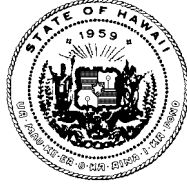


JOSH GREEN, M.D.
GOVERNOR
KE KIA'ĀINA



CATHY BETTS
DIRECTOR
KA LUNA HO'OKELE

JOSEPH CAMPOS II
DEPUTY DIRECTOR
KA HOPE LUNA HO'OKELE

STATE OF HAWAII
KA MOKU'ĀINA O HAWAI'I
DEPARTMENT OF HUMAN SERVICES
KA 'OIHANA MĀLAMA LAWELAWE KANAKA
Office of the Director
P. O. Box 339
Honolulu, Hawaii 96809-0339

TRISTA SPEER
DEPUTY DIRECTOR
KA HOPE LUNA HO'OKELE

February 26, 2024

To: The Honorable Representative Kyle T. Yamashita, Chair
House Committee on Finance

FROM: Cathy Betts, Director

SUBJECT: **HB 2217 HD1 – RELATING TO HEALTH.**

Hearing: February 28, 2024, 2:00 p.m.
Conference Room 308, State Capitol & Video Conference

DEPARTMENT'S POSITION: The Department of Human Services (DHS) appreciates the intent of this bill and offers comments. DHS also supports the measure as long as it does not reduce or replace the priorities identified in the Governor's budget.

PURPOSE: The bill requires the Departments of Health, Human Services, and Education to research and make recommendations on any rules, policies, and amendments to the Medicaid State Plan or Medicaid 1915(c) Waiver that are necessary to ensure provision of clinically appropriate treatments and services for individuals twenty-six years of age or younger with autism spectrum disorder or fetal alcohol spectrum disorder are covered under certain Medicaid programs. Appropriates funds. Effective 7/1/3000. (HD1)

Committee on Human Services amended the measure by:

- (1) Clarifying that the Departments of Health, Human Services, and Education are to research any rules, policies, and amendments to the Medicaid State Plan or Medicaid 1915(c) Waiver and make recommendations on necessary policy actions or funding;
- (2) Changing the effective date to July 1, 3000, to encourage further discussion; and

- (3) Making technical, nonsubstantive amendments for the purposes of clarity, consistency, and style.

The Department appreciates the amendments to the HD1. With available funding, we will research and engage with the community and stakeholders to develop policies to incorporate in the state plan clinically appropriate treatments of behavioral modification services for individuals twenty-six years or younger with ASD or FASD to improve the quality of life for these individuals and their families.

DHS estimates that such research will need to be conducted by consultants with subject matter expertise and cost \$300,000 (\$150,000 A funds/\$150,000 N funds).

Thank you for the opportunity to testify on this measure.



STATE OF HAWAII
STATE COUNCIL
ON DEVELOPMENTAL DISABILITIES
1010 RICHARDS STREET, Room 122
HONOLULU, HAWAII 96813
TELEPHONE: (808) 586-8100 FAX: (808) 586-7543

February 28, 2024

The Honorable Representative Kyle T. Yamashita, Chair
House Committee on Finance
The Thirty-Second Legislature
State Capitol
State of Hawai'i
Honolulu, Hawai'i 96813

Dear Representative Yamashita and Committee Members:

SUBJECT: HB2217 HD1 RELATING TO HEALTH

The Hawaii State Council on Developmental Disabilities **SUPPORTS HB2217 HD1**, which requires the Departments of Health, Human Services, and Education to research and make recommendations on any rules, policies, and amendments to the Medicaid State Plan or Medicaid 1915(c) Waiver that are necessary to ensure provision of clinically appropriate treatments and services for individuals twenty-six years of age or younger with autism spectrum disorder or fetal alcohol spectrum disorder are covered under certain Medicaid programs. Appropriate funds. Effective 7/1/3000. (HD1)

The Council supports the proposed amendment (2) by the committee. This amendment specifically clarifies that the Departments of Health, Human Services, and Education are tasked with researching any rules, policies, and amendments to the Medicaid State Plan or Medicaid 1915(c) Waiver and making recommendations on necessary policy actions or funding.

HB2217 HD1 proposes to expand access to Applied Behavior Analysis (ABA) therapy for individuals above the age of 22. The Hawaii State Council on Developmental Disabilities supports this initiative, as it recognizes the effectiveness of ABA therapy in aiding individuals with Autism and/or Fetal Alcohol Spectrum Disorder (FASD) in their daily lives.

