



# **INDIANA COMPREHENSIVE STATE PLAN for Individuals with Autism Spectrum Disorder**

**INDIANA  
INTERAGENCY  
AUTISM  
COORDINATING  
COUNCIL**

# ABOUT IIACC

The primary mission of the **Indiana Interagency Autism Coordinating Council (IIACC)** is to facilitate the efficient and effective exchange of information on autism-related activities among member agencies, to leverage resources and experiences to address common issues and outcomes, and to work towards fulfillment of identified gaps. The Council serves as a forum to assist in implementation by informing the direction and assisting in increases of public understanding and awareness of the state's collective priorities, activities, programs, policies, and research. In addition, the Council serves to bring important matters of interest forward to enable and facilitate shared knowledge, discussion, and general access to state and organization resources and activities. In the current work, the IIACC serves as one essential forum and mechanism for information sharing as well as data-driven decision-making through review, discussion, and problem solving informed by the data collected through a comprehensive, systematic, and facilitated process.

Learn more about the IIACC at <https://youtu.be/RUFjU2uYiso>

## Table of Contents

2	About IIACC
3	Introduction
4	Goals Overview
5	Goal 1 Indiana Interagency Autism Coordinating Council
10	Goal 2 Family and Professional Partnerships
10	Goal 3 Early & Continuous Developmental & Medical Screening for ASD Responses
11	Goal 4 Access to All Needed ASD Health, Mental, Education & Social Services
11	Goal 5 Successful Youth Transition to Adult Services, Work, & Independence
12	Goal 6 Adequate Public/Private Insurance for All Affected by ASD
13	Goal 7 Justice System & Public Safety
13	Goal 8 Culturally Responsive Implementation
14	Summary

### Recommended Citation

Indiana Interagency Autism Coordination Council (IIACC). (2018). *Indiana comprehensive state plan for individuals with autism spectrum disorder (ASD)*, 2018 (last revised). Prepared for the Family and Social Services Administration (FSSA) under facilitation by HANDS in Autism. Retrieved from the FSSA, Division of Disability and Rehabilitative Services website: [https://www.in.gov/fssa/files/Indiana\\_Comprehensive\\_State\\_Plan\\_2.19.pdf](https://www.in.gov/fssa/files/Indiana_Comprehensive_State_Plan_2.19.pdf)

### Corresponding Author:

HANDS in Autism® Interdisciplinary Training and Resource Center. [hands@iupui.edu](mailto:hands@iupui.edu).



The **Family and Social Services Administration (FSSA)** provides oversight and support to HANDS in Autism® in facilitating this effort.



**HANDS in Autism® Interdisciplinary Training & Resource Center** facilitates the work of the IIACC to support bridging systems, increasing local capacity, and collaborating across sectors of the community.

# INTRODUCTION

This document is a continuation of the work-in-progress begun by previous state leaders and informants regarding the state of the state in autism spectrum disorder (ASD) within Indiana. Updates are made on an annual basis with input from the comprehensive statewide needs assessment, the member agencies/organizations represented within the Indiana Interagency Autism Coordinating Council (IIACC), professional stakeholder workshops, the HANDS in Autism® regional Local Community Cadres (LCCs), and individual informant interviews and focus groups conducted with participation from across the state.

Information gathered reflects input from individuals across several regions and representing a diversity of systems and roles across the state of Indiana. Summative information regarding the data collected from these forums and related to the Comprehensive Plan is shared regularly through the IIACC, workgroups and LCC forums, as well as more formally documented and shared with the state office at the Family and Social Services Administration (FSSA) with recommendations culminating from the data and information gathered. Data and information analyzed are compiled, shared, and retrieved through the multiple aforementioned forums.

## What is the Comprehensive State Plan?

A comprehensive plan guides the exploration, installation and implementation among stakeholders working to improve the quality of life and experiences of individuals with autism spectrum disorder (ASD) and related disabilities in the state of Indiana, as well as supporting efforts of diverse providers working with individuals with ASD in our state. The comprehensive plan takes a long-range perspective on topics to be addressed. Plan guidance is intentionally general and will be translated into action through specific implementation endeavors including, but not limited to, lobbying to inform politicians of the needs to address issues on the state governmental level. A plan is also a living document that adapts to evolving conditions and needs monitored through ongoing data-driven decision-making. The plan offers a framework for monitoring and the consideration of future changes.

## Authority

On October 24, 2005, the Indiana Commission on Autism passed the resolution that the Indiana Family and Social Services Agency (FSSA) would serve as the lead agency to oversee and update the development of a comprehensive plan for services for individuals of all ages with autism spectrum disorder.

