

HCR62

HD1

Measure Title:

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.

Report Title:

Autism Spectrum Disorders; Mandatory Health Coverage

Description:

Package:
None

Companion:

Introducer(s):

WATERS

Current Referral:

HTH/CPH, WAM



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
March 27, 2008

The Honorable Michael Y. Magaoay, Chair
House Committee on Legislative Management
Twenty-Fourth Legislature
State Capitol
State of Hawaii
Honolulu, Hawaii 96813

Dear Representative Magaoay and Members of the Committee:

SUBJECT: HCR 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

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 **supports HCR 62**. The purpose of the concurrent resolution is to request the Auditor to: 1) conduct an impact assessment report of the social and financial impacts of mandating health insurers to provide coverage for the diagnosis and treatment of autism spectrum disorders; and 2) submit findings and recommendations to the Legislature prior to the convening of the Regular Session of 2009.

The Council is aware of HB 2727 HD2 SD1 – Relating to Health Insurance that is moving through the legislative process. This bill establishes a temporary Autism Spectrum Disorders Benefits and Coverage task force to: 1) research problems faced by parents of children with autism and what can be done to ensure proper benefits and services are provided; 2) research other states' health insurance coverage plans and develop a plan of services that health insurers should be mandated to cover; and 3) submit a report to the Legislature prior to the 2009 session. We recommend including language in the Committee Report that the Auditor and the task force shall coordinate its activities to avoid duplication of work and resources.

The Honorable Michael Y. Magaoay
Page 2
March 27, 2008

The Council appreciates the Legislature's interest and concern about autism spectrum disorders and looks forward to the results of the Auditor's report.

Thank you for the opportunity to present testimony in support of HCR 62.

Sincerely,

A handwritten signature in black ink, appearing to read "Waynette K.Y. Cabral". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Waynette K.Y. Cabral
Executive Administrator

Testimony of
Phyllis Dendle
Director of Government Affairs

Before:
Senate Committee on Health
The Honorable David Y. Ige, Chair
The Honorable Carol Fukunaga, Vice Chair

Senate Committee on Commerce, Consumer Protection, and Affordable Housing
The Honorable Russell S. Kokubun, Chair
The Honorable David Y. Ige, Vice Chair

April 18, 2008
1:15 pm
Conference Room 016

HCR 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

Chairs, Vice Chairs, and committee members, thank you for this opportunity to provide testimony on HCR 62 which requests the auditor to assess the social and financial effects of requiring health insurers to provide coverage for diagnosis and treatment of autism spectrum disorders.

Kaiser Permanente Hawaii supports this request.

Kaiser Permanente's position on proposed legislative mandates of health coverage is that they are usually not a good idea, for several reasons:

1. First, because they generally tend to raise the cost of delivering health care, thereby resulting in higher premiums and increased cost to the purchasers and payors of health plan coverage, whether they be employer groups or individuals;
2. Second, because they often tend to dictate how medicine should be practiced, which sometimes results in medicine that is not evidence based and usurps the role and expertise of the practicing physician and other health care professionals who provide medical treatment and services; and
3. Finally, because they often lock in statutory requirements that become outdated and do not keep pace with the ever evolving and advancing fields of medicine and medical technology.

Accordingly, Kaiser supports requesting the legislative auditor to conduct an impact assessment report, as required pursuant to Sections 23-51 and 23-52 of the Hawaii Revised Statutes, to assess among other things:

- a) the extent to which this mandated insurance coverage would be reasonably expected to increase the insurance premium and administrative expenses of policy holders; and
- b) the impact of this mandated coverage on the total cost of health care.

Thank you for the opportunity to comment.



Kalma K. Wong
46-220 Alaloa Place
Kaneohe, Hawaii 96744
(808) 393-5218
flute866@gmail.com

April 16, 2008

Senator David Ige
Chair, Senate Health Committee

Senator Russell Kokobun
Chair, Committee on Commerce, Consumer
Protection, and Affordable Housing

Senator Carol Fukunaga
Vice-Chair, Senate Health Committee

Senator David Ige
Vice-Chair, Committee on Commerce, Consumer
Protection, and Affordable Housing

Re: In strong support of HCR62, 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, Senate Committee on Health and Senate Committee on Commerce, Consumer Protection, and Affordable Housing, April 18, 2008, 1:15 p.m., room 016

Dear Chair/Vice-Chair Ige, Chair Kokobun, Vice-Chair Fukunaga, and members of the Senate Committee on Health and Committee on Commerce, Consumer Protection, and Affordable Housing:

I am writing to express my strong support of House Concurrent Resolution 62, which requests that the State Auditor assess the social and financial effects of requiring health insurers to provide coverage for the diagnosis and treatment of autism spectrum disorders, as is outlined in House Bill 2727.