Individuals with Autism and FASD often face challenges during the transition from school to community and work environments. This transition period can be particularly daunting, requiring adapting to new experiences and social norms. ABA therapy has been demonstrated to benefit individuals above the age of 22, assisting them in better acclimating to these new environments.

The Hawaii State Council on Developmental Disabilities underscores the importance of providing ABA therapy beyond the typical age threshold, as it aligns with the evolving needs of individuals with developmental disabilities. By supporting access to ABA therapy for individuals after the age of 22, we can facilitate smoother transitions and enhance their quality of life as they integrate into our communities and workplaces.

The Council defers to the Department of Human Services for any substantive changes or appropriation recommendations.

Thank you for the opportunity to submit testimony in **support of HB2217 HD1**.

Sincerely,



Daintry Bartoldus
Executive Administrator



STATE OF HAWAII
DEPARTMENT OF EDUCATION
KA 'OIHANA HO'ONA'AUAO
P.O. BOX 2360
HONOLULU, HAWAII 96804

Date: 02/28/2024

Time: 02:00 PM

Location: 308 VIA VIDEOCONFERENCE

Committee: House Finance

Department: Education

Person Testifying: Keith T. Hayashi, Superintendent of Education

Title of Bill: HB 2217, HD1 RELATING TO HEALTH.

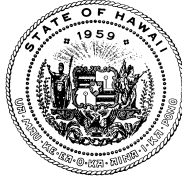
Purpose of Bill: Requires the Departments of Health, Human Services, and Education to research and make recommendations on any rules, policies, and amendments to the Medicaid State Plan or Medicaid 1915(c) Waiver that are necessary to ensure provision of clinically appropriate treatments and services for individuals twenty-six years of age or younger with autism spectrum disorder or fetal alcohol spectrum disorder are covered under certain Medicaid programs. Appropriates funds. Effective 7/1/3000. (HD1)

Department's Position:

The Hawaii State Department of Education (Department) supports HB 2217, HD1, which requires the departments of Health, Human Services, and Education to research any rules, policies, and state plan amendments that are necessary to ensure that clinically appropriate treatments and services for individuals twenty-six years of age or younger with autism spectrum disorder or fetal alcohol spectrum disorder are considered covered benefits under the State's Medicaid program.

The Department stands ready to research the rules and policies of applicable state special education services and programs that support the continuation of behavioral services as covered benefits under the State's Medicaid program for individuals twenty-six years of age or younger with autism spectrum disorder or fetal alcohol spectrum disorders.

Thank you for the opportunity to provide testimony on this measure.



STATE OF HAWAII
DEPARTMENT OF HEALTH
KA 'OIHANA OLAKINO
P. O. Box 3378
Honolulu, HI 96801-3378
doh.testimony@doh.hawaii.gov

**Testimony in SUPPORT of HB2217 HD1
RELATING TO HEALTH**

REPRESENTATIVE KYLE T. YAMASHITA, CHAIR
HOUSE COMMITTEE ON FINANCE

Hearing: 02/28/2024
Conference Room 308
2:00 pm

1 **Fiscal Implications:** Undetermined

2 **Department Position:** The Department of Health supports HB 2217 HD1 and provides the
3 following comments on this measure.

4 **Department Testimony:** The Developmental Disabilities Division (DDD) provides the following
5 testimony on behalf of the Department of Health.

6 The purpose of HB 2217 HD1 is to research and make recommendations on the most
7 appropriate services for individuals twenty-six years of age or younger with autism spectrum
8 disorder (ASD) or fetal alcohol spectrum disorder (FASD) and how Medicaid services may cover
9 these services. The Department appreciates the intent to research appropriate treatments and
10 services for children and youth as they transition to adulthood. The Department notes that
11 there may be other services and supports that may be necessary to address the needs of
12 individuals in these populations, and behavior modification alone may not encompass the
13 potential range of clinically appropriate treatments and services. Intensive behavioral therapies
14 for either ASD or FASD should be recommended under certain circumstances but are not
15 appropriate in every situation.

16 The Department of Health defers to the Department of Human Services on needed
17 appropriations to carry out this research.

