

SB_244
Colorado Business Affairs and Labor Committee
April 29, 2009

Helena Huckabee, Ph.D., BCBA-D

Members of the Committee: Thank you for the opportunity to testify.

I'm Doctor Helena Huckabee. I formerly graduated as the Outstanding Senior from the CO School of Mines. I am now a licensed Clinical Psychologist, a Pediatric Neuropsychologist and a Board Certified Behavior Analyst. I am a member of the Colorado Psychological Association, the American Psychological Association, the Colorado Neuropsychological Society, and the Association for Behavior Analysis International. I am also Adjunct Faculty at the University of Denver.

I have specialized in treatment, diagnosis, and research of Autistic Spectrum Disorders for almost 13 years including establishing treatment programs for Autism at the Universities of Houston, Texas, and Colorado, and Texas Children's Hospital. I'm also the mother of a teenager with Autism who was diagnosed when I was in psychology graduate school.

Autism is a congenital brain disorder whose incidence is increasing exponentially and now occurs in one out of every 150 children. Autism is 10 times more common than juvenile diabetes, muscular dystrophy, childhood leukemia, and cystic fibrosis combined.

Autism typically reveals its unwelcome face in toddlers; when life has barely begun. Autism profoundly impacts the capacity to communicate and interact with others – skills which are essential for making friends, passing school, and holding a job. Autism is typically lifelong and costs twice as much as the typical American in direct medical costs¹.

Adequate treatment for autism generally requires 10-25 hours per week of therapy with the highest number of hours in children under 6 years of age. But many children are diagnosed late, or are more severe, and require therapy at older ages. Such treatment requires highly skilled therapy teams and is expensive. Indeed, non-profit organizations here in Denver already charge as much as \$65k/year for treatment of Autism.

Without insurance coverage for autism, almost no one can afford treatment. Desperate families frequently pursue legal avenues to try and secure treatment. Parents typically have to quit their jobs or take lower-paying jobs to give them time and flexibility to care for their children with autism. This is the state of affairs in Colorado today. Each of you has the opportunity today to help change that.

Without adequate treatment, individuals with Autism are likely to remain mentally retarded or profoundly socially impaired. Individuals with mental retardation will always require extensive special education services and, subsequently, never live or work independently as adults. This has profound fiscal implications for the State of Colorado.

Approximately 20 years of research from varied and reputable academic institutions across the US demonstrates significant improvement in IQ as a result of early Applied Behavior Analysis (ABA) therapy. Specifically, the data in your handout highlights several of these group studies that show an average gain of about 25 IQ points when children receive adequate behavior analytic therapy.

I'd like to draw your attention to Figure 1. This shows that individuals in the treatment groups achieved substantially higher IQ's than those who received less treatment or alternate treatment. Figure 2 shows that the outcome IQ's for individuals in the treatment groups were no longer in the mentally retarded range (Above 70). Sadly, individuals who did not receive early ABA typically remained mentally retarded.

Research from the University of Connecticut found as many as 20% of individuals who received effective treatment at an adequate dose lost the diagnosis of any Autistic Spectrum Disorder after just 2 years of treatment². Recognizing the effectiveness of treatment for autism, a 2009 Blue Cross/Blue Shield Special Report acknowledges that autism research involving no-treatment controls is unethical³.

Inadequate treatment of Autism currently costs the state of Colorado billions of dollars. The Harvard School of Public Health estimates societal costs of just one person with Autism to be \$3.2MM⁴. As a result, covering adequate treatment would likely provide the state of Colorado over \$555MM in otherwise lost state income tax alone. I've provided you with this article.

You will hear arguments today that this bill will hurt small business owners and require health insurance companies to substantially increase premiums. However, it is estimated that providing coverage for treatment of Autism would increase insurance premiums by less than 1%⁵. I am a small business owner who provides health insurance for my staff.

Passing this bill would mean that adequate and effective treatment for Autism is no longer only available for the very wealthy or very lucky and provide millions of dollars for the state of Colorado. I urge you to vote yes. I've cited my references on your handout.

