

Bridging the Gap: Supporting Families with Children who have Autism Spectrum Disorders

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Brief overview

What is Autism Spectrum Disorders?

This workshop will provide a clinical and diagnostic summary of Autism Spectrum Disorders.

What does current law and rule dictate?

This workshop will provide an overview of the current status of Florida Statutes and Administrative Code regarding eligibility and supports for children with ASD (Autism Spectrum Disorder).

How has this worked?

This workshop will provide one case study as how one family worked with many managing entities to obtain services and supports.

Key Takeaways?

This workshop will provide key resources to such services and supports.

Testing your knowledge!

-Poll Question #1: Do you know the clinical and diagnostic criteria of Autism Spectrum Disorder ?

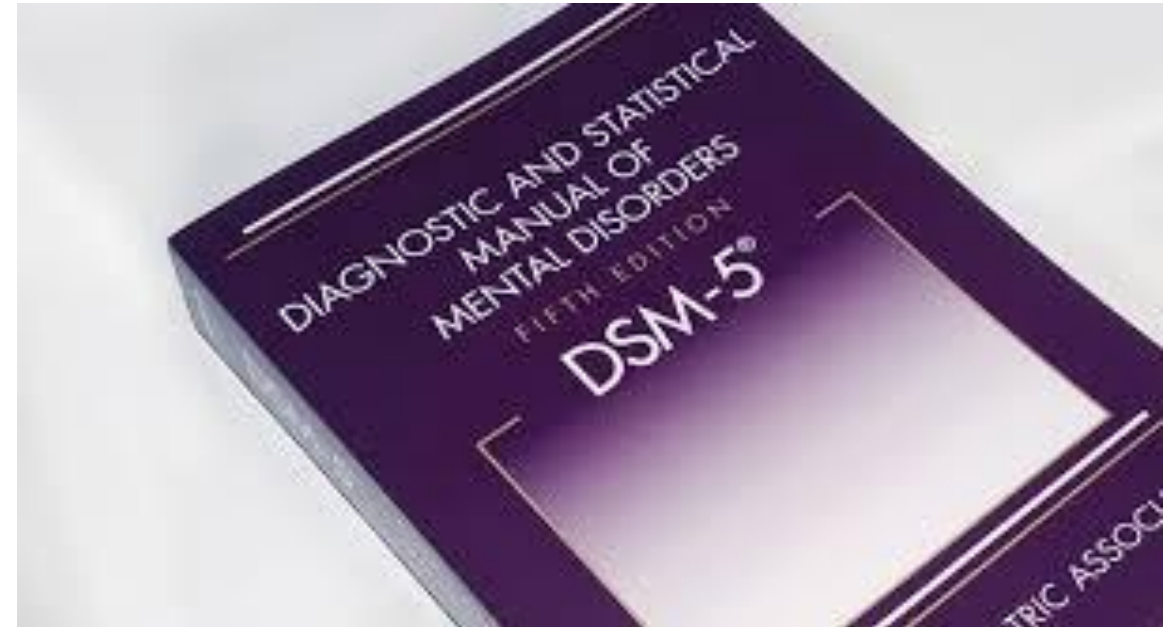
Yes

No

Autism Spectrum Disorder defined! (American Psychiatric Association, 2013)

Autism Spectrum Disorder 299.00 (F84.0)

- Persistent deficits
 - Social-emotional reciprocity
 - Nonverbal communication
 - Developing, maintaining, and understanding relationships
- Restricted repetitive patterns of behavior
 - Stereotypical behavior
 - Insistence on routine
 - Fixated interests
 - Hyper or hypo sensitivity



Testing your knowledge!

-Poll Question #2: A person with ASD also has intellectual disability?

