

Good morning. My name is Dr. Ruth Anan and I wish to thank Representatives Angerer and Ball for sponsoring House Bills 4183 and 4476. I also thank Chairman Corriveau for allowing me to testify today. I am both a Licensed Psychologist and a Board Certified Behavior Analyst. For more than the last decade I have worked at William Beaumont Hospital in Royal Oak where I am the Director of the Early Childhood Program at the Center for Human Development. I am pleased that my testimony today, in favor of these House Bills, is fully supported by Beaumont Hospitals.

My professional responsibilities include conducting diagnostic evaluations as part of a multidisciplinary team. When we conclude that a child has an Autism Spectrum Disorder, I am faced with the difficult task of delivering *bad news* to parents. Many times, parents already suspect this and I must confirm their fears. On other occasions, this diagnosis comes as an unwelcome surprise and parents are totally unprepared for this *bad news*.

After learning this news, parents often ask me, what would I do if my child had Autism? Being schooled in the research literature, I tell them I would seek intensive, evidence-based, behavioral intervention as there is ample data demonstrating that this can make a world of difference in children's lives, especially when treatment starts early. But although this message should have been *good news*, years ago, it was not. Instead, I was describing a treatment that was almost nonexistent in Michigan.

In an effort to offer parents some *good news*, my colleagues and I visited treatment centers in other states, such as the Cleveland Clinic's Autism Program, and we were excited to see their success with even very severe cases of Autism. Our desire to bring this *good news* to Michigan led to the inception of Beaumont's HOPE Center in late 2002. Due to the lack of insurance reimbursement in our state, we developed an intensive, but short-term, parent-training model, allowing treatment to be more cost efficient. Having parents become the agent of change not only makes treatment considerably less expensive, but it also gives parents a sense of empowerment as they see their own efforts produce gains in their children.

I'll never forget one particular mother who learned the skills to help her son, Andrew, say his first words. This feat was particularly remarkable as this child entered treatment with serious behavior problems. He frequently hit his head against the wall, the floor, and, when his mother tried to restrain him, he would smack his head against her. Both mother and child were bruised and distraught. Witnessing this child's progress, and that of many others, was the *best news* I had experienced thus far in my career.

In order to share the *good news* we were seeing in our parent-training intervention, we recently published details of our treatment outcomes in a peer-

reviewed, scientific journal. Even more *good news* came when the health insurance offered to Beaumont employees, and a few other health insurance companies as well, began to provide coverage for this model of treatment.

Although our parent-training program costs only a fraction of traditional treatment models, it still remains financially out of reach for many. Moreover, because it places a significant burden on parents as the primary providers of intervention, it is simply not feasible for some families. Therefore, in 2004 we added a program offering intensive, professionally-implemented, behavioral therapy. However, thus far, only a few out-of-state insurance companies have covered this more expensive, but medically necessary treatment.

From 2005 to 2007, I was part of the ASD Work Group, established by the State of Michigan Human Services' Directors. I served on the subcommittee charged with examining the level of evidence supporting different Autism treatments. Based on the scientific rigor of published outcome data, we determined where each treatment fits on this rating system. The *good news* is that a growing number of agencies in Michigan, including the HOPE Center, offer treatment consistent with the highest level of scientific evidence, termed: "Well-Supported, Efficacious Practice." However, without the passage of these House bills, very few families can take advantage of this *good news*.

I don't expect that in my lifetime I will be able to stop giving the *bad news* of an Autism diagnosis to families. But I am hopeful that some day soon the *bad news* will be mitigated by the *good news* that we have evidence-based intervention available across Michigan and that insurance coverage allows this treatment to be affordable to families in our state.