Subsequently, FSSA through the Division of Disability and Rehabilitative Services (DDRS) contracted the Autism Society of Indiana from 2007-2012 and the HANDS in Autism® Interdisciplinary Training and Resource Center from 2014 to present to facilitate the Indiana Comprehensive State Plan for Individuals with autism spectrum disorder (henceforth referred to as “Comprehensive State Plan”), of which the establishment of the IIACC is the first goal.

The **Indiana State Comprehensive Plan (IIACC, 2018)** reflects work done on the overarching goals of this document previously approved by the Indiana Commission on Autism and based on the autism spectrum disorders (ASD) Roadmap presented to the Interagency Autism Coordinating Council on May 16, 2005 (IACC, 2005).



## The National Interagency Autism Coordinating Committee (IACC) Roadmap

1. Achieving Family/Professional Partnerships
2. Early and Continuous Developmental and Medical Screening for Autism
3. Access to All Needed Autism Spectrum Disorder (ASD) Health, Mental Health, Education, and Social Services.
4. Organization of Community-based Services for Easy Use
5. Youth transition to adult services, work, and independence
6. Appropriate Financing of Care

Access: [bit.ly/2AQHtzq](http://bit.ly/2AQHtzq)

## Indiana Autism Support Services Gap Analysis: Brief Report

This comprehensive analysis the state of the State of Indiana is one of the guiding documents driving development of the Comprehensive State Plan. (HANDS in Autism, 2015)

Access: [bit.ly/2T3hzQ9](http://bit.ly/2T3hzQ9).





# GOALS OVERVIEW

Indiana's Comprehensive State Plan describes eight goals and objectives that are used to guide the direction of potential solutions. These goals are aspirational and provide the means and general framework for exploration, installation and implementation of solutions within the State of Indiana. HANDS in Autism® facilitates ongoing IIACC efforts in implementing the goals. Additionally, HANDS in Autism® reports annually on the outcomes achieved by the IIACC in their efforts to monitor and oversee the goals and objectives of the Comprehensive State Plan. The annual report is submitted to FSSA through the Division of Disability and Rehabilitative Services (DDRS).

View the 2017 – 2018 IIACC Annual Report at the following link: [bit.ly/2HI3vQz](http://bit.ly/2HI3vQz).



## **Goal 1:** Indiana Interagency Autism Coordinating Council



## **Goal 2:** Family and Professional Partnerships



## **Goal 3:** Early and Continuous Developmental and Medical Screening for ASD



## **Goal 4:** Access to ASD Health, Mental, Education, and Social Services For Individuals with ASD



## **Goal 5:** Successful Youth Transition to Adult Services, Work, and Independence



## **Goal 6:** Adequate Public / Private Insurance for All Affected by ASD



## **Goal 7:** Justice System & Public Safety



## **Goal 8:** Culturally Responsive Implementation

# GOAL 1 Indiana Interagency Autism Coordinating Council



The creation of the IIACC is the first goal of the Indiana Comprehensive State Plan for Individuals with autism spectrum disorder (ASD). Currently, HANDS in Autism® serves to both facilitate and coordinate the Council (and its related groups) as well as to manage the data collection, evolution, activities and analysis of the status of services reflected within the Comprehensive State Plan.

## IIACC Mission

The primary mission of the **Indiana Interagency Autism Coordinating Council (IIACC)** is to facilitate engagement in efficient and effective exchange of information on autism-related activities among the member agencies as well as to leverage resources and experiences to address common issues and outcomes to fill identified gaps statewide.

## IIACC Member Agencies

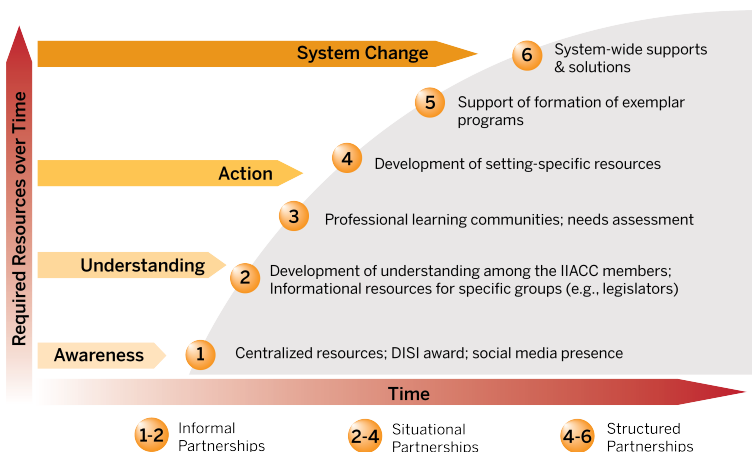
The IIACC will consist of members from a number of state agencies as well as members representing the diverse array of service/support categories needed to inform the areas reflected within the Comprehensive State Plan. Below reflects the array of member subgroups invited and participating ongoing within the IIACC:

