

# 2014 State Autism Profiles ILLINOIS

## DEMOGRAPHICS

In 2000, 4,330 or 1.46% of children ages 3-21 who received special education services in Illinois have autism. In 2012-2013, 19,131 or 6.54% of children with disabilities ages 3-21 who received special education services have autism.

**Table 1-1: IDEA Part B - Children with Autism in Illinois for 1999-2000 and 2012-2013**  
(Child Count by Age Group)

	1999-2000	2012-2013
Age 3-5	641	1,858
Age 6-11	2,545	8,222
Age 12-17	947	7,330
Age 18-21	197	1,720
Age 6-21	3,689	17,272
Age 3-21	4,330	19,131

*Source: Reported by the State of Illinois in accordance with Section 618 of IDEA to U.S. Department of Education, Office of Special Education Programs*

**Table 1-2: IDEA Part B - Children with Disabilities in Illinois for 1999-2000 and 2012-2013**  
(Child Count by Age Group)

	1999-2000	2012-2013
Age 3-5	28,787	37,211
Age 6-11	133,378	117,207
Age 12-17	123,364	120,910
Age 18-21	11,787	17,102
Age 6-21	268,529	255,219
Age 3-21	297,316	292,430

*Source: Reported by the State of Illinois in accordance with Section 618 of IDEA to U.S. Department of Education, Office of Special Education Programs*

## STATE TASK FORCE

### *Illinois Autism Task Force*

In July 2004, Gov. Rod Blagojevich signed into law “An Act in Relations to Persons with Disabilities” (*Public Act 093-0773*), which included a requirement for the Department of Human Services to establish a task force to evaluate and assess the support system for individuals with autism. The Illinois Autism Task Force convened in April 2004 and continues to convene periodically. The task force is comprised of members of the public (parents, educators, professionals with an interest in autism) and representatives of various state agencies. The task force prepared a report in 2005, which outlined challenges and proposed recommendations for improving the support systems for individuals with autism. Recommendations include an autism waiver and health insurance coverage. The most recent report prepared by the Task Force was in December 2008.

<http://www.dhs.state.il.us/OneNetLibrary/27897/documents/DD%20Reports/Autism%20Progress%20Report%20FINAL.pdf>

## STATE INSURANCE COVERAGE

“Brianna’s Law” requiring insurance coverage of autism services in the state of Illinois was signed into law as Public Act 95-1005 by Gov. Rod Blagojevich on December 12, 2008. The law requires health insurance coverage for the diagnosis and treatment of autism spectrum disorders to individuals less than 21 years of age to the extent that coverage is not already provided up to a maximum of \$36,000 per year. Diagnosis and treatment must be provided by a licensed physician, licensed psychologist, or certified registered nurse practitioner for any medically necessary services, such as psychiatric care, psychological care, rehabilitative care, therapeutic care (speech, occupational, and physical therapy), pharmacy care, applied behavior analysis (ABA) therapy. The law was amended in 2009 by *2009 Ill. Laws, P.A. 95-1049* (S.B. 101 of 2008) to require insurance coverage for habilitative services for children less than 19 years of

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age with a congenital, genetic or early acquired disorder, including autism spectrum disorders. Habilitative services includes occupational therapy, physical therapy, speech therapy and other services prescribed by the insured's treating physician pursuant to a treatment plan to enhance the ability of a child to function with a congenital, genetic or early acquired disorder.

<http://www.ilga.gov/legislation/publicacts/95/PDF/095-1049.pdf>

In June 2012, Governor Pat Quinn signed into law S. 679 amending the state's 2008 autism insurance reform law by assuring that any individual already diagnosed with an autism spectrum disorder would not lose benefits as a result of any changes adopted in the upcoming fifth edition of the American Psychiatric Association's Diagnostic and Statistical Manual (DSM-5).

Since 2005, Illinois has also had mental health insurance parity legislation (H.B. 59/*Public Act 94-0402*) requiring insurers to cover serious mental illness, including pervasive developmental disorders, at a level commensurate with other health coverage. H.B. 1372 was introduced during the 2011 legislative session to require that coverage for autism spectrum disorder meet the same parity requirements afforded to mental health coverage and treatment. The bill also required a minimum benefit (as opposed to a maximum) of \$36,000 per year be provided by health, accident or managed care plans for people with autism spectrum disorder. H.B. 1372 was re-referred to the Rules Committee on March 17, 2011; no further action was taken.

