Considerations for Adults on the Autism Spectrum

Gay Finlayson, M.A., Education and Outreach Manager
505-272-1046
gfinlayson@unm.edu

Guardianship removes considerable rights, and should only be considered after alternatives have proven ineffective or unavailable

http://www.nmddpc.com/alternatives_to_guardianship

Power of Attorney (POA) is an alternative while the person is still capable and they understand what they are signing.
- “Durable” means it is still good once person is incapacitated.
- “Springing” means it is only good once person is incapacitated.
- the POA can be broad or specific.
- the POA must be notarized, and it is best if prepared by an attorney working for the person.
Representative Payee –
Social Security’s Representative Payment Program provides financial management for the Social Security and SSI payments of beneficiaries who are incapable of managing their Social Security or SSI payments. Generally, they look for family or friends to serve in this capacity. When friends and family are not able to serve as payee, Social Security looks for qualified organizations to be a representative payee.

Informal arrangements with family members

Surrogate Decision-maker related to health-care:
You may designate any individual to act as surrogate by personally informing the health care provider of the following in descending order of priority:
- Spouse, unless pending petition for divorce, etc.
- Individual in a long-term relationship of indefinite duration similar to the commitment of a spouse, and the individual and the patient consider themselves to be responsible for each other’s well-being
- Adult Child
- Parent
- Adult Brother/Sister
- Grandparent
- Other Adult who has exhibited special care and concern for the patient, who is familiar with the patient’s personal values.

New Mexico Developmental Disabilities Waiver
Program
Eligibility:
- Developmental disability
- Intellectual disability
- Or a specific related condition (ASD)
- With functional limitations in 3 or more areas of major life activity
- Self-Care
- Receptive and Expressive Language
- Learning
- Mobility
- Self-Direction
- Capacity for Independent Living
- Economic Self-Sufficiency
Developmental Disabilities Waiver Services:
- Residential
- Habilitation
- Employment
- Therapeutic Support Services
- Family Support Services

Findings and Conclusions National Standards Project Phase 2
Addressing the Need for Evidence-Based Practice Guidelines for Autism Spectrum Disorder

National Autism Center, May Institute

RESEARCH FINDINGS for ADULTS (age 22 years and older)

Established Interventions for Adults

The only interventions to be identified as Established for individuals ages 22 years and older are Behavioral Interventions. The Behavioral Intervention category consists of applied behavior analytic (ABA) interventions to increase adaptive behaviors and decrease challenging behaviors.
Emerging Interventions for Adults

Emerging Interventions are those for which one or more studies suggest they may produce favorable outcomes. However, before we can be fully confident that the interventions are effective, additional high quality studies are needed that consistently show these interventions to be effective for individuals with ASD. Based on the available evidence, we are not yet in a position to rule out the possibility that Emerging Interventions are, in fact, not effective.

The following intervention has been identified as falling into the Emerging level of evidence:

- Vocational Training Package

Unestablished Interventions for Adults

Unestablished Interventions are those for which there is little or no evidence in the scientific literature that allows us to draw firm conclusions about their effectiveness with individuals with ASD. There is no reason to assume these interventions are effective. Further, there is no way to rule out the possibility these interventions are ineffective or harmful.

The following interventions have been identified as falling into the Unestablished level of evidence:

- Cognitive Behavioral Intervention Package
- Modeling
- Music Therapy
- Sensory Integration Package

Housing

http://www.autismspeaks.org/sites/default/files/housing_tool_kit_web2.pdf
ABLE Accounts (Achieving a Better Life Experience)

http://www.nmsto.gov/what_the_treasurers_office_does


Division of Vocational Rehabilitation

https://www.dvr.state.nm.us/Pages/Eligibility.aspx

Eligibility

To be determined eligible for DVR services, you must meet the following criteria:

You must have a physical or mental impairment; which for you constitutes a substantial impediment to employment; you can benefit in terms of an employment outcome; and you must also require vocational rehabilitation services in order to prepare for, enter, engage in, or retain gainful employment.
Social Security Disability Insurance - SSDI
Supplemental Security Income - SSI

Two different programs, both have similar eligibility requirements.

Social Security Disability Benefits Programs Defined

The two federal programs providing disability benefits are Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI).

Some applicants may be able to receive benefits from both programs at the same time, while others may be eligible for one or none.

Medical eligibility for these two programs is the same and depends on whether you can engage in "substantial gainful activity" (SGA).

The main definition of SGA is being able to earn at least $1,040 per month (in 2013). Whether you can engage in substantial gainful activity is up to the claims examiners at New Mexico's Disability Determination Services (DDS), a state agency in charge of making disability determinations for the Social Security Administration. DDS falls under the New Mexico Division of Vocational Rehabilitation (DVR), which provides rehabilitation services like vocational retraining.
SSDI is available to those who have sufficient work credits through Social Security tax contributions in recent years. SSI provides monthly benefits to those who are facing financial difficulties due to low income and assets, qualifying them for disability payments as well as other benefits such as food stamps, energy assistance, and medical aid (Medicaid).

New Mexico’s State Supplement to SSI

The state of New Mexico pays an additional monthly amount (called a state supplement) to disabled adults who can’t live on their own and who receive SSI. Individuals who live in an adult residential facility or assisted living facility receive $100 per month in addition to the federal benefit of $710 (in 2013); a couple receives $200 additional per month.

