

## Priority: Adequate Insurance and Financing

This is a typed summary of all small groups' comments and feedback on the draft plan to improve systems of health care and related services for children and youth with Autism Spectrum Disorders (ASD) and other developmental disabilities (DD) in Central Maryland including Anne Arundel, Baltimore, Baltimore City, Carroll, Harford, and Howard Counties as well as across the entire state. Groups' comments and feedback are in red type. Areas highlighted in yellow indicate that there was not enough information on written group feedback forms to be sure of the meaning.

### Strategy: Catastrophic Illness Relief Fund

Time Table	<i>Now-expand</i>
CURRENT Partners	
POTENTIAL Partners	
Existing Initiatives	<p><i>Comments:</i></p> <ul style="list-style-type: none"> <li><i>• Are there any non-profits interested in raising the money?</i></li> <li><i>• 529-type of plan for individuals with disabilities</i></li> <li><i>• An idea for raising money would be to give Marylanders the option to donate \$1.00 at driver's license renewal for the catastrophic fund</i></li> </ul>
Related Resources	

### Strategy: Medicaid Buy-In Program

Time Table	<i>Now – partner and expand</i>
CURRENT Partners	

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POTENTIAL Partners	
Existing Initiatives	<i>Pathfinders for Autism, the Parents Place of Maryland advocacy training</i>
Related Resources	<p><i>Comments:</i></p> <ul style="list-style-type: none"> <li>- <i>Need to know the costs – identify avenues and individuals by geographic area.</i></li> <li>- <i>Public awareness and advocacy to parents to request Occupational Therapy (OT), Physical Therapy (PT), etc.</i></li> <li>- <i>Consider public/private partnership for funding support</i></li> <li>- <i>Families need increased access to community-based supports as well as financing for the supports through the expansion of Home and Community-based services waiver and other waivers designed to help families to access all of the necessary services to help their children and you with DD live in the community</i></li> <li>-</li> </ul>
Other Strategies	<i>Expand the Home and Community Based Services Waiver (HCBS 1915c) to include slots for CYSHCN</i>
<b>Strategy: Family-Led Policy Influence Infrastructure</b>	
Time Table	<i>ASAP</i>
CURRENT Partners	
POTENTIAL Partners	<i>Sickle Cell disease association; any disability advocacy group</i>
Existing Initiatives	<i>The Parents’ Place of Maryland, Pathfinders for Autism advocacy training</i>
Related Resources	<i>Comments:</i>

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- Alliance with healthcare providers; school-based training for advocacy
- Businesses need to be educated on how offering proper/appropriate insurance for employees will help them in the long run
- Find a wealthy sponsor

### Strategy: Provider Training (medical billing and coding)

*Comment: Add training on advocacy and lobbying*

Time Table	<i>1+ years out from feasibility</i>
CURRENT Partners	
POTENTIAL Partners	<i>Comment: Henry Bogdan from Maryland Non-profits who teaches a class for 501 C3's to learn the difference between lobbying and advocacy, but the class is expensive. The idea is for a group of 501 C3's to get together and pay him to come out and do the training for all the groups together (at the same time). (It is expressed at the table that) 501 C3's are fearful of losing their non-profit status and it is one of the reasons why more advocacy is not done. More training is the proposed solution!</i>
Existing Initiatives	
Related Resources	<i>Comments:</i> <ul style="list-style-type: none"> <li>- Autism Family services should partner with other for-profit services</li> <li>- Create workshops among different organizations – how to testify; demonstrations; role playing</li> </ul>
Other Strategies	<i>Streamline and divide LISS funding allocation across quarters ( universal language for LISS requirements)</i>  <i>Engage insurance companies/ insurance commission</i>

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	<p><i>Reach out to Bill Gates Foundation</i></p> <p><i>Public/private partnerships – private foundations, rich athletes, actors who are looking to start a foundation</i></p> <p><i>Start a non-profit to generate funds (like Autism Speaks but Maryland-based)</i></p>
Comments	<ul style="list-style-type: none"><li>- <i>No resources for undocumented CYSHCN</i></li><li>- <i>There are no CPT codes for certain needed tests</i></li><li>- <i>Simplify process: healthcare insurance and Managed Care Organizations (MCOs)</i></li><li>- <i>Insurance Commission – change criteria for simplifying process and providing care</i></li><li>- <i>Barrier: Availability of needed medicines decreases because of the new Universal Healthcare law</i></li><li>- <i>Lack of awareness around Rehabilitative Care Act</i></li><li>- <i>LISS funding is gone too soon; rules for applying vary from organization to organization. For example, one organization in Baltimore treated applications that were mailed in differently than those hand-delivered- the hand-delivered ones were funded first.</i></li><li>- <i>Donate a \$1 at license renewal to Catastrophic Illness Fund</i></li><li>- <i>Telemedicine is not reimbursed. We need to ask the law (Medicaid) to allow providers to practice up to the level the technology makes possible.</i></li></ul> <p><b><i><u>Comment:</u> Senate Bill 781, Health Insurance- Coverage for Services Delivered Through Telemedicine, was signed into law in May 2012 and went into effect on October 1, 2012.</i></b></p>

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*The Law requires health insurers and MCO's to cover services appropriately delivered through telemedicine. Insurers are not required to cover services that are not already covered within the patient's benefit or services provided by out-of network providers. Telemedicine is defined as health care service provided through interactive audio, video, or other telecommunications and electronic technology. It does not include audio-only phone conversations, e-mail messages, or faxes between a provider and a patient.*

*Also, in May 2013 Governor Martin O'Malley signed Senate Bill 776, Telemedicine Task Force- Maryland Health Care Commission into law. The law requires the Maryland Health Care Commission (MHCC) and the Maryland Health Quality and Cost Council to convene a task force that will identify opportunities to expand the use of telemedicine throughout the state in the effort to improve health status and delivery, particularly in rural areas. The task force began meeting in July, 2013.*

- *Recommendation to DDA: LISS money should be quartered so that if the need does not exist in the first two weeks of July, a family can still access funding in the last two weeks.*
- *DDA has funding available for deaf/ hard of hearing children with special needs; however, often families cannot access the funding because intellectual functioning tests as 'too high'. These children present cognitive delay but not severe enough to qualify. DDA must re-consider their qualifications criteria.*
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### Questions

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