1. Alemayehu, B. & Warner, K. E. (2004). The lifetime distribution of health care costs. *Health Services Research* 39:3, pp. 627-642.
2. Sutera, S., Pandey, J. et al. (2007). Predictors of optimal outcome in toddlers diagnosed with autism spectrum disorders. *Journal of Autism and Developmental Disorders*, Vol 37(1), pp. 98-107.
3. Technology Evaluation Center (2009). Special report: Early intensive behavioral intervention based on Applied Behavior Analysis among children with Autism Spectrum Disorders. BlueCross BlueShield Association, Assessment Program, Vol. 25, No. 9, pp. 1-62.
4. Ganz, M. L. (2007). The lifetime distribution of the incremental societal costs of autism. *Archives of Pediatric and Adolescent Medicine*, Vol. 161, pp. 343-349.
5. Boudier, J. N., Spielman, S. & Mandell, D. S. (2009). Brief report: Quantifying the impact of autism coverage on private insurance premiums. *Journal of Autism and Developmental Disorders*, Published online: February 13, 2009.

IQ Gain by Group

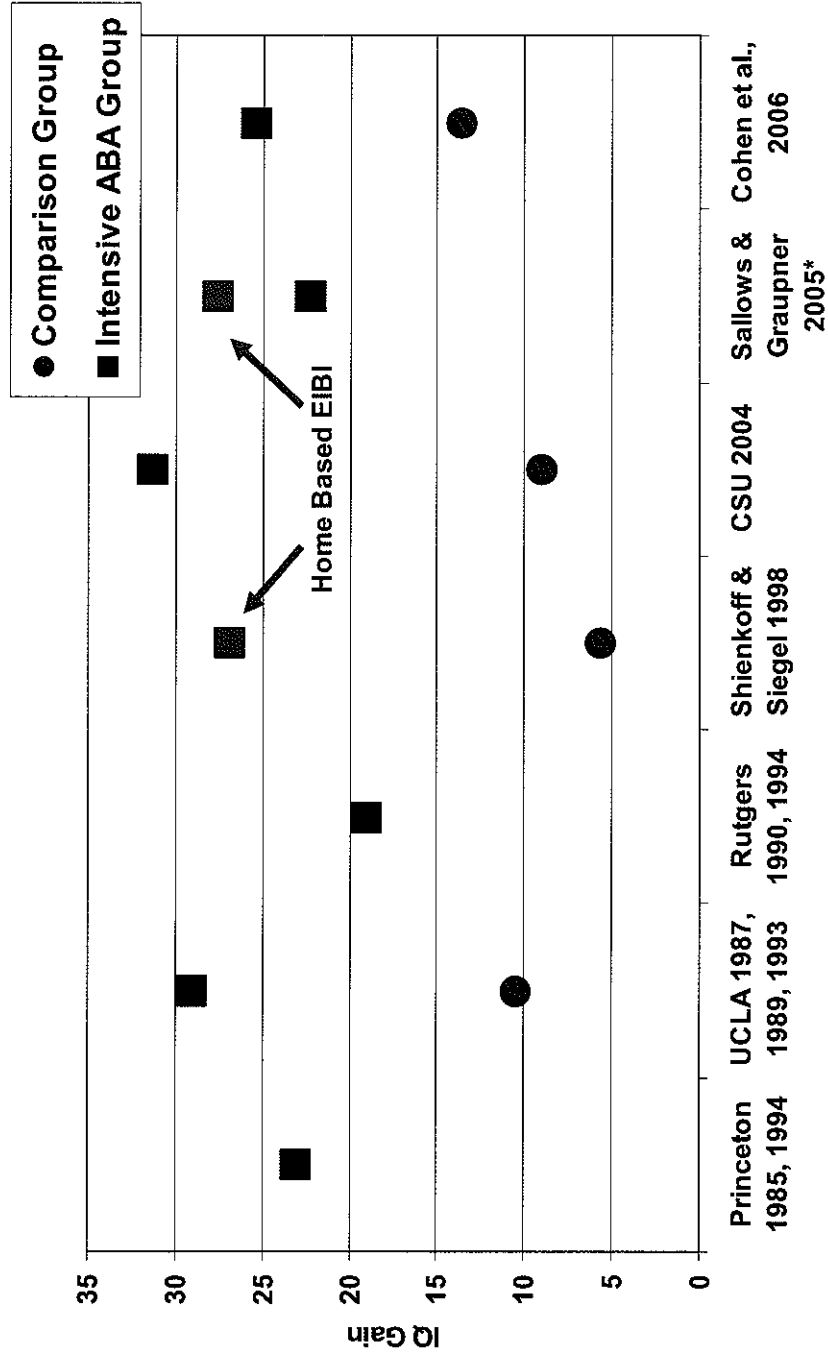


Fig. 1 Children who received Intensive ABA treatment achieved substantially higher IQ's than people who got less or no treatment