- Policy and Legislation
- Advocacy/Self-Advocacy
- Families
- Mental Health
- Education
- Medical
- Behavioral
- Early Childhood
- Adult Transition and Employment
- Community Providers
- Rehabilitation/Residential
- Corrections
- University
- Insurance
- First Responders

A focus on increased representation and engagement from a broad range of stakeholders and with greater regional and community input has been essential to ensuring the data, resources and information gathered are more adequately representing the diverse needs of the state. As a result, the information and resources generated more adequately represent the needs of the state and are more effectively disseminated across state systems and regions. IIACC membership is regularly assessed to ensure adequate representation across subgroup categories and other constituents, with additional member organizations considered and added, as needed, to meet the Council goals and objectives.

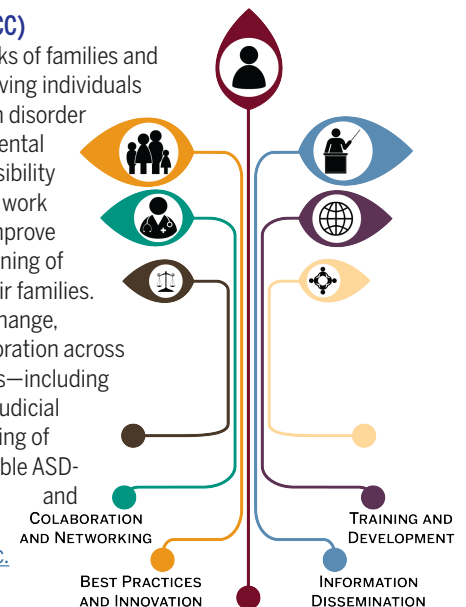
### Implementation of the Comprehensive Plan

For continuous impact and sustainability of the IIACC, efforts must be facilitated, apparent, and continuous across all levels of input, starting from basic awareness and progressing to the ultimate goal of shared information, dialogue, and systems change.



### Local Community Cadres (LCC)

Regional community networks of families and professionals invested in serving individuals affected by autism spectrum disorder (ASD) and related developmental disabilities take joint responsibility to identify solutions that will work within their community to improve the quality of life and functioning of individuals with ASD and their families. LCCs facilitate community change, through bridging and collaboration across multiple community systems—including medical, school, treatment, judicial and advocacy—and the sharing of consistent and comprehensible ASD-related information, training and resources. **Learn more:** [handsinautism.iupui.edu/lcc.html](http://handsinautism.iupui.edu/lcc.html)





# Indiana Interagency Autism Coordinating Council **GOAL 1**

## IIACC Purpose

The IIACC serves as an essential mechanism for information sharing as well as data-driven decision-making through review, discussion, and problem solving informed by the data collected through a comprehensive and systematic process. The IIACC serves as a forum to assist Indiana in implementing the Comprehensive State Plan goals and objectives through the following activities:

- Informing the direction of ASD services, needs and gaps in ASD supports and resources.
- Assisting in increasing public understanding and awareness of the State’s collective priorities, activities, programs, policies and research supporting individuals with ASD and their families.
- Bringing important matters of interest forward to enable and facilitate shared community knowledge, discussion and general access to the state resources and activities.

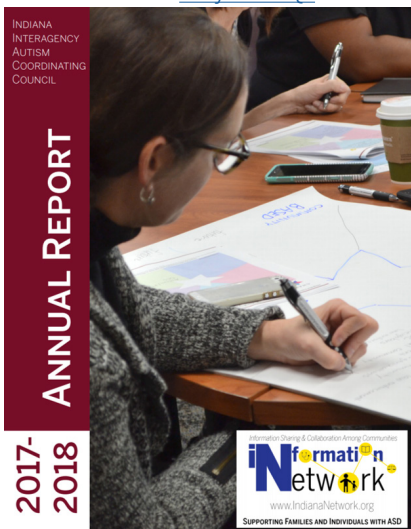
These activities engage a wide range of stakeholders who participate at different levels, regularity and formats. Ultimately, the IIACC supports implementation of the goals and objectives of the Comprehensive State Plan by understanding the premise of the implementation effort and informing the activities and vision that is further pursued by the Council’s subcommittees, workgroups, professional learning communities (PLCs), and local community cadres (LCCs).

Not only does the collaborative work of the IIACC assist involved individuals and communities to become more aligned with the priorities outlined in the Comprehensive State Plan, it also positively impacts the State in pursuit of the following objectives:

- State will have a systematic process for identifying the ASD needs of the state.
- State will have clarity on priority needs based upon the data/results of this systematic process.
- Other potential outcomes:
  - Aligning activities with federal and state priorities.
  - Gaining information needed to effectively evaluate and increase access to services and resources.
  - Engaging in education and dissemination activities and outlets to facilitate sharing in regards to ASD services.

