In 2000, 4,330 or 1.46% of children ages 3-21 who received special education services in Illinois have autism. In 2013-2014, 20,677 or 7.02% 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 2013-2014
(Child Count by Age Group)

<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>Age 3-5</td>
<td>641</td>
<td>1,928</td>
</tr>
<tr>
<td>Age 6-11</td>
<td>2,545</td>
<td>8,767</td>
</tr>
<tr>
<td>Age 12-17</td>
<td>947</td>
<td>8,183</td>
</tr>
<tr>
<td>Age 18-21</td>
<td>197</td>
<td>1,799</td>
</tr>
<tr>
<td>Age 6-21</td>
<td>3,689</td>
<td>18,749</td>
</tr>
<tr>
<td>Age 3-21</td>
<td>4,330</td>
<td>20,677</td>
</tr>
</tbody>
</table>

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

(Child Count by Age Group)

<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>Age 3-5</td>
<td>28,787</td>
<td>37,611</td>
</tr>
<tr>
<td>Age 6-11</td>
<td>133,378</td>
<td>118,593</td>
</tr>
<tr>
<td>Age 12-17</td>
<td>123,364</td>
<td>121,282</td>
</tr>
<tr>
<td>Age 18-21</td>
<td>11,787</td>
<td>16,741</td>
</tr>
<tr>
<td>Age 6-21</td>
<td>268,529</td>
<td>256,616</td>
</tr>
<tr>
<td>Age 3-21</td>
<td>297,316</td>
<td>294,227</td>
</tr>
</tbody>
</table>

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**

In 2015, H.B. 235 amended the insurance code to require that individual or group policies of accident and health insurance shall cover charges incurred, and anesthetics provided, in conjunction with dental care provided to a covered individual in a dental office, oral surgeon's office, hospital, or ambulatory surgical treatment center if the individual is under age 26 and has been diagnosed with an autism spectrum disorder.

https://legiscan.com/IL/text/HB0235/2015

“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 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.


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,
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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

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.

http://openstates.org/il/bills/95th/SB79/

Behavior Analysts Licensure Board
S.B. 1895, introduced in 2015, would create the Behavior Analyst Licensing Act. Two years after the effective date an individual could not provide applied behavior analysis or practice as an assistant behavior analyst unless licensed. The bill also provides for creation of the Board of Behavior Analysts within the Department of Financial and Professional Regulation. The bill was referred to Assignments. No further action has been taken.
https://legiscan.com/IL/bill/SB1895/2015

EDUCATION PROGRAMS AND ACTIVITIES

Currently, researchers at three Illinois universities – Northern Illinois, University of Illinois Chicago, and University of Chicago – are collaborating on a statewide study to determine statewide diagnostic and service needs and outcomes for children with autism spectrum disorder aged 18 and younger.
https://niu.az1.qualtrics.com/jfe/form/SV_cxe3qDry5gODfox
ISBE-Autism Peer Buddy Program
On April 12, 2011, the resolution H.R. 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 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. TAP is not currently funded and its future is uncertain.

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.
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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/)

State Legislative Calendar
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. Michelle Mussman (D-Schaumburg) District 56
Rep. Michael Tryon (R-Crystal Lake) District 66
Rep. Dan Brady (R-Bloomington) District 105