### ESSENTIAL HEALTH BENEFITS

Under the Affordable Care Act, Illinois will offer autism services including applied behavior analysis (ABA) in its Essential Health Benefits package. ABA is included in the "Rehabilitative and Habilitative Services" section of the EHB. The exchange is being run by the federal government. (Blue Cross Blue Shield of Illinois; BlueAdvantage Entrepreneur PPO)

### MEDICAID

#### ***Illinois Waiver for Adults with DD***

Effective July 1, 2012, this waiver provides adult day care, developmental training, residential hab, supported employment-individual/group, OT-extended, PT-extended, speech therapy-extended, service facilitation, adaptive equipment, behavior intervention/treatment, behavioral-psychotherapy/counseling, emergency home response services, home accessibility mods, non-medical transportation, personal support, skilled nursing, temporary assistance (formerly crisis), training/counseling services for unpaid caregivers, vehicle mods for individuals with autism, DD, IID ages 18 and older. This waiver will expire June 30, 2017

#### ***Illinois Home and Community-Based Services Waiver (HCBS): IL Support Waiver for Children and Young Adults w/DD (0464.R01.00)***

This waiver, implemented on July 1, 2010, provides adaptive equipment, service facilitation, assistive technology, behavior intervention and treatment, home accessibility modifications, personal support, temporary assistance, training and counseling services for unpaid caregivers, and vehicle modifications for individuals ages 3-21 with autism, intellectual disability, and developmental disabilities (The Illinois General Assembly passed S.B. 51 and was signed into law on August 17, 2006 to include autism spectrum disorders as a developmental disability in the Department of Human Services' disability database for eligibility considerations under the waiver), developmental disabilities or intellectual disability who would otherwise need ICF/MR facility level care. Participation is limited to a total of 600; new enrollees will be selected from the Prioritization of Urgency of Need for Services (PUNS) database. This waiver expires on June 30, 2015.

<http://www2.illinois.gov/hfs/MedicalPrograms/HCBS/Pages/default.aspx>

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### ***Illinois Home and Community-Based Services Waiver: IL Residential Waiver for Children and Young Adults w/DD***

This waiver, implemented on July 1, 2010, provides child group homes, adaptive equipment, assistive technology, and behavior intervention and treatment for individuals ages 3-21 with autism, developmental disabilities, and intellectual disability. This waiver expires June 30, 2015.

<http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Waivers/Waivers.html>

## EDUCATION

On August 17, 2007, Gov. Rod Blagojevich signed into law (S.B. 79/*Public Act 95-0257*) an amendment to the School Code Section 14-8.02 which requires the individualized education program (IEP) team consider the following factors when developing an IEP student with autism spectrum:

- Verbal and nonverbal communication needs;
- Need to develop social interaction skills and proficiencies;
- Needs resulting from the child's unusual responses to sensory experiences;
- Needs resulting from resistance to environmental change or change in daily routines;
- Needs resulting from engagement in repetitive movements and stereotyped movements;
- Needs for any positive behavioral interventions, strategies, and supports to address any behavioral difficulties resulting from autism spectrum disorder; and
- Other needs resulting from the child's disability that impacts progress in the general curriculum, including social and emotional development.

Additionally, legislation was introduced that would provide funding to the Illinois State Board of Education (ISBE) for autism programs (H.B. 383). Legislation was also introduced that would allow the ISBE to create an Autism Scholarship Program. The program would award \$15,000 or the actual cost of tuition for a maximum of 200 students. The program would allow parents of a child with autism to send their child to a special education program that implements the child's IEP at another school. No further action was taken on the legislation.

## EDUCATION PROGRAMS AND ACTIVITIES

### ***Illinois Autism Training and Technical Assistance Project***

The Illinois Autism Training and Technical Assistance Project (IATTAP) is devoted to implementing effective educational support services for children with autism and increasing the number of children with autism who are educated in a general classroom. IATTAP encourages parental involvement with their child's education.