### 2017-2018 IIACC Annual Report (HANDS in Autism, 2018)

Access: [bit.ly/2HI3vQz](http://bit.ly/2HI3vQz)



Information Sharing & Collaboration Among Communities



[www.IndianaNetwork.org](http://www.IndianaNetwork.org)

**SUPPORTING FAMILIES AND INDIVIDUALS WITH ASD**

### IndianaNetwork.org

The INformation Network was initiated through the joint work of the IIACC and further informed by community members. The website was created to serve as a single point of entry and means of facilitating the connection to and knowledge about the range of autism services and resources available statewide and integral to success of individuals with ASD, their families and professionals working with these individuals.

### Professional Learning Communities (PLC)

A network of the IIACC and community members that promotes an added level of sharing and integration of the diverse knowledge, experiences, perspectives, attitudes and practices across disciplines, communities, and statewide. This networking enhances creative thinking, sharing, idea generation and results in a productive means towards resource development and overall program improvement. Shared passion, interest, understanding and work towards common goals fosters greater inclusion, diversity, and capacity towards action, product generation and implementation than working in isolation. Learn more at [IndianaNetwork.org](http://IndianaNetwork.org)



# GOAL 1 Indiana Interagency Autism Coordinating Council



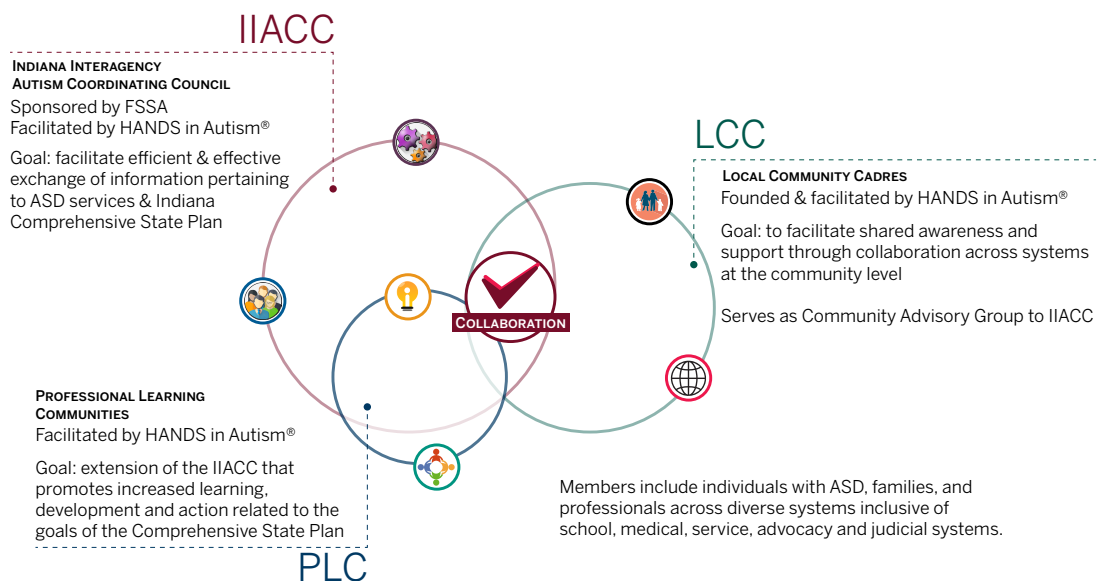
## Objectives and Scope of Activities

To achieve the mission, goals and objectives outlined in the Indiana Comprehensive State Plan, the IIACC adheres to the following scope of activities:

1. Engage in approximately quarterly large group meetings (conducted live at the Indiana Government Center in Indianapolis and via phone/web conference and/or online forum, as needed to expand input opportunities).
2. During these meetings and small group activities, members will engage in the following:
  - a. Clarify mission as well as action-based and measurable goals and objectives.
  - b. Identify data needed to inform progression towards achieving objectives.
  - c. Review any data compiled since the last meeting and towards update and revision of the Comprehensive State Plan and/or related activities.
  - d. Identify collective messages for shared dissemination and focus and directed progress across the state.
  - e. Make policy and procedure recommendations to the Family Social Services Administration (FSSA), Division of Disability and Rehabilitative Services (DDRS), and Bureau of Developmental Disability Services (BDDS) offices regarding any appropriate changes to services and other activities as they pertain to individuals with ASD.
3. Activities of the IIACC (as well as subcommittees, PLCs, LCCs, focus groups, informant interviews) will provide substantiation for the annual summary and report delivered to the State regarding the state of the state and any needed modifications to the current Comprehensive State Plan related to the following primary areas of subcommittee or workgroup efforts:
  - a. Family and Professional Partnerships
  - b. Access to Community-Based Services
  - c. Early Screening and Identification
  - d. Transition to Adulthood
  - e. Insurance (including Autism Mandates)
  - f. Justice System & Public Safety
  - g. Culturally Responsive Implementation
4. Utilize online avenues for information sharing, discussion, and vetting, such as the collaboration site, to continue work between meetings and provide input and updates on assigned activities in real-time using shared documents and discussion forums.
5. Nominate, select, and recognize winners of the Driver of Innovative Service and Implementation (DISI) award to promote agencies, organizations, and initiatives supporting the priority work and emphasis of the State as determined through gap analyses and outlined in the Comprehensive State Plan

