

United States Senate

WASHINGTON, DC 20510

January 4, 2011

Harvey Fineberg, President
Institute of Medicine
500 Fifth Street N.W.
Washington D.C. 20001

Dear President Fineberg,

As the Institute of Medicine (IOM) formulates the criteria and methods for determining and updating the essential health benefits of qualified health plans, we write to ask that the IOM consider the behavioral health care needs of people with autism spectrum disorders (ASDs).

ASDs are pervasive, chronic, and life-long developmental disorders with no cure. The Centers for Disease Control and Prevention estimates that about 1 in 110 children in the United States are affected by autism. The severity of autism and other autism spectrum disorders vary along a continuum, however those affected often suffer from co-morbidities, such as gastrointestinal disorders, sleep disturbance, seizures, tics, language deficits, depression, and attention deficit hyperactivity disorder.

While there is no cure for autism, early interventions -- such as specialized educational and behavioral programs -- significantly improve outcomes and diminish symptoms. One common form of therapy is applied behavioral analysis (ABA), an intensive behavioral therapy to improve cognitive and social functioning. Children who have received early intensive behavioral treatment have been shown to make substantial, sustained gains in IQ, language, academic performance, and adaptive behavior.

In spite of empirical evidence demonstrating the medical utility and effectiveness of behavioral therapies, people with autism confront underinsurance and barriers accessing early intensive behavioral treatments. Multiple health insurance plans deny coverage of proven treatments for autism, particularly those involving behavioral treatments such as speech therapy and ABA, based on claims that these treatments are medically unnecessary or experimental.

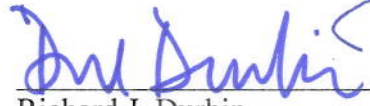
Behavioral therapy is a cornerstone of managing autism spectrum disorders. The effectiveness of behavioral therapy and ABA has been well-documented through decades of research. The 2001 U.S. Surgeon General's Report on Mental Health states, "Among the many methods available for treatment and education of people with autism, applied behavior analysis (ABA) has become widely accepted as an effective treatment." Both the National Institute of Child Health and Human Development and the American Academy of Pediatrics include ABA among the recommended treatments for autism. Given the empirical evidence demonstrating the

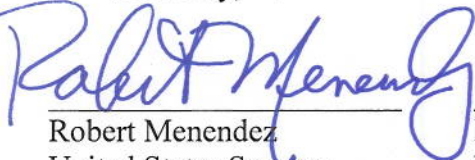
effectiveness of behavioral therapy for treating autism, insurance plans should cover these services.

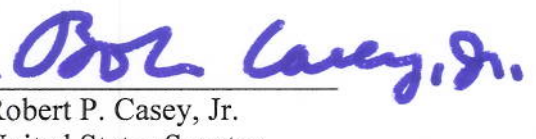
Twenty-three states have responded by mandating insurance coverage of autism services. Cost analysis indicates that while mandating coverage of autism could alleviate the roughly \$75,000 a year families can pay out-of-pocket, such a mandate has less than a 0.5% change on premiums.

Section 1302(b) of the Patient Protection and Affordable Care Act defines essential health benefits to include, "mental health and substance use disorder services, including behavioral health treatment." This language was directly informed by an amendment submitted by Senator Menendez clarifying that behavioral health treatment is part of mental health and substance use disorder services. As the IOM evaluates recommendations to the Secretary of Health and Human Services regarding essential benefits, we encourage the IOM to consider behavioral health services, particularly services such as applied behavioral analysis. These services are of vital importance to people affected by autism spectrum disorders and help ensure parity in health care coverage.

Sincerely,


Richard J. Durbin
United States Senator


Robert Menendez
United States Senator


Robert P. Casey, Jr.
United States Senator