1

2 **Offered Amendments:**

3 In Section 1 line 15 strike ~~1925 (c) waiver~~, and change to 1915 (c) waiver.

4 Thank you for the opportunity to testify on this measure.



HB2217 HD1 Medicaid Options for FASD and Autism

COMMITTEE ON FINANCE

Rep. Kyle T. Yamashita, Chair

Rep. Lisa Kitagawa, Vice Chair

Wednesday, Feb 28, 2024: 2:00: Room 308 Videoconference

Hawaii Substance Abuse Coalition Supports HB2217 HD1:

ALOHA CHAIR, VICE CHAIR, AND DISTINGUISHED COMMITTEE MEMBERS. My name is Alan Johnson. I am the current chair of the Hawaii Substance Abuse Coalition (HSAC), a statewide organization for substance use disorder and co-occurring mental health disorder treatment and prevention agencies and recovery-oriented services.

FASD is a problem in Hawaii and efforts can be made to prevent this devastating condition as well as to treat children and adults that would increase their functioning:

- Understand the disorder and reshape some of our interventions to change a child's behavior and improve functionality.
- Reduce the prevalence of FASD.
- Empower care givers to help FASD people reach their full potential.
- Address stigma by educating our communities to understand the complexities of this disability while promoting a more inclusive culture.
- Greatly improve upon outcomes through measurement brought about by Medicaid funding.
- Reduce childhood trauma by increasing supports for high-risk families, building resilience, and improving access to treatment.

HSAC supports that individuals twenty-six years of age or younger with autism spectrum disorder or fetal alcohol spectrum disorder are covered under the following:

- (1) The early and periodic screening, diagnostic, and treatment benefit under the State's Medicaid program;
- (2) Any applicable state special education services and programs; and
- (3) The Medicaid section 1915(c) home and community-based services waiver for individuals with intellectual and developmental disabilities.

Working together, we can join the growing number of states that claim to be a “FASD-Informed State.”

We appreciate the opportunity to provide testimony and are available for questions.

HB-2217-HD-1

Submitted on: 2/26/2024 4:36:54 PM

Testimony for FIN on 2/28/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Louis Erteschik	Hawaii Disability Rights Center	Support	Written Testimony Only

Comments:

EPSDT is a great program that helps children on Medicaid access necessary services. However, it ends when the child turns 21. The problem is that sometimes they need to be able to continue to receive those therapies and yet even though they are still medically necessary, they may not be covered by other existing programs. That may be particularly true for conditions such as autism spectrum disorder or fetal alcohol spectrum disorder, which at times may fall into a " gap group". This Bill would explore ways to provide a continuity of services and we feel that is very important.

EPSDT is a great program that helps children on Medicaid access necessary services. However, it ends when the child turns 21. The problem is that sometimes they need to be able to continue to receive those therapies and yet even though they are still medically necessary, they may not be covered by other existing programs. That may be particularly true for conditions such as autism spectrum disorder or fetal alcohol spectrum disorder, which at times may fall into a " gap group". This Bill would explore ways to provide a continuity of services and we feel that is very important.

HB-2217-HD-1

Submitted on: 2/27/2024 9:21:46 AM

Testimony for FIN on 2/28/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Cleota Brown	Hawaii Fetal Alcohol Spectrum Disorders (FASD) Action Group	Support	Written Testimony Only

Comments:

We strongly support HB2217, SD1 requiring the Department of Health, Human Services, and Education to research any rules, policies, and amendments to the medicaid state plan or medicaid 1915(c) waiver that are necessary to ensure provision of clinically appropriate treatments and services for individuals twenty-six years of age or younger with autism spectrum disorder or fetal alcohol spectrum disorder are covered under the following programs:

(A) The early and periodic screening, diagnostic, and treatment benefit under the State's medicaid program;

(B) Any applicable state special education services and programs; and

(C) The medicaid section 1915(c) home and community based services waiver for individuals with intellectual and developmental disabilities; and

(2) Make recommendations on any policy actions or funding that may be needed to implement the recommended rule, policy, or amendment to the medicaid state plan or medicaid 1915(c) waiver.

Increasing the age to twenty-six years is important for both autism spectrum disorders and fetal alcohol spectrum disorders. It's particularly important for this Legislature to correct the gap for people with a FASD, who have not had access to services or Medicaid in the State of Hawai'i for over a decade.