Intensive ABA Group Outcomes

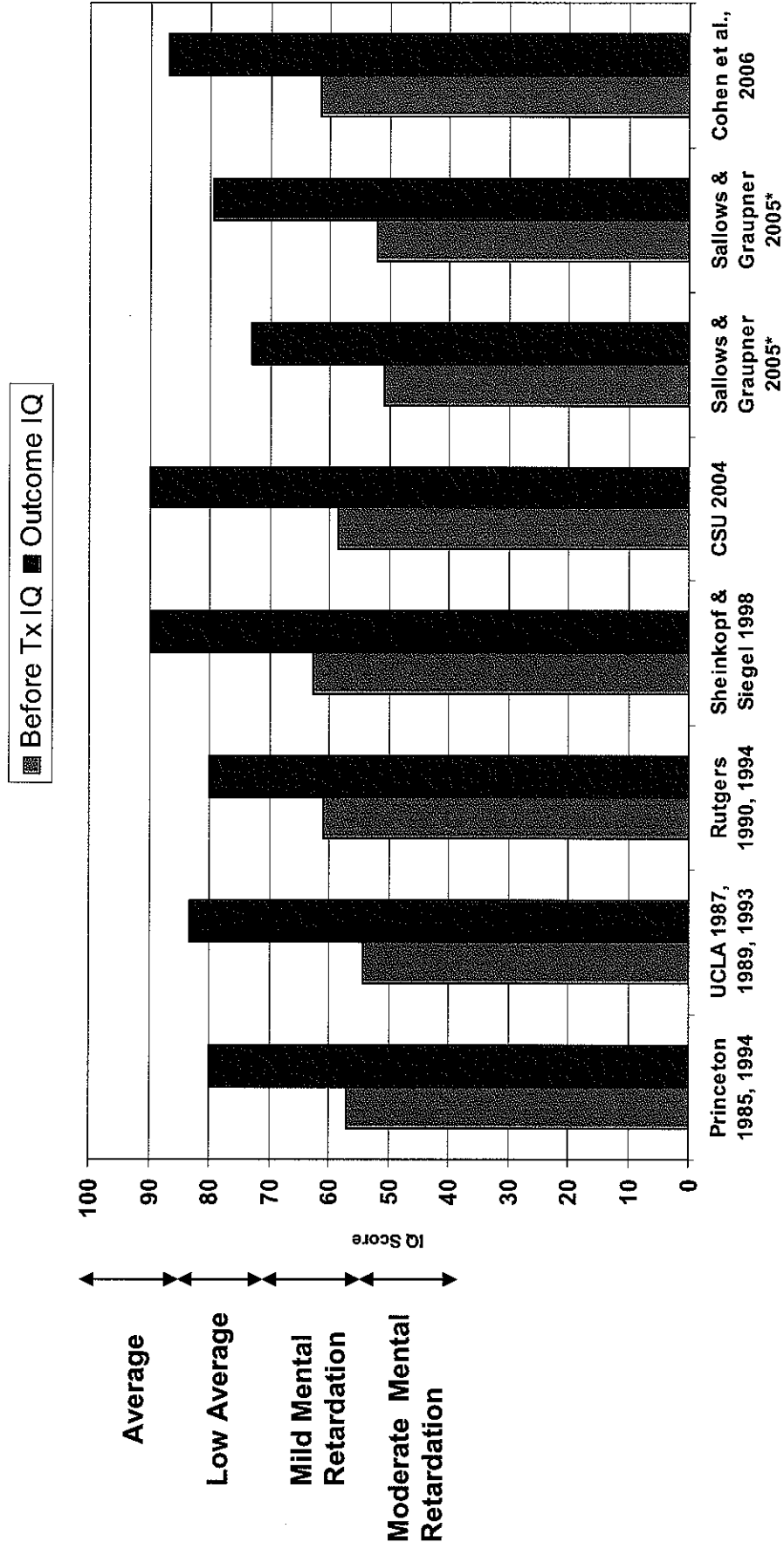


Fig. 2. Individuals who received Early ABA were typically no longer mentally retarded after treatment.