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 efficacy and is recognized by The U.S. Surgeon General's 2001 Report on Mental Health as the treatment that is effective 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.

Speech therapy is often denied as well, because for children with autism the needed therapy is habilitative and not rehabilitative in nature. In other words, if you lose the ability to speak (like a stroke victim) speech therapy may be covered, but if you never had language to begin with and you need therapy to gain speech (like children with autism), then speech therapy will be denied.

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 per year to age 55. Mandated insurance coverage for autism will result in a huge cost savings for everyone in the long run.

Please pass House Concurrent Resolution 62 and take an important step toward making insurance coverage for autism a reality.

Thank you for your consideration.

Sincerely,

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



DISABILITY AND COMMUNICATION ACCESS BOARD

919 Ala Moana Boulevard, Room 101 • Honolulu, Hawaii 96814
Ph. (808) 586-8121 (V/TDD) • Fax (808) 586-8129

April 18, 2008

TESTIMONY TO THE SENATE COMMITTEES ON HEALTH AND COMMERCE, CONSUMER PROTECTION, AND AFFORDABLE HOUSING

House Concurrent Resolution 62, HD1 – 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

The Disability and Communication Access Board (DCAB) is a statewide board with seventeen (17) members appointed by the Governor, thirteen (13) of whom are persons with disabilities or family members. The Board's mission is to advocate and promote full integration, independence, equal access, and quality of life for persons with disabilities in society. This testimony represents a position voted upon by the Legislative Committee of the Board.

We support HCR 62, HD1 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. We are aware that it is a requirement for a study to be conducted related to the social and financial effects of requiring health insurers to offer coverage for diagnosis and treatment of Autism Spectrum Disorders, per Section 21-51, Hawaii Revised Statutes. DCAB supports this study in order to obtain necessary information to amend the statute in an informed and appropriate manner to mandate coverage for diagnosis and treatment of Autism Spectrum Disorders.

Thank you for the opportunity to testify.

Respectfully submitted,

PATRICIA M. NIELSEN
Chairperson
Legislative Committee

FRANCINE WAI
Executive Director

Via Fax 586-6659

April 17, 2008

Chair Senator David Ige, Vice-Chair Senator Carol Fukunaga of the Senate Health Committee, and Chair Senator Russell Kokobun and Vice-Chair Senator David Ige of the Commerce, Consumer Protection, and Affordable Housing Committee.

Re: Testimony in SUPPORT for HCR62, Relating to Health Insurance Coverage for Autism Spectrum Disorders House Committee on Legislative Management, April 18, 2008, Room 215, 1:15 p.m

Dear Chair Chair Senator David Ige, Vice-Chair Senator Carol Fukunaga of the Senate Health Committee, and Chair Senator Russell Kokobun and Vice-Chair Senator David Ige of the Commerce, Consumer Protection, and Affordable Housing Committee:

I am writing to express my support of HCR62

With early intervention involving applied behavioral analysis therapy (ABA) there is a 48 percent success rate in mainstreaming autistic kids back to their original grade levels with their peers. For the remainder; if they are not able to mainstream, the progress that they make with ABA therapy is still remarkable. They can still become productive tax payers. This is the only recommended therapy for autism by the US Surgeon General. Currently there is no health insurance coverage offered for treatment of any autism spectrum disorders in Hawaii.

Timing of treatment is critical. Currently, the CDC states "Research shows that early intervention can greatly improve a child's development". We have only one chance to do it right. Since investment in Autism specific services is needed it should be guided by people who know the nature of the Autism disability. We should not invest in trial and error.

Our children will not outgrow this disorder. They could become unmanageable if nothing is done now. And intervention at this point will be in the form of managed care. This will put a great burden on the economic welfare of our state systems, because we will have to pay for managed care services over the entire lifetime as our autistic children grow into adults.

We are all in this together as taxpayers. Let's be a part of the solution, lets be proactive, and invest in our children now, and help them. It will be a win/win. Or, we can do nothing now, and invest later in a lifetime of managed care. Either way; we are all going to pay. Please pass Dylan's Law House Bill 2727 / HCR 62 and make insurance coverage for autism a reality.