Thank you for bringing this legislation forward in the Thirty-second Legislature,

Sincerely yours,

Cleota G. Brown, President

Hawaii Fetal Alcohol Spectrum Disorders (FASD) Action Group



COMMITTEE ON FINANCE
Rep. Kyle T. Yamashita, Chair
Rep. Lisa Kitagawa, Vice Chair

Wednesday, February 28, 2024
2:00 p.m.
VIA VIDEOCONFERENCE
Conference Room 308
State Capitol
415 South Beretania Street

SUPPORT HB2217 HD1 RELATING TO HEALTH

Honorable Chair Yamashita, Vice Chair Kitagawa, and Members of the Committee:

On behalf of the Hawai'i Association for Behavior Analysis (HABA) we thank you for the opportunity to submit testimony in **strong support** of HB2217 HD1, which requires the Departments of Health, Human Services, and Education to research any rules, policies, and state plan amendments that are necessary to ensure that clinically appropriate treatments and services for individuals twenty-six years of age or younger with autism spectrum disorder or fetal alcohol spectrum disorder (FASD) are considered covered benefits under the State's Medicaid program.

HABA supports creating access to medically necessary applied behavior analysis (ABA) services across the lifespan for those with symptom presentation that necessitate treatment. **In our state, individuals over the age of 21 with an autism diagnosis can access their medically necessary services through their private health plan; however, as a QUEST beneficiary when they turn 21, they lose access to therapy.** This bill would help to move toward parity for QUEST beneficiaries, so that they too would be able to access their medically necessary services. Those with private insurance are already covered across the lifespan (there is no age cap).

As the Department of Education (DOE) continues to move toward Medicaid school-based claiming for federal reimbursement of services being provided in the public schools, we support any effort to draw in the maximum possible federal funds to cover these needed services. Currently, there is a gap for students who may remain in school until their 22nd birthday but lose access to their QUEST services at age 21. Additionally, our state currently limits coverage to an autism diagnosis and expansion to additional diagnoses would help more families and increase the opportunity for federal dollars supporting school-based services.

Other states, including New Mexico have successfully structured Medicaid coverage, with approved state plan amendments (SPA) and federal matching funds, for ABA for adults without an age cap.

There is a robust body of literature available supporting ABA which includes both clinical research applications for evidence-based treatment with adults as well as published generally accepted standards of care for coverage of ABA.



The Council of Autism Service Providers (CASP) is a nonprofit organization that publishes the generally accepted standards of care for medically necessary ABA—[Applied Behavior Analysis: Treatment of Autism Spectrum Disorder Practice Guidelines for Healthcare Funders and Managers](#) in its second edition published in 2020 notes “Treatment should be based on the clinical needs of the individual and not constrained by age [...] ABA is effective across the life span. Research has not established an age limit beyond which ABA is ineffective” (p. 18). It is worth noting that the CASP practice guidelines include a *selected bibliography*, not a comprehensive list of available research and the bibliography has not been updated since its original publication in 2014 (the selected bibliography includes 15 studies, three of which focus on adults). Research, including randomized control trials and metanalyses, have demonstrated the effectiveness of behavioral intervention for adults and many of these studies are housed by the National Library of Medicine.

In 2014, the nonprofit organization, Autism New Jersey, published a report titled [Insurance Coverage of Applied Behavior Analysis for Adults with Autism: A Review of the Evidence](#). In this report, the authors concluded “The robust empirical support for ABA-based interventions for children with autism combined with the effectiveness of focused ABA-based interventions for adults with autism make a compelling argument to require insurance coverage of ABA-based interventions for adults with autism” (p.7).

In 2015, the National Autism Center published the [National Standards Project, Phase 2: Addressing the need for evidence-based practice guidelines for autism spectrum disorder](#). This report reviewed research findings for adults age 22+ and found that there was a body of research available for behavioral intervention (ABA) with adults to conclude that ABA is the only established intervention meeting the criteria for evidence-based intervention.

The ABA Coding Coalition’s publication, [Model Coverage Policy for Adaptive Behavior Services](#) originally published in 2020 and revised in 2022, includes model health insurance coverage policy and a bibliography of research examples including adults and other neurodevelopmental conditions.

Extending coverage of ABA services to Medicaid eligible adults 21-26 years of age and those with a FASD diagnosis would be a significant step forward. This would greatly benefit our community by creating access to needed behavioral health services and addressing this health equity issue for a vulnerable population.

