

Chairwoman Ginal and Committee members,

Thank you for the opportunity to testify in support of this bill and to Representative Reyher for her sponsorship. My name is Julie Cook and I am here today as a mother of a 19 year old daughter with autism and as a co-founder and Board member of the Alpine Autism Center, a nonprofit autism treatment center in Colorado Springs. Alpine has a waiting list of over 100 clients who cannot access appropriate treatment. The root cause of the strained resources is the failure to properly understand and identify the number of individuals affected by autism across our state. Since El Paso is not one of the seven counties used to collect data for the CO-ADDM, the current numbers cannot accurately reflect the true impact to our State. There are a high number of military families in our County, many of whom obtain compassionate assignments here for autism, as well as the many families who have relocated here for access to cannabis for seizure control (a common co-morbid condition of autism).

Collecting and reviewing the autism data as outlined in this bill will allow us to better address the issues affecting this population such as appropriate/updated Medicaid waiver criteria specific to autism, coordination of funding sources such as public education, private insurance and Medicaid, development and implementation of adult services which are currently non-existent.

As a parent of an adult with severe autism, I am particularly troubled by the lack of appropriate services and funding for adults. If autism prevalence had truly remained constant there would be a plethora of behaviorally based autism specific day programs, vocational and residential opportunities. In reality, Medicaid has only recently started funding behaviorally based treatment for autism and it stops at the age of 21. State issued insurance plans also do not fund this treatment after the age of 18 and self-funded plans have no such mandate to fund at all. Also, the adult assessment model that Colorado uses has arbitrary and subjective level classifications which do not adequately address issues specific to autism which has the effect of permanently significantly reducing the annual service plan amounts once a person turns 18. When my daughter was diagnosed at JFK in 2001, we were told that although she had cerebral palsy and autism, her autism would be far more debilitating throughout her life, which has proven to be the case. Her needs did not change when she turned 18 and they will not when she turns 21. We have a waitlist of adults that we can't accept yet as they are past the age of 21 and do not have sufficient funding despite the fact that they need 24/7 line of sight supervision. Many are on multi-year waitlists for adult Medicaid waivers. Alpine gets heartbreaking calls daily a common theme is lack of information and resources.

With the proper interventions and supports, individuals with autism can participate in their communities. The first step is to obtain accurate data which will drive better

decisions regarding funding and services. If Colorado remains on its current course, future legislators will be forced to address the problem of what to do with a growing number of adults with autism who have outlived their parents and are reliant on the State to provide for their care. The time to act is now and this bill is a good first step.