## Community Involvement and Input

In support of the IIACC vision and Comprehensive State Plan, priorities, community involvement and input will be solicited from HANDS-facilitated Local Community Cadres (LCCs), with representatives of these regional, state-wide cadres also conveyed as the IIACC Community Advisory Groups (CAGs). LCC representatives will participate in the IIACC as necessary, or as desired, to provide local and regional input in regards to activities and initiatives undertaken in the IIACC. Further, with





# Indiana Interagency Autism Coordinating Council **GOAL 1**

involvement from the LCCs, the regional areas will have both greater local capacity for accessing ASD-related information and services and increased engagement at a state level to ensure the continued bidirectional flow of information from community to state and state to community, informing and shaping progress at each level. Other ongoing opportunities for involvement include participation in PLCs and/or provision of input for content on the INNNetwork site.

## Council Framework

The HANDS in Autism® Interdisciplinary Training and Resource Center as part of the Department of Psychiatry, Indiana University School of Medicine and Riley Hospital for Children at IU Health, serves as the Council Chair for the IIACC and facilitates the meetings to ensure the sharing of timely and important matters with the Council that is pertinent to the goals and objectives in the Comprehensive State Plan. Additionally, the Council Chair facilitates a data-driven decision-making process in the meetings that incorporates review, discussion, and problem-solving activities that lead to culminating IIACC recommendations informed by the data collected and within a comprehensive and systematic process.

IIACC meetings primarily involve brief updates by the Council Chair followed by workgroup activities informed by data collected and represented by the HANDS in Autism® team as well as ongoing input from the IIACC, the subcommittees by goal area, professional learning committees (PLCs), regional local community cadres (LCCs), focus groups, informant interviews and the full needs assessment process. Input from IIACC member organizations is processed by the Council Chair within the full group (IIACC), subgroup (subcommittees/workgroups/PLCs) and other formats (LCCs, focus groups) for consideration and incorporation into the data pool for consideration.

Subcommittees or expanded workgroups (e.g., PLCs) enhance the focus on particular goal areas from the Comprehensive State Plan while involving a more expansive group and facilitating greater involvement in the directed activities around these areas. Workgroup

activities are continued through the use of online forums for communication and collaboration, including a shared online collaborative site, to allow for more regular and ongoing sharing, discussion and vetting of information related to the goals and priority activities.

By utilizing the infrastructure of the IIACC, the subcommittee/workgroup extensions of the IIACC, PLCs, the LCC regional networks, and data collected as part of the comprehensive needs assessment, the current status of the Comprehensive State Plan will be continually assessed and adaptations proposed with renewed vision and action-based steps allowing for measurable progress aligned with state goals and efforts. Actions will be prioritized by the IIACC within each of the goal areas so as to limit the focus and ensure greater opportunity for directed efforts.

Summative information regarding the data collected from these efforts and related to the Comprehensive Plan will be shared regularly through:

- IIACC meetings and work groups (occur 3-4 times a year)
- Professional Learning Communities (PLCs; interest-based learning and work groups expanding productivity and dissemination of the IIACC)
- Local Community Cadres (LCCs; regional participation representing interdisciplinary and multi-system collaboration at the community level)
- Family and Social Services Administration (FSSA) with recommendations culminating from the data and information gathered.

The Council Chair will summarize IIACC recommendations in an annual report submitted to the State for review and consideration. The Director of the Bureau of Developmental Disability Services (BDDS), upon review of the annual report and culmination of all systematic data collection and analyses efforts, is responsible for approval and/or action on recommendations offered by the IIACC.