Mahalo,

Kristen Koba-Burd, BCBA, LBA, CDP
Legislative Chair
Hawai'i Association for Behavior Analysis

HB-2217-HD-1

Submitted on: 2/27/2024 9:34:41 AM

Testimony for FIN on 2/28/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Kelly McCloskey	Individual	Support	Written Testimony Only

Comments:

As a special education teacher who works with students with students with fetal alcohol syndrome, I fully support this bill. Families need ABA support at home to help teach their children.

HB-2217-HD-1

Submitted on: 2/27/2024 10:05:52 AM

Testimony for FIN on 2/28/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Kristen Davis	Individual	Support	Written Testimony Only

Comments:

As a dedicated professional working within the field of Applied Behavior Analysis (ABA), I have had the privilege of witnessing the profound impact that tailored services can have on individuals with disabilities. However, despite the remarkable strides made in ABA therapy, I have also observed the heartbreaking reality of individuals being denied access to these critical services or prematurely pushed out of treatment due to arbitrary age caps and restricted diagnosis coverage.

I wholeheartedly endorse House Bill HB2217 HD1. I believe that by passing this legislation, we can create a more just and compassionate society—one where individuals with developmental challenges are valued, supported, and given every opportunity to succeed.

HB-2217-HD-1

Submitted on: 2/27/2024 10:24:13 AM

Testimony for FIN on 2/28/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Kenichi Yabusaki	Hawaii Fetal Alcohol Spectrum Disorders Action Group	Support	Written Testimony Only

Comments:

Aloha Chairman and Representative Yamashita and Members of the Finance Committee:

As a member of the Board and Treasurer of the Hawaii FASD Action Group, we advocate for services to those individuals affected by FASD and all with Developmental Disabilities. To this end, these services must be extended via recommendations by the DOH, DHS, and DOE to amend the rules for Medicaid 15(c) Waiver for those individuals aged twenty-six years or younger affected by Autism Spectrum and/or Fetal Alcohol Spectrum Disorders. It is our responsibility to make the world possible for these individuals to thrive in our societies via the passage of HB2217. Please do not let the above individuals down and pass HB2217. Thank you.

Kenichi Yabusaki, Ph.D.

Hawaii FASD Action Group

DATE: February 27, 2024

TO: Representative Kyle Yamashita, Chair, House Finance Committee

Representative Lisa Kitagawa, Vice-Chair

Honorable members of the House Finance Committee

FROM: Ann S. Yabusaki, Ph.D., LMFT

RE: SUPPORT OF HB2217, HD1, Relating to Health

I am a psychologist and family therapist who has worked with persons and families with fetal alcohol spectrum disorders (FASD) for over 20 years. I urge the committee to support this bill that seeks to find ways of providing clinically appropriate services for people with autism spectrum disorder and FASD. Both of these developmental disorders are lifelong and individuals and families affected by these

As children with FASD become adults, there is less help, awareness, understanding, and accommodations for how their brain works. Support until at least 26 years old would give these individuals a chance to enter special employment training programs, educate employers and housing supervisors for those who are neurodivergent, and establish other supports important for success during these transition years.

Without proper long-term support, we find that some of our children with FASD may enter the criminal justice system, homeless population, substance abuse, and mental health treatment programs. The cost to the state would be much less if families and individuals were supported by the community.

Thank you for your consideration.

HB-2217-HD-1

Submitted on: 2/27/2024 11:10:28 AM

Testimony for FIN on 2/28/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Christina Libby	Mau Loa Learning LLC	Support	Written Testimony Only

Comments:

Letter of Support for HB2217 HD1 - Expansion of ABA Coverage and Inclusion of Fetal Alcohol Spectrum Disorders (FASD)

I am writing to express my strong support for House Bill 2217 HD1, which addresses the crucial issue of extending coverage for Applied Behavior Analysis (ABA) services to individuals up to the age of 26. Currently, QUEST coverage only extends to age 21, creating a gap in care for individuals who may still benefit from ABA services beyond this age.

Additionally, I applaud the inclusion of coverage for individuals with fetal alcohol spectrum disorders (FASD) in this proposed legislation. FASD is a complex and often overlooked condition that requires specialized care and support. The inclusion of FASD in the scope of coverage aligns with the growing awareness of the diverse needs of individuals with developmental and behavioral disorders.