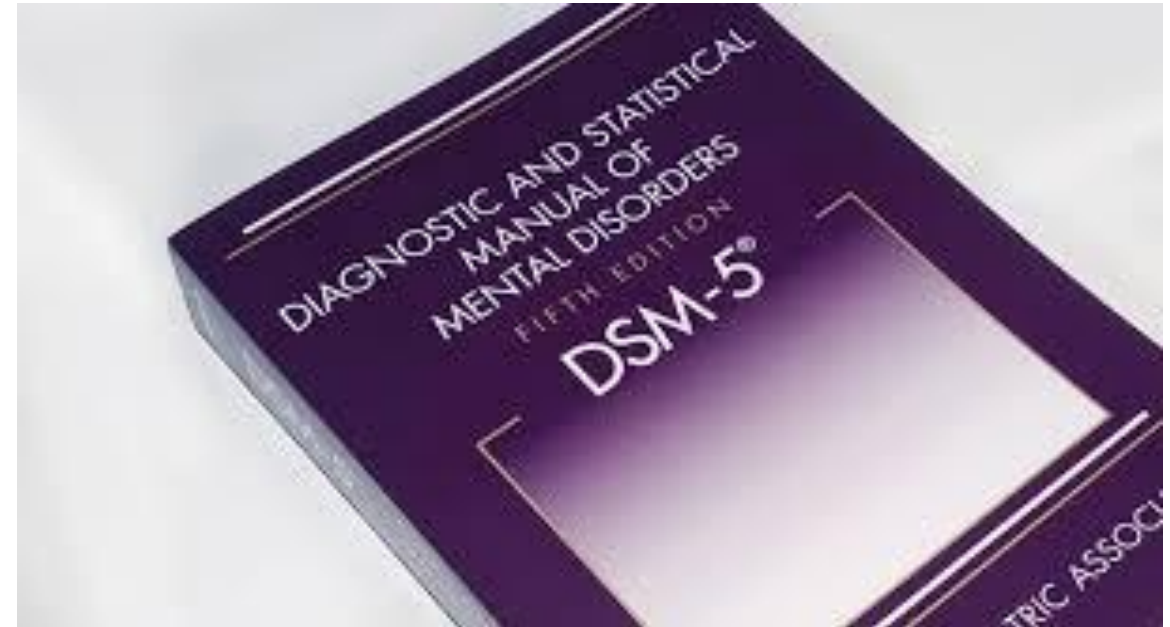
True

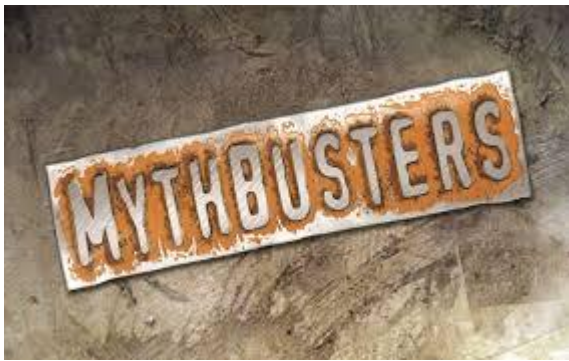
False

Autism Spectrum Disorder defined! (American Psychiatric Association, 2013)

Autism Spectrum Disorder 299.00 (F84.0)

- Differential diagnostics are necessary to rule in/rule out
 - Intellectual disability
 - Language impairment
 - Medical and/or genetic disorders
 - Neurodevelopmental disorders
 - Mental (health) disorders
 - Behavioral disorders





-When working with ONE child or adult with a diagnosis of ASD....

YOU HAVE WORKED WITH ONE CHILD OR ADULT WITH A DIAGNOSIS OF ASD! (People first language also please!?)



The state of Florida's service delivery system

Autism, Section 393.063(5), F.S.

“Autism” means a pervasive, neurologically based developmental disability of extended duration which causes severe learning, communication, and behavior disorders with age of onset during infancy or childhood. Individuals with autism exhibit impairment in reciprocal social interaction, impairment in verbal and nonverbal communication and imaginative ability, and a markedly restricted repertoire of activities and interests.

Autism, Rule 65G-4.014, Florida Administrative Code

- (1) Autism means a-condition which meets the requirements of Section 393.063, F.S., that the condition is:
 - (a) Pervasive
 - (b) Neurologically based
 - (c) With extended duration
 - (d) Causes severe learning disorders evidenced by at least 6 of the following 12 from subparts 1 and 2, and at least one from subpart 2.

Autism, Rule 65G-4.014, Florida Administrative Code

Severe communication disorders, which may include:

- a. Delay in, or total lack of, spoken language
- b. Stereotyped and repetitive use of language
- c. For those with speech, marked impairment in nonverbal behaviors
- d. Failure to develop peer relationships
- e. Lack of spontaneous enjoyment, interests, or achievements

Autism, Rule 65G-4.014, Florida Administrative Code (continued)

- f. Lack of social or emotional reciprocity
- g. Marked impairment in the ability to initiate or sustain conversations
- h. Impaired imaginative ability

Autism, Rule 65G-4.014, Florida Administrative Code (continued)

2. Severe communication disorders, which may include (continued from previous slide):
 - a. Preoccupation with one or more stereotyped and restricted patterns of interest
 - b. Inflexible adherence to specific, nonfunctional routines or rituals
 - c. Stereotyped and repetitive motor mannerisms
 - d. Persistent preoccupation with parts of objects

Testing your knowledge!

Poll question #3

All children and adults with a diagnosis of ASD are eligible for services provided by the Agency for Persons with Disabilities.

True

False

Sources of Documentation to Assist in Applying Rule 65G-4.014 to Eligibility for Autism

Developmental Histories- including genetic, medical, emotional/behavioral, and learning disorders.

- Autism is a disorder that is neurologically based, limitations to hearing, vision, and motor functions that are actually physical impairments need to be considered when making a determination of eligibility.
- Developmental Milestones- reports of such milestones may be more accurate the closer in time to when they are actually reported or permanent products such as video.

Screening Instruments for Autism- These are tools which trigger a professional to refer for further evaluation or to evaluate the child further.

