

To: Senator Baldacci, Representative Meyer and esteemed members of the Health and Human Services committee
From: Kim Humphrey, mother of Dan and founder and president of Community Connect Maine
RE: Pass LD 473 Resolve, to “Expand the Eligibility for and Increase the Number of Hours of Applied Behavior Analysis Services Authorized by the MaineCare Program”

I am the mother and guardian of Daniel Humphrey, an adult living with autism, and I am founder and President of Community Connect Maine (CCME), a 501c3.

Applied behavioral analysis (ABA) is:

- 1) A valuable proactive methodology that builds skills toward greater independence.
- 2) A valuable reactive tool methodology that supports the recovery of people in crisis.

I have witnessed both aspects of ABA providing great success for my son.

As a child, Dan had been unable to make much progress in Maine due to inconsistency and gaps in care, poor transitions, untrained staff or a lack of staffing. That is why he went to out of state to a wonderful school that taught with applied behavioral analysis.

He was there for 8½ years, since the age of 11. By the time Dan was about to return to Maine at age 20, **he had just mastered his most complex skill**, cooking frozen broccoli in the microwave. It required breaking down the process into many steps, then setting up large, step-by-step notecards with each step spelled out with his picture communication. **I was told by his excited staff that they believed they had figured out how to teach Dan anything!**

But the 16 .5 hours/year of ABA that was available to adults was insufficient to tap into Dan’s recently discovered exciting potential for more rapid and comprehensive learning. While my son has been in a well-run group home program and made some progress, clearly he has had to sacrifice considerable potential because resources haven’t existed that would support it. If it were to become available now, **I could see him growing in independence and over time needing less staffing.**

ABA has also saved Dan twice in his early years by reining in out-of-control aggression that had lasted several months. Dr. Mark Steegie, a leader in Maine in ABA, did a functional assessment and set up a program with preferred activities. **Such services could greatly help adults in crisis** with profiles similar to my son’s, and should be made available when needed within the adult service system.

I agree with both Alan Cobo Lewis and Le’Ann Milinder testimony on how to best structure services by clarifying how the hours are used and including all tools within ABA, and I agree that funding non-direct hours for team collaboration is necessary. I agree with Michelle Probert’s testimony that data would be useful in determining need. Going ahead with this bill is important regardless of the current data gap. We have been waiting a long time for required data about needs and unmet needs in the developmental services system of care. When it becomes available please use it. In the same way, evaluating such data prior to the massive undertaking of redesigning the I/DD system of care for the Lifespan waiver would have been the optimal approach. In the case of ABA, the fact that private insurance covers ABA for adults gives some credibility to it’s need.

Please vote to pass this bill. It will facilitate independence and reduce long-term care costs. In future bills, increase the hours for other allied health services such as OT and psychiatric services. These are also needed.