Extending the age limit for ABA coverage is a significant step toward ensuring that individuals have continued access to essential services that can significantly impact their lives. ABA has proven to be an effective intervention for individuals with various developmental challenges, and the expansion of coverage will undoubtedly improve the quality of life for those affected.

Furthermore, recognizing the unique needs of individuals with FASD and providing coverage for their specific requirements is a commendable initiative. By addressing these needs, we are fostering a more inclusive and supportive healthcare system that prioritizes the well-being of all individuals, regardless of their developmental challenges.

I urge you to consider the long-term benefits that HB2217 HD1 can bring to the community by enhancing the scope of coverage for ABA services and embracing the inclusion of individuals with FASD. This bill represents a positive step forward in promoting the health and well-being of our citizens, and I wholeheartedly support its passage.

If you require any additional information or clarification regarding my support for HB2217 HD1, please do not hesitate to contact me. Thank you for your dedication to improving healthcare accessibility and addressing the diverse needs of our community.

Sincerely,

Christina Libby, M.S., BCBA, LBA

Mau Loa Learning, Founder and CEO

HB-2217-HD-1

Submitted on: 2/27/2024 12:21:01 PM

Testimony for FIN on 2/28/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Jessie Mitchell	Individual	Support	Written Testimony Only

Comments:

Rates for ABA services have remained the same since coverage started in 2015, despite increased costs of living. We need rate increases to meet the needs of children with autism in our state.

HB-2217-HD-1

Submitted on: 2/27/2024 1:26:09 PM

Testimony for FIN on 2/28/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Anna Reynolds	Individual	Support	Written Testimony Only

Comments:

I support HB2217. Please consider the value of ABA for Fetal Alcohol Syndrom and Autsim Spectrum Disorder.

HB2217 Applied Behavior Analysis (ABA)

Aloha, Chair Yamashita, Vice Chair Kitagawa, and Members of the House Committee on Finance,

Applied Behavior Analysis (ABA) has been a game-changer, not only for my son, but also our family, school staff and health providers.

A few years after the Hawaii autism health insurance bill became law in 2015, my son first received medically necessary ABA services through health insurance. He later received ABA as supplementary services to benefit from his special education program through the Department of Education (DOE) for a limited time during high school.

We need the Legislature to specify no age-cap in our statute so that medically necessary ABA services will start being covered for individuals diagnosed with autism who are 21 years old and older (still in special education or not) through the Medicaid insurance health plans. Evidence found in both research and legislative testimonies shows ABA autism services are medically necessary and beneficial, and autism does not end on the individual's 21st birthday.

I believe these individuals with an autism diagnosis are being discriminated against due to their disability – autism – by the state's Medicaid plan and programs; there is no substitute for ABA autism services/treatment. I also believe the federal and state mental health parity laws require these mental health services be covered to the same extent as physical health services.

Because of my experience and knowledge, I do not support the current Medicaid waiver program's substitution for ABA services. The purpose and scope of the program are not the same as for ABA services provided under a Medicaid health insurance plan. Reference: SR114, SD1, Adopted 2022. Department of Human Services testimony: "The waiver services for individuals with Intellectual/Developmental Disabilities are delivered by the Department of Health's Developmental Disabilities Division. While they do not provide Applied Behavioral Analysis (ABA) per se, similar services are provided to individuals who are 21 and older." (Mar. 21, 2022) https://www.capitol.hawaii.gov/session/archives/measure_indiv_Archives.aspx?billtype=SR&billnumber=114&year=2022

There has been limited to no availability of providers through the I/DD Waiver program. I am concerned that these Medicaid beneficiaries diagnosed with autism, age 21 and older, must give up their choice of providers as well as their privacy for mental health needs to seek eligibility (a long and costly process) for the waiver program's limited services by a licensed behavior analyst and registered behavior technician. Another consideration for these Medicaid beneficiaries who may be provided with an annual Medicaid I/DD Waiver budget to cover community learning services and respite is that they may not be able to access entitled services because of inappropriate behaviors due to their disability (**treatable by ABA**), defeating the purpose of I/DD and HCBS services to keep such individuals at home and in the community, not an institution.

Thank you for the opportunity to provide testimony **in support of extending ABA coverage under Medicaid health plans to beneficiaries diagnosed with autism, age 21 and older.**

Linda Elento, February 28, 2024, 2:00 PM, FIN