### Goal-Based IIACC Subcommittees/Work Groups

These groups facilitate greater involvement in directed activities around the following areas represented in the Comprehensive State Plan:

- Family and professional partnerships
- Early screening and identification

- Access and utilization of essential medical, mental health, education, and other community-based services (e.g., behavioral, respite, therapies; subsumed primarily within the primary setting in which those therapeutic activities take place—e.g., educational, medical, mental health)

- Youth transition and employment
- Insurance
- Justice system & public safety
- Culturally responsive implementation (added with consensus of the IIACC in 2018)



# GOAL 1 Indiana Interagency Autism Coordinating Council



## IIACC Members by Group\*

### Oversight/Facilitation

- Bureau of Developmental Disabilities Services (BDDS)\*
- Division of Disability and Rehabilitative Services (DDRS)\*
- HANDS in Autism® Interdisciplinary Training and Resource Center \*

### Adult and Child Services

- Hoosier Association for Behavior Analysis (HABA)\*
- Indiana Association of Rehabilitation Facilities, Inc. (INARF)\*
- Indiana Providers of Effective Autism Treatment (InPEAT)

### Adult Providers

- Anthony Wayne Services (AWS)
- Center for Young Adults with Conditions of Childhood (CYACC)\*
- Child-Adult Resource Services (CARS)
- Noble of Indiana

### Advocacy

- Church, Church, Hittle, and Antrim
- Division of Mental Health and Addiction (DMHA) & System of Care & Children's Advisory Board\*
- Indiana Disability Rights (formerly Indiana Protection and Advocacy Services)\*
- Mental Health America of Indiana (MHAI)
- National Alliance on Mental Illness (NAMI)
- Self-Advocates of IN\*

### Community Providers

- Child Care Answers\*
- Easter Seals Crossroads\*
- Hamilton Center\*
- Indiana Resource Center for Autism (IRCA)
- Logan Center, Sonya Ansari Autism Center
- Rauch, Inc.

### Early Childhood

- Bureau of Child Development Services (First Steps)\*
- Head Start\*
- Indiana Association of Child Care (INACCR)
- Infant & Toddler Institute
- Office of Early Childhood & School Learning \*
- Project Launch, DMHA & ISDH

### Education

- Center for Deaf and Hard of Hearing Education (ISDH)\*
- Charter Schools
- Greene-Sullivan Special Education Cooperative
- Indiana Association for School Psychologists (IASP)
- Indiana Association of Public School Superintendents (IAPSS)
- Indiana Association of School Nurses (IASN)
- Indiana Association of School Principals (IASP)
- Indiana Council of Administrators of Special Education (ICASE)\*
- Indiana Department of Education (IDOE)\*
- Indiana Non-Public Education Association (INPEA)\*
- Indiana School Counselor Association (ISCA)
- Indiana Small and Rural Schools Association
- Indiana State Teachers Association (ISTA)/ National Education Association (NEA)
- State Board of Education (SBOE)

### Families

- About Special Kids (ASK)\*
- Answers for Autism
- Autism Society of Indiana (ASI)\*
- Autism Speaks
- Down Syndrome Indiana (DSI)\*
- Families United for Support and Encouragement (FUSE)\*
- Family Voices (FV)\*
- Grupo de Apoyo para Latinos con Autismo (GALA)
- IN\*SOURCE\*
- Indiana ABA Parents, Journey to Adulthood (Indiana Parents of Children with Autism)\*
- Other Family Member Representatives

### Justice & First Responders

- Indiana Department of Insurance (DOI)\*
- Indiana Department of Child Services\*
- Indiana Supreme Court\*
- Marion County Public Health Department, Emergency Preparedness
- MESH Coalition\*
- Autism & Law Enforcement Coalition (ALEC)\*

### Medical

- Children's Special Health Care Services (CSHCS)\*
- Indiana State Department of Health (ISDH)\*
- Maternal and Child Health (MCH)\*
- Neurodevelopmental and Behavioral System (NDBS) (IU School of Med. CHIP in for Qual)
- Riley Child Development, LEND & CDC\*
- Indiana Speech-Language-Hearing Association (ISHA)\*

### Policy/Legislation

- Commission on Public Health, Behavioral Health, & Human Services
- Division of Family Resources (DFR)\*
- Family and Social Services Administration (FSSA)\*
- Office of Medicaid & Policy Planning
- Other Government/Legislative Representation
- The Arc of Indiana\*

### University

- Ball State University, Center for ASD\*
- IUPUI, School of Social Work\*
- Purdue University\*
- Rose-Hulman Institute of Technology\*
- University of Indianapolis

### Vocation & Transition

- #Work4Life; Project Search\*
- Bureau of Rehabilitation Services, Vocational Rehabilitation (VR)
- Indiana Association of People Supporting Employment (INAPSE)
- Indiana Department of Workforce Development (DWD)\*
- Indiana Postsecondary Education Coalition (IPSEC)
- Indiana Statewide Independent Living Council (INSILC)\*
- IUPUI SITE Program
- Supporting Employment (INAPSE)

\* This list consists of member organizations that have participated since 2014. Those with active participation in 2018 are designated with an \*

# GOAL 2

## Family and Professional Partnerships



Establish the opportunity for all individuals and families to be supported by healthcare professionals who will listen, provide input and assist in the development of a prescribed and coordinated plan for reported concerns through knowledge, access and coordination of care in service delivery.