Sincerely,
Deborah Tasato-Kodama

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HAWAII DISABILITY RIGHTS CENTER

900 Fort Street Mall, Suite 1040, Honolulu, Hawaii 96813

Phone/TTY: (808) 949-2922 Toll Free: 1-800-882-1057 Fax: (808) 949-2928

E-mail: info@hawaiidisabilityrights.org Website: www.hawaiidisabilityrights.org

TESTIMONY TO THE TWENTY-FOURTH STATE LEGISLATURE, 2008 SESSION

To: Senate Committee on Health
Senate Committee on Commerce, Consumer Protection and
Affordable Housing

From: Gary L. Smith, President
Hawaii Disability Rights Center

Re: HCR 62, HD1

Hearing: Friday, April 18, 2008 1:15 PM
Conference Room 016, State Capitol

Members of the Committee on Health:

Members of the Committee on Commerce, Consumer Protection and Affordable
Housing:

Thank you for the opportunity to provide testimony supporting HCR 62, HD1

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 Concurrent Resolution. We believe that medical insurance policies should cover the treatments for autism spectrum disorder. Yet, there are many advocates in the community for the needs of autistic children who have relayed experiences concerning a lack of coverage. 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 is required before the legislature can mandate such coverage. In that event, we hope the Committee will pass this Concurrent Resolution so we can have the study.

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



testimony

From: Naomi Grossman [naomi_grossman@yahoo.com]
Sent: Thursday, April 17, 2008 2:14 PM
To: testimony
Subject: HCR 62, HD 1: Relating to Autism Insurance 041808 at 1:15pm, conf. rm. 016 Cmtes on HTH/CPH

**Committees on Health and
Commerce, Consumer Protection, and Affordable Housing
The State Senate
Friday, April 18, 2008
at 1:15p.m. in conference room #016
TESTIMONY IN STRONG SUPPORT OF
HCR 62, HD 1: Relating to Autism Insurance**

Chair Senator David Ige, Vice-Chair Senator Carol Fukunaga of the Senate Health Committee; and Chair Senator Russell Kokobun and Vice-Chair Senator David Ige of the Commerce, Consumer Protection, and Affordable Housing Committee, and members of the committees, my name is Naomi Grossman. I am the president of the Autism Society of Hawai'i.

The Autism Society of Hawai'i offers its strong support for HCR 62, HD 1: 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.

The Autism Society of Hawai'i is an affiliate chapter of the Autism Society of America. It's members are composed of families who deal with living with the effects of autism spectrum disorders and the professionals and paraprofessionals who serve them. The Autism Society of Hawai'i will provide leadership in the field of autism spectrum disorders dedicated to supporting families who advocate on behalf of their children and are committed to reducing the consequences of autism through education, research, and advocacy.

First of all, thank you for considering this important need for children and students ages 0 - 21. As you know, autism spectrum disorders (ASD) is a neurobiological disorder that presents itself as a triad of deficits affecting 1 in 150 children. ASD 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.

Thank you for considering HCR 62, HD1 in conjunction with the auditor conducting a sunrise study and reporting back before health insurance coverage can be mandated for the diagnosis and treatment of autism spectrum disorders. H.B. No. 2727, H.D.2, S.D. 1 has been introduced in the Legislature and includes the information required for the Auditor to conduct the study.

We can't ignore the fact that treatment service programs need to be provided by licensed and unlicensed credentialed practitioners who have expertise in the child and student's specialized area of need. If untreated, the condition can escalate to a point where it is exacerbated unless early intervention and intensive services are a part of the individualized design to meet the unique programmatic needs of the young child or student. Research shows that ASD is treatable. Children can grow and become caring, competent and contributing members of their community and the community-at-large.

It wasn't long ago when the state Legislature conducted a state-funded feasibility study on autism around 1990 when the Hawaii Resource and Technical Assistance Project on Autism was funded under the University Affiliated Program (now called Center on Disability Studies), University of Hawai'i at Mano'a. At that time, there were no systematized services in place for autism except institutionalization at over \$200,000 per person per year. At that time, autism was considered a low-incident disorder.

Today, Applied Behavior Analysis (ABA) based on B.F. Skinner's behavior modification approach is considered an evidence-based approach of choice and is an appropriately covered under TriCare insurance in Hawaii.

HCR 62, HD1 will assist us in making informed decisions in order to provide important windows of developmental opportunity for children with autism so that the proper benefits and insurance health coverages can be made possible to meet the special needs of children with autism, including providing services involving applied behavioral analyses techniques.

The Autism Society of Hawai'i appreciates the opportunity to submit testimony in strong support of HCR 62, HD1 as we look forward to insurance coverage for autism spectrum disorders becoming a reality in Hawai'i.

Sincerely,

Naomi Grossman
Autism Society of Hawai'i, president

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