Utilization of Medicaid-funded interventions for children with autism

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Abstract: The study examined utilization of Wisconsin's Medicaid funding for autism intervention before and after a major shift in program administration. Methods: Medicaid enrollment data were analyzed for 1,822 children with autism from 2000 through 2006, as were geocoded demographic data and decennial census data. Enrollees' data were compared with demographic data for Wisconsin's general population. Results: Compared with averages for all Wisconsin families, new Medicaid enrollees in 2000 were more likely to be from census tracts with a high proportion of white families with high socioeconomic status. These disparities decreased by 2006, two years after a change from a Medicaid fee-for-service structure to a Medicaid home- and community-based services waiver. Conclusions: As more states consider carve-out benefits for children with autism, close attention needs to be paid to the potential for disparities and the influence of mode of administration on utilization.