<http://www.illinoisautismproject.org/>

### ***ISBE-Autism Peer Buddy Program***

On April 12, 2011, the resolution HR 43 was adopted in order to urge the State Board of Education to encourage the establishment of a peer buddy program in each school district for children with autism spectrum disorder enrolled in elementary, middle, and high school.

### ***Autism Training for Emergency Responders***

H.B. 1217 was introduced in 2011 to amend the Illinois Fire Protection Training Act requiring the Office of the State Fire Marshall to develop, adopt, or approve a training course regarding the risks associated with autism and appropriate autism recognition and response techniques. It also requires that every person seeking certification as a firefighter must complete an education course in autism recognition and response techniques. This bill would also amend the Emergency Medical Services Systems Act so that the

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Department of Public Health develop, adopt, or approve a training course and curriculum to inform emergency medical technicians of the risks associated with autism and providing instruction in appropriate autism recognition and response techniques. Before being certified by the Department, each emergency medical technician trained in basic life support services must satisfactorily complete the training course. Lastly, the bill provides that every person who is serving in a capacity as a certified emergency medical technician must satisfactorily complete a continuing education course in autism recognition and response techniques within 18 months. The bill was re-referred to the Rules Committee on March 14, 2011. No further action was taken.

### ***Illinois Yellow Dot Program***

The Autism Program of Illinois partners with the Illinois Department of Transportation to promote the Illinois Yellow Dot program, a life-saving, traffic safety initiative that provides first responders with critical information to improve emergency care for persons involved in vehicle crashes. The Yellow Dot program provides personal health information to emergency responders in order to promptly care for a crash victim.

<http://www.theautismprogram.org/autism-resources/yellow-dot-illinois/>

## OTHER STATE RESOURCES

### ***The Autism Program of Illinois***

The Autism Program of Illinois (TAP) was established by Public Act 93-0395 to serve as a statewide information resource for autism. TAP is managed by the Hope Institute for Children and Families and includes three regional centers and two affiliate centers. With funding from the Illinois Department of Human Services, TAP formed The Autism Program of Illinois Service Network, comprised of 27 agencies and universities, to meet the specific needs of families and children with autism in 2007.

<http://www.theautismprogram.org/>

### ***Children and Family Services***

Under H.B. 30, enacted on August 7, 2009, The Department of Children and Family Services was required to develop and implement a special program of family preservation services that support foster and adoptive families who are experiencing hardships caring for a child with a pervasive developmental disorder such as autism. Additionally, the Department may offer services to any family regardless of whether or not a report has been filed under the Abused and Neglected Child Reporting Act. They also are required to develop and implement a public information campaign alert to inform the public about special family preservation services.

### ***Illinois Human Rights Act Amendment***

On August 16, 2011, Illinois Governor Pat Quinn approved H.B. 3010 to amend the Illinois Human Rights Act in order to broaden the definition of “disability” to also include any mental, psychological, or developmental disability, including autism spectrum disorders. (775 ILCS 5/)

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## STATE LEGISLATIVE CALENDAR

The Illinois General Assembly meets each year on the second Wednesday beginning in January. The 2014 session convened on January 29, 2014 and adjourned on May 31, 2014. The 2015 session is expected to convene in January 2015.

<http://www.ilga.gov/>

### *Sponsors of Autism Legislation*

Sen. William Delgado (D-Chicago) District 2  
Sen. Emil Jones (D-Chicago) District 14  
Sen. Don Harmon (D-Oak Park) District 39  
Sen. David Koehler (D-Peoria) District 46

Rep. Lou Lang (D-Skokie) District 16  
Rep. Mary Flowers (D-Chicago) District 31  
Rep. Patricia R. Bellock (R-Westmont) District 47  
Rep. Sandra M. Pihos (R-Glen Ellyn) District 48  
Rep. Michelle Mussman (D- Schaumburg) District 56  
Rep. Michael Tryon (R-Crystal Lake) District 66  
Rep. Dan Brady (R- Bloomington) District 105