something that our insurers could cover. If only they would. We would truly appreciate the financial help from insurance companies this bill would require.

I've seen nonverbal completely aloof children become conversational, social, and indistinguishable from their typical peers once given ABA therapy. When children are given intensive ABA therapy in the early years they learn skills that will allow them to attend mainstream schools, pursue higher education, work, marry, and in short do what a neurotypical child is able to do. We aren't asking for the moon. We're asking that insurers cover a proven treatment that will allow our children to have a typical life. That's all we want. We want them to have a normal life. This bill is not important just to the local autism community. It impacts the entire community even those who do not have a child with autism. Children who do not receive early intensive ABA therapy will become a financial burden to taxpayers. If a child is able to take care of himself he will not need to rely on government assistance as an adult. Several states, including Pennsylvania, South Carolina, and Indiana, provide such insurance coverage. It's time Hawaii provided the same coverage to help our hard-working families who are affected by ASD.

Thanks for considering my testimony and should you have questions please feel free to contact me at (808) 226-0398.

OPTIONAL FORM 99 (7-99) RE: HB2727 Relating to Health Insurance

<b>FAX TRANSMITTAL</b>		# of pages = 1
To: Committee on Health		From: Daniel Santos
Dept./Agency: House - State Legislature		Phone #: (808) 226-0398
Fax #: 586-6051		Fax #:
NSN 7540-01-317-7386		5089-101 GENERAL SERVICES ADMINISTRATION

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Shandle Lum  
94-510 Lumalia St. #A104  
Waipahu, HI 96797  
386-2600

February 5, 2008

Representative Josh Green, M.D.  
Chair, House Committee on Health  
Hawaii State Capitol, Room 327  
415 South Beretania Street  
Honolulu, Hawaii 96813

Representative John Mizuno  
Vice-Chair, House Committee on Health  
Hawaii State Capitol, Room 436  
415 South Beretania Street  
Honolulu, Hawaii 96813

**Re: In strong support of Dylan's Law HB2727, Relating to Health Insurance Coverage for Autism Spectrum Disorders  
House Committee on Health, February 6, 2008, 8 a.m., Room 329**

Dear Chair Green, Vice-Chair Mizuno, and members of the House Health Committee:

I am writing to express my strong support of House Bill 2727, otherwise known as Dylan's Law. This bill mandates health insurance coverage for autism spectrum disorders.

Autism is a complex neurobiological disorder that currently affects 1 in 150 children, according to the Center for Disease Control. This disorder affects boys four times more likely than girls. Autism impairs a person's ability to communicate and relate to others, and is often associated with repetitive behaviors, poor eye contact, and rigidity in routines. Children with autism often have co-occurring conditions, such as behavioral problems, speech disorders, depression, anxiety, muscle or joint problems, ear infections, vision and hearing problems, and allergies. The wide range of co-occurring problems leads to their need for services from trained medical professionals and for a full-range of therapies. The therapies include speech therapy, occupational therapy, and intensive behavioral therapy, such as Applied Behavior Analysis (ABA), among others. With proper medical intervention and intensive therapies children with autism can improve to such an extent that they can enter mainstream classrooms unassisted.

Unfortunately, children with autism are often denied coverage for necessary therapies by private health insurance companies. One important therapy denied by insurers is Applied Behavior Analysis (ABA). ABA has a decades-long record of efficacy. It is a data-based intervention for autism that has over forty years of research behind it. In a 1987 study by Ivar Lovaas, the children who underwent early intensive ABA therapy achieved higher educational placement and increased IQ levels than those who did not. ABA is recognized by The U.S. Surgeon General's 2001 Report on Mental Health as the treatment that is widely accepted as being effective for autism, and the National Institute of Child Health and Human Development acknowledges that Applied

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Behavior Analysis is an effective treatment for autism. Although ABA is the single intervention most often sought by parents of children with autism, insurers frequently deny it as a benefit. As a result, families are often forced to pay for these costly services out of pocket. I sent my son to a private school and had no choice but to file a due process against the DOE because my son made progress at the private school. They used ABA among other therapies and his progression was very noticeable. I won the due process which only covered that particular school year, but could no longer afford the \$2800.00 per month for the following year's tuition. I don't think parents should HAVE to go to due process every year because that's the only way their child will get ABA therapy. Many families I know pay for it out of pocket, and that is just not an option for us. My husband and I both work FT and I even have a PT job to help and get our family dual medical coverage, however because we own our own home, my son doesn't qualify for certain financial aid programs. Should our family be chastised because we are responsible adults and provide, basic as it may seem, for our family? With that being said, is it fair for wealthier families with children diagnosed with Autism to get their kids the treatment because they can afford it? Children with Autism should be given the same opportunities regardless of their social factors.

Too many families of children with autism are deeply in debt as a result of the lack of insurance coverage for these necessary therapies. However, the cost of paying for the therapies out of pocket not only causes financial strain for the families, but it also causes heavy emotional distress. For many of these families, the stress is more than they can bear and many of the marriages end in divorce. But in spite of the burdens of autism on the insurance companies, the government, the families, and even on society as a whole, the most important point in this issue is the CHILD. Dylan's Law is about all children with autism who deserve to have a better quality of life.

I urge you to pass Dylan's Law House Bill 2727 and make insurance coverage for autism a reality. The children with autism in Hawaii deserve to have the opportunity to thrive.

Thank you for your consideration.

Sincerely,



Shanelle Lum,

Mother of Jaren Lum, 10 year old with Autism and Epilepsy

000075