EARLY AUTISM INTERVENTION IS COST EFFECTIVE

Autism is a serious neurodevelopmental disorder that results in marked difficulties in social interaction, communication, and repetitive behavior. With a prevalence rate as high as 1 in 88 children (Centers for Disease Control and Prevention, 2012), autism spectrum disorders (ASD) have been estimated to affect more than 8,000 Iowa children. Nationwide, prevalence rates of ASD have increased 78 percent over the past decade (Insel, 2012).

Early Intensive Behavioral Intervention (EIBI) and Applied Behavior Analysis (ABA) are widely recognized as effective forms of treatment for many children with ASD (Myers, Johnson, & the American Academy of Pediatrics Council on Children with Disabilities, 2007; National Institute of Mental Health, 2011). Currently, many children in Iowa with ASD do not have access to ABA services due to a lack of trained providers and a lack of insurance coverage. The following summary of key research findings shows that early intervention can reduce the lifetime costs of autism:

- **If not treated early, autism costs are high.** The average per capita lifetime costs of autism have been estimated to range between $2 and $4 million (Ganz, 2007; Newschaffer et al., 2007).

- **ABA and EIBI are cost effective investments.** Results of several studies have demonstrated that intensive early intervention is cost effective. The average lifetime savings for a child who receives early intensive ABA services has been estimated to be $1.6 million (Larsson, 2012).

- **“Up front” costs of early intensive ABA are less expensive than initially estimated.** Findings from states with widely accessible early intervention services indicate that the average utilization of these services is only 34% of all eligible children (Larsson, 2012). Reasons for this relatively low percentage of utilization include children being diagnosed at an older age, children with milder symptoms not requiring intensive services, some families choosing to not obtain ABA services, and the slow growth of trained providers who are available to provide care.

Iowa currently finds itself in the position of needing to “invest wisely now or pay dearly later” when it comes to autism services. Iowa children and families who are coping with autism deserve a coordinated system that provides access to appropriate care. Insurance reform and changes in health care delivery are essential for increasing access to evidence-based interventions (especially ABA) and reducing the long-term costs that continue to be increased by the limited availability of behavioral services in Iowa.

The research is clear about what needs to be done for families coping with autism – we just need the foresight and commitment to invest in early behavioral intervention!

This summary was prepared by Todd Kopelman, Ph.D., and Scott Lindgren, Ph.D., of the University of Iowa Children’s Hospital Autism Center.