

Lorri Unumb**Senior Policy Analyst and Counsel with Autism Speaks**

Parent of a 7-year-old son with autism

Attorney: U.S. Department of Justice

Law professor at George Washington University Law School

But I gave up that career to advocate full-time on behalf of kids with autism when I saw the inequity in the insurance arena.

Autism is a medical condition, diagnosed by a medical doctor. Treatment prescribed by doctor.

Although there is no known cure for autism, it can be treated. The most common treatment protocol involves a therapy called "Applied Behavior Analysis," or ABA. This is a therapy that has been used for many decades to treat autism, and yet the insurance industry continues to deny coverage for ABA therapy on the basis that it is "experimental." That self-serving conclusion is simply not supported by the science, and the Surgeon General, the National Research Council, and the AAP all have endorsed ABA.

Studies show that, if administered intensively and by properly-trained therapists, approximately half of the treated kids will "overcome" their autism to such an extent that they can enter 1st grade indistinguishable from their peers. And the other half make significant gains, too, such that they need less support for the rest of their lives. (Lovaas, UCLA 1987)

As I mentioned, though, ABA must be administered intensively, often 40 hours/week. And this, of course, makes it expensive. My own son's autism is very severe, and his therapy has cost us, out-of-pocket between 75 and 80 thousand dollars each year. Fortunately, we have really good jobs and were able to sacrifice to afford the therapy for our son, but how many Montana families do you know that have that kind of money to sacrifice? Most don't, and most of those children are going untreated. It's unfair, given that these families are paying premiums every month to cover their kids.

A 2006 Harvard study found that if a child with autism is not properly treated, that one child costs the state \$3.2 million over their lifetime in education and institutionalization costs. (Ganz 2006)

Faced with this reality, other states have started requiring insurers to play their part. In the last two years, seven states have passed this legislation:

South Carolina (2007)

Texas (2007)

Arizona (2008)

Louisiana (2008)

Pennsylvania (2008)

Florida (2008)

Illinois (2008).

Indiana passed a similar bill 8 years ago, only their bill had no dollar cap on treatment for ABA, whereas this bill and the others that have recently passed limit the insurance industry's exposure.

One of the reasons I'm here today is because I wrote the SC bill that started this recent movement toward coverage, and I've seen it successfully implemented. And I can tell you, despite the doomsday predictions from the insurance lobby, there's been no mass exodus of insurers, no businesses throwing in the towel because of this benefit. Indeed, experience indicates the impact on premiums has been negligible. In Indiana, the DOI called the financial impact "unmeasurable" even years after the coverage became effective.

The insurance industry's own association – the Council for Affordable Health Insurance – estimates that mandated autism benefits increase premium costs by LESS than 1%.

Autism Speaks contracted with independent actuarial firm to conduct a cost analysis. Also arrived at less than 1%, or .51% to be specific.

Montana's fiscal note:

Estimated treatment cost at \$75/hour

Assumed that all kids were use benefit

Only of ASD is 1/3 autistic disorder

Utilization projection (40%)

Average age of diagnosis

\$30.14 per month more like in the range of \$1.60 per month

Further, the overall impact on the economy has been positive, particularly in terms of job creation. A funding stream for therapists offers good employment opportunity during these tough economic times.

Finally, I would ask you to vote this bill out of committee today because it is simply the right thing to do. You know, I hear so many people complain about paying taxes and griping about how high taxes are. It is my dream for my son that someday he may get to pay taxes. And I'm sure all of the parents in this room share that dream.

You can help make that a reality by passing this bill to give Montana children the treatment they deserve and the treatment that children in other states are now getting.

Applied Behavior Analysis

An Example of a Typical Structure



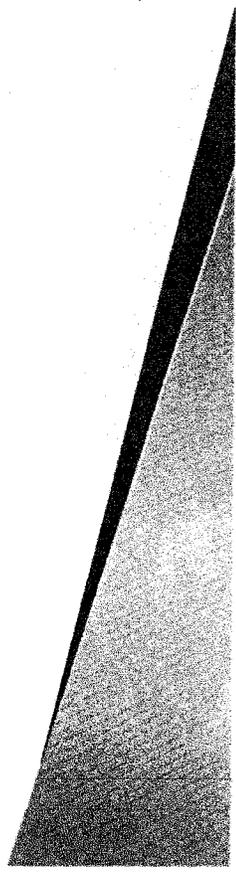
- **Consultant (Coordinator)**
 - Highly educated and trained
 - Board certified
 - Designs, oversees, trains
 - 3 hours per month

- **Lead therapist (senior therapist)**
 - Highly educated and trained
 - Updates programming; trains, oversees
 - 5 hours per week

- **Line therapists**
 - Often college students, trained by above
 - Provide 40 hours per week of direct therapy, usually in 3-hour shifts
 - Usually paid about \$10 per hour (SC Medicaid rate starts at \$8/hour)

Excerpt from 2008 CAHI Chart: “Health Insurance Mandates in the States”

BENEFITS:	Est. Cost	#
Alcoholism	1-3%	45
Autism	<1%	11
Contraceptives	1-3%	31
In Vitro Fert.	3-5%	13
Prescriptions	5-10%	2



There are 5 Pervasive Developmental Disorders.

Within the 5 PDDs, there are 3 Autism Spectrum Disorders (ASDs).