These supplements are supposed to help pay for assistance with personal care, such as eating, personal hygiene, dressing, and taking medicine. The New Mexico Human Services Department administers the state supplement; go to the New Mexico Human Services Department to get the application.

Medicaid

Centennial Care Medicaid in New Mexico is now available to residents with incomes up to 138 percent of poverty. Higher guidelines apply for some populations.

The following people are eligible in addition to the aged, blind, and disabled, and this chart includes monthly income limits as well as income as a percentage of poverty level:
2016 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA

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<th>Persons in family/household</th>
<th>Poverty guideline</th>
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<td>(For families/households with more than 8 persons, add $4,160 for each additional person.)</td>
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Centennial Care is the new name of the New Mexico Medicaid program.

Centennial Care began on January 1, 2014 with services provided by four managed care organizations (MCOs). These services include physical health, behavioral health, long-term care and community benefits. Most people who were previously enrolled in a New Mexico Medicaid program are eligible for Centennial Care. Eligibility for all Medicaid programs requires that individuals meet certain federal guidelines. These include citizenship, residency and income requirements.

To apply for Centennial Care coverage, you can complete an application on-line. If you have application questions, you can call the Human Services Division’s new Medicaid Expansion Hotline toll-free at 1-855-637-6574 or for general questions, please call 1-888-997-2583.

What Is the Community Benefit?

- The Community Benefit (CB) is Centennial Care’s name for the home and community based services (HCBS) benefit package.
  - These services are the same as those that CoLTS ‘c’ waiver recipients received
  - The Personal Care Services benefit is also part of CB (this was called Personal Care Option through CoLTS)
- Community Benefits are services that allow eligible members to receive care in their home or community as an alternative to being placed in a long-term care facility.
- Community Benefits are intended to supplement natural supports and support community living.
Community Benefit Eligibility:

- All members must have a full Medicaid category or have Waiver category of eligibility.
- All members must meet the nursing facility level-of-care (NFLOC) criteria.
- Be a New Mexico resident

ABCB Enrollment:

- If a member currently has full Medicaid and needs or wants long term care, the member must contact his/her MCO and request community benefits. A care coordinator will assess the member to determine if the member is eligible to receive these services.
- If an individual does NOT currently have full Medicaid, the individual will need to contact the Aging & Long Term Services Department, Resource Center at 1-800-432-2080 and place his/her name on the Central Registry to wait for a waiver allocation

ACBC Benefit Package:

- Assisted living
- Adult day health
- Behavior support consultation
- Community transition services
- Emergency response
- Employment supports
- Environmental modifications
- Home health aide
- Personal Care
- Private duty nursing for adults,
- Respite
- Skilled maintenance therapy for adults
Mental Health Parity

According to the National Conference of State Legislatures, every state but Wyoming now has a mental health parity law on the books, requiring that when insurers cover mental illness and/or substance abuse they do so on an equal financial basis with physical illnesses.

A federal law – the Mental Health Parity and Addiction Equity Act of 2008 – also requires equal treatment.

Mental Health Parity, continued

Health plans that must follow federal parity include:
- Group health plans for employers with 51 or more employees.
- Most group health plans for employers with 50 or fewer employees unless they have been "grandfathered," which means it was created before the federal parity laws went into effect.
- The Federal Employees Health Benefits Program.
- Medicaid Managed Care Plans (MCOs).
- State Children's Health Insurance Programs (SCHIP).
- Some state and local government health plans.
- Any health plans purchased through the Health Insurance Marketplaces.
- Most individual and group health plans purchased outside the Health Insurance Marketplaces unless "grandfathered."

See more at: https://www.nami.org/Find-Support/Living-with-a-Mental-Health-Condition/Understanding-Health-Insurance/What-is-Mental-Health-Parity#sthash.XeMO9uU3.dpuf

Mental Health Parity, continued

Health plans that do not have to follow federal parity include:
- Medicare (except for Medicare’s cost-sharing for outpatient mental health services do comply with parity).
- Medicaid fee-for-service plans.
- "Grandfathered" individual and group health plans that were created and purchased before March 23, 2010.
- Plans who received an exemption based on increase of costs related to parity.
Autism Programs at UNM CDD

Recreational Programs
- Tick Talk Game Night
- Archery
- Drumming
- Email Maia Wynn at wynnm@salud.unm.edu to join list serv for updates

Camp Rising Sun
- Adult Opportunities
- Camp Assistant
- Counselor
- Program Specialist

Autism Programs at UNM CDD, continued

New Mexico Partners in Policymaking
- Intensive Leadership and Advocacy Training for Self-Advocates, Family Members, and Professionals
- Curriculum involving:
  - Disability History
  - Inclusive Education
  - Supported Employment
  - Independent Living
  - Community Organizing
  - State and Legislative Action
- Duration: Three sessions of three days each, usually offered late Fall into early Spring
- Email Lisa Kalberg at lkalberg@salud.unm.edu for more information

Family and Provider Resource Team

A state-wide information phone line for families, individuals with Autism Spectrum Disorder and providers seeking autism-specific resources.

Includes Spanish speaking resource specialists
Can offer guidance in "navigating the system."

505-272-1852
Or toll-free 1-800-270-1861