** Please be aware that simply meeting the “autism” cut-offs, or having a diagnosis of autistic disorder, may not be adequate to establish eligibility for APD services under the category of autism. Please note there are no strict guidelines on what should be considered screening versus diagnostic instruments.*

iBudget Florida HCBS Waiver Eligibility Work Sheet

APD VS. Waiver Eligibility

- ❖ Not all APD eligible clients meet the level of care criteria for an ICF/IID or the Waiver
- ❖ Refer to the Waiver Eligibility Worksheet

Name: _____ SS#: _____
 Region: _____ Support Plan Effective Date: _____

I. Level of Care Eligibility:
 The individual is an APD client with a Developmental Disability who meets one of the following criteria and is eligible to receive services provided in an ICF/DD. Check the criteria that are met.

Option A. The individual's primary disability is Intellectual Disability with an intelligence quotient (IQ) of 59 or less.

Option B. The individual's primary disability is Intellectual Disability with an intelligence quotient (IQ) of 60 to 69 inclusive and the individual has at least one of the following handicapping conditions OR the individual's primary disability is Intellectual Disability with an intelligence quotient (IQ) of 60 to 69 inclusive and the individual has severe functional limitations in at least three of the major life activities. Please check all handicapping conditions and major life activities that apply.

Option C. The individual is eligible under the category of Autism, Cerebral Palsy, Down Syndrome, Prader-Willi Syndrome, Spina Bifida, or Phelan-McDermid Syndrome and the individual has severe functional limitations in at least three of the major life activities. Please check all handicapping conditions and major life activities that apply.

Handicapping Conditions			Major Life Activities	
<input type="checkbox"/> Ambulatory Deficits	<input type="checkbox"/> Behavior Problems	<input type="checkbox"/> Epilepsy	<input type="checkbox"/> Self Care	<input type="checkbox"/> Mobility
<input type="checkbox"/> Sensory Deficits	<input type="checkbox"/> Autism	<input type="checkbox"/> Spina Bifida	<input type="checkbox"/> Understanding and Use of Language	<input type="checkbox"/> Self Direction
<input type="checkbox"/> Chronic Health Problems	<input type="checkbox"/> Cerebral Palsy	<input type="checkbox"/> Prader-Willi Syndrome	<input type="checkbox"/> Learning	<input type="checkbox"/> Capacity for Independent Living
<input type="checkbox"/> Phelan-McDermid Syndrome	<input type="checkbox"/> Down Syndrome			

II. Medicaid Eligibility:

A. Individual has a current Medicaid number. Medicaid # _____

B. Individual was referred for Medicaid eligibility on _____ (MM/DD/YY)

The result was: Eligible Ineligible Date of Determination: _____

III. Eligibility Determination: Check the correct statement:

A. Individual has met Level of Care Eligibility (I), has a Medicaid number (IIA), and is eligible for waiver services.

B. Individual has not met the Level of Care Eligibility in I and/or II and, therefore, is not eligible for waiver services.

Support Coordinator (Signature): _____ Date: _____
 Agency: _____

IV. Choice: Only to be completed at the time of initial Waiver enrollment and every 365 days thereafter. I have received an explanation of home and community-based services.
 (CHOOSE ONE OF THE FOLLOWING)

A. I have been offered waiver services, and I choose to receive community-based supports and services. I understand that I have a choice of enrolled eligible providers.

B. I choose to receive institutional services and prefer services to be provided in an institutional setting.

Individual (Signature): _____ Date: _____
 Legal Representative or Witness (Signature): _____ Date: _____
 Printed Name of Rep. or Witness: _____ Relationship: _____

* Federal law requires the collection of your social security number as a condition of eligibility for Medicaid benefits under 42 U.S.C. 1320b-7 and the agency will collect, use, and release the number for administrative purposes as authorized under law.

Waiver Eligibility

- ❖ Option A. The individual's primary disability is Intellectual Disability with an intelligence quotient (IQ) of 59 or less.
- ❖ Option B. The individual's primary disability is Intellectual Disability with an intelligence quotient (IQ) of 60 to 69 inclusive and the individual has at least one of the following handicapping conditions OR the individual's primary disability is Intellectual Disability with an intelligence quotient (IQ) of 60 to 69 inclusive and the individual has severe functional limitations in at least three of the major life activities. Please check all handicapping conditions and major life activities that apply.
- ❖ Option C. The individual is eligible under the category of Autism, Cerebral Palsy, Down Syndrome, Prader-Willi Syndrome, Spina Bifida, or Phelan-McDermid Syndrome and the individual has severe functional limitations in at least three of the major life activities. Please check all handicapping conditions and major life activities that apply.

Question?

What is “aging out” of MSP (Medicaid State Plan)?

Will my child retain all of his/her services/supports?

Supports and services



- Identification of need
- Identification and assistance with accessing needed government and community supports
- “Warm Handshakes” with community providers
- Follow up

Case study

Mrs. Allison Leatzow



Next Steps

- Seek out “Best Practice”
- Develop Action Plans
- Pay it forward
- Share resources

You are not alone!

- Reach out via grassroots groups!
- Communicate!
- Be diligent and steadfast!
- Listen more... talk less!
- Share resources

THANK YOU FOR ALL THAT YOU DO!