### Key Short-Term Activities/Deliverables

Identify committees and boards related to ASD as well as System of Care (SOC) and medical home initiatives and representation of leaders in ASD on such committees and boards.

### Data Available/Needed for Evidence of Success

Identify committees relevant to ASD and assess membership listings of committees to identify representation of ASD leaders.

### Potential Data Sources

Neurodevelopmental and Behavioral System (NDBS), Division of Mental Health and Addiction (DMHA) SOC, Children's Health Insurance Program (CHIP-IN), Indiana State Department of Health Medical Home, American Academy of Pediatrics: Indiana Chapter (INAAP); survey developed in collaboration with IIACC/associated workgroups.



## Early & Continuous Developmental & Medical Screening for ASD Responses

# GOAL 3

Service providers and families will have knowledge of universal early screening and identification of signs of ASD, followed by appropriate referrals to coordinated and comprehensive service systems.

### Key Short-Term Activities/Deliverables

Identify and develop a list of options available for the awareness/training of medical students, residents, and physicians in early screening and identification in general and specifically as it pertains to diagnosis for pediatricians, family practitioners, nurse practitioners, physician assistants, and other pertinent medical professionals.

### Data Available/Needed for Evidence of Success

Current type, number and level of training options provided across common training sites (e.g., IU School of Medicine, Marian College, other) and with note of specific disciplines to which training is offered.

### Potential Data Sources

NDBS, HANDS in Autism®, Riley Child Development Center (RCDC), Christian Sarkine Autism Treatment Center (CSATC), INAAP, Indiana Academy of Family Practice (INAFP), Indiana Afterschool Network (IAN), survey developed in collaboration with IIACC/associated workgroups.

### Other Identified Priorities

- Identify a standard set of information, training and support regarding choice and use of developmental screens.
- Identify and disseminate standard information regarding early screening, evaluation and identification to be disseminated across physicians, educators, providers and families as well as across systems, regions and cultures.
- Increase reporting to State of the diagnosis by physicians.
- Develop a repository of physicians doing early screening in the state, their cultural sensitivity, tools utilized and where they are referring to upon positive screens.

# GOAL 4

## Access to All Needed ASD Health, Mental, Education & Social Services



Individuals with ASD will have access to integrated and coordinated health, mental health, education and social services provided by well-qualified providers throughout the life cycle.

### Key Short-Term Activities/Deliverables

Develop a comprehensive list and set of annotated data of waiver providers, case managers, and other providers with information about expertise and payment structures.

### Data Available/Needed for Evidence of Success

List and set of annotated data with specific provider expertise, access, and payment structure available; number and range of participating state websites and state and private clinics carrying the list for ease of access and dissemination.

### Potential Data Sources

Autism Society of Indiana (ASI), DDRS (waiver pick list), Indiana Resource Center for Autism (IRCA), surveys generated and disseminated by IIACC workgroups.

### Other Identified Priorities

- Identify options for sharing information across service agencies as a means for improving transition, collaboration and consistency for the individual and family.
- Identify current information about a range of topics disseminated in various formats, translations and systems.



## Successful Youth Transition to Adult Services, Work, & Independence

# GOAL 5

Families and providers will understand the needs and process around transition planning and successful outcomes.

### Key Short-Term Activities/Deliverables

Identify and make available a standard set of information to disseminate across families, medical, school personnel, and individuals (middle to high school) to improve understanding about the transition process.

### Data Available/Needed for Evidence of Success

Percentage of districts/corporations utilizing proposed options; number of consumers accessing standard materials disseminated; FSSA Autism Services Gap Analysis.

### Potential Data Sources

Other states, Center for Youth and Adults with Conditions of Childhood (CYACC), Indiana Institute on Disability and Community (IIDC), VR, IPSEC, IDOE, ASK, IN\*SOURCE, IN Transition Workbook.

### Other Identified Priorities

- Identify trainings for educators on transition resources and options available within and outside of the state.
- Develop a repository of opportunities for employment, internships, community activities for those with developmental disabilities.
- Identify courses/curriculum that are accessible as post-secondary options and will promote a common awareness and standard used by those supporting transition and success of individuals with ASD in post-secondary programming (e.g., Think College).

# GOAL 6

## Adequate Public/Private Insurance for All Affected by ASD



Standards will be identified for adequate private and public insurance coverage across the lifespan for ASD and comorbid mental health conditions that are accessible, affordable and adequately reimbursed.

### Key Short-Term Activities/Deliverables

Propose standards promulgated for oversight and enforcement of appropriate implementation of clinical services to Indiana policy makers and with suggested enforcement by legal/regulatory requirements.

