

Testimony
Senate Bill 2176
Senate Human Services Committee
Wednesday, January 21, 2015; 9:00 a.m.
North Dakota Department of Health

Good morning, Chairman Lee and members of the Senate Human Services Committee. My name is Tamara Gallup Lelm and I am Director of the Division of Children's Special Health Services (CSHS) for the North Dakota Department of Health (NDDoH). I am here to provide testimony in support of SB 2176.

During the last legislative session, the NDDoH was given the responsibility of establishing and administering an autism spectrum disorder (ASD) database through the establishment of NDCC chapter 23-01-41.

The department has made significant progress towards development of the ASD database.

- In April 2014, an Autism Database Administrator was hired in CSHS
- The ASD module, which is an addition to the infectious disease surveillance system called MAVEN, was obtained
- Data collection fields were researched and defined for the ASD module
- In October 2014, an ASD expert panel meeting was held in conjunction with a technical assistance visit from autism registry staff from New Jersey, ND's mentor state for the ASD database (consultation with experts to establish reporting criteria is required in NDCC 23-01-41)
- The ASD database report form was drafted and is being finalized
- The department is in process of drafting Administrative Rules for the ASD database; final content of the rules is dependent on the outcome of the proposed SB 2176

The ASD expert panel that was convened in October raised concerns that language in NDCC 23-01-41 was potentially too restrictive and might hinder reporting into the ASD database. The panel recommended that the following areas be addressed during the 2015 legislative session before the ASD database was fully implemented.

Section 1, Part 2 – This section addresses criteria for qualified reporters. Rather than a doctoral level professional who is licensed, credentialed, and experienced in the field of ASD, including intellectual testing and other formal, evidenced-based assessments for ASD, the expert panel recommended the qualifications of reporters

be changed to include physicians, psychologists and other masters-level diagnosticians who are trained, licensed, and credentialed to diagnose ASD. Expert panel members had concerns about a reporter's ability to address both the physical evaluation/exam and intellectual testing or other assessments required for the ASD diagnosis to be reported. For example, psychologists on the panel might not be able to report on the complete physical evaluation and pediatricians might not be able to report on intellectual testing. Although the expert panel determined the gold standard in making an ASD diagnosis is often considered a multi-disciplinary team, the panel recognized that option is not always offered or practiced across the state.

Section 1, Part 3 - The expert panel recommended that a change be made regarding the physical evaluation. Rather than including a complete physical evaluation for ASD reporting, it was recommended that the reporter indicate whether a complete physical evaluation was performed as part of the diagnostic process for ASD. The panel recognized that, in addition to physicians, licensed independent practitioners may also perform physical evaluations. Use of this language is consistent with that used by Joint Commission and Centers for Medicare & Medicaid Services (CMS) to credential the billing of independently functioning practitioners. Including licensed independent practitioners for physical evaluations as part of the diagnostic process for ASD supports reporting in rural parts of ND and physician shortage areas.

Section 1, Part 4 - The expert panel recognized that the person reporting into the database could be different from the diagnostician; therefore, members recommended that a reporter's designee also be allowed to fill out the report form for the database.

Senate Bill 2176, if passed, should help to ensure the success of the ASD database as it is initiated.

This concludes my testimony and I would be happy to answer any questions you may have regarding these proposed changes.