### Data Available/Needed for Evidence of Success

Standards of oversight and enforcement presented to relevant policy makers and legislative bodies in Indiana by IIACC appointed representatives.

### Potential Data Sources

InPEAT, Office of Medicaid Policy and Planning (OMPP), Indiana Professional Licensing Association (IPLA), The Arc of Indiana, Hoosier Association for Behavior Analysis (HABA), ASI, IRCA, HANDS in Autism®, CSATC, RCDC; targeted surveys/interviews across practices and standards statewide and across other states.

### Other Identified Priorities

- Work in collaboration with insurance carriers to establish applied behavioral analysis (ABA) and other networks that maintain coverage for evidence-based strategies and providers with appropriate qualifications in education, training and practice.
- Identify standard information to be provided to families, individuals, carriers about changes to the Diagnostic and Statistical Manual, 5th edition (DSM-5) and coverage implications as well as insurance changes and guidelines.
- Identify factors impinging on the access to Medicaid and other providers across the state.
- Inform reimbursement rules that support medical necessity.
- Monitor need for modifications to state mandate by monitoring health reform, relevant case law and Indiana Department of Insurance (IDOI) bulletins and directives.
- Identify a means to address the division of ASD as a neurodevelopmental disorder vs. a mental health condition, which has local/state policy implications.
- Establish a format for open deliberation and discussion regarding the multiple areas proposed with regards to the access to quality of ABA and other providers, the education of consumers as to the differentiation between providers, and the need for further standards regarding these practices.







To ensure justice personnel, related agencies and families are knowledgeable about signs of ASD, strategies for interaction and supports.

## Key Short-Term Activities/Deliverables

Identify standard amount, topics, and formats needed for mandatory statewide training of first responders and judiciary personnel.

## Data Available/Needed for Evidence of Success

Number and range of topics/formats currently and readily available as options for access and dissemination for first responders; number/range of personnel accessing the standards developed.

## Potential Data Sources

Other state program options; MHA, NAMI, HANDS, Autism and Law Enforcement Coalition (ALEC) Workgroup, ASI, IRCA, FSSA Gap Analysis and further survey.

## Other Identified Priorities

- Identify risk assessment and diversion alternatives for individuals with Developmental Disability (DD), ASD, and Intellectual/Developmental Disability (DD) at county and statewide levels.
- Determine standard trainings and forums for relatives of folks in legal system (juvenile and adult).
- Define effective justice system involvement for effective crisis intervention planning.
- Identify need (and define) for registry with standard suggested processes for procedures, assessment and placement.
- Define needs for an enhanced 911 system that is available universally and is updated by a reputable source.
- Conduct study/white paper on those incarcerated/inmates who are with challenged with ASD.

# GOAL 8

## Culturally Responsive Implementation



Evaluation, development, and implementation of a culturally responsive infrastructure within systems, supports, and services for ASD in Indiana to address the increasing diversity and support greater outcomes and equity.

## Key Short-Term Activities/Deliverables

- Development and/or dissemination of similar awareness information (e.g., links, tools, brochures) related to cultural considerations.
- Development of shared points to incorporate within and tools to evaluate the cultural competence across trainings that will build leaders with similar values/skills and sharing common information.
- Collaborative papers/presentations on the topic.
- Sub-council for consideration of inclusiveness across cultural differences.
- Translation services covered by health insurance for health care services.
- Engage culturally diverse organizations.

# SUMMARY

The Indiana State Comprehensive Plan for ASD and this document will continue to evolve as priority areas are addressed, new activities are prioritized and the mechanism established to evaluate the state of the state continues. The structure and process of gap analysis and ongoing collaborations central to the IIACC, subcommittees, workgroups, PLCs and LCCs will continue to inform State and local actions. The systematic and sustainable process and collaborations established will culminate in the impact on the individuals and families, the ultimate end users.

The co-chairs of the IIACC at HANDS in Autism® would like to thank everyone who informed the development of this plan. A special thanks to the individuals, families, professionals, service providers, and community members who provided insights and information to ensure the comprehensiveness of this plan. Thanks also to the staff and students innately involved in the hours of research, coordination, and formatting of this information leading to the Comprehensive State Plan. Finally, a special thanks to the Bureau for Developmental Disabilities Services (BDDS), Division of Disability and Rehabilitative Services (DDRS), and the Family and Social Services Association (FSSA) for the oversight and sponsorship of this process.

## Get Involved

[IndianaNetwork.org](http://IndianaNetwork.org)

- Information Network
- Professional Learning Communities (PLC)
- Needs Assessment Survey

[HANDSinAutism.IUPUI.edu](http://HANDSinAutism.IUPUI.edu)  
or [hands@iupui.edu](mailto:hands@iupui.edu)

- HANDS in Autism® Interdisciplinary Training & Resource Center
- Local Community Cadres (LCC)