The kinds of cellular and microstructural changes that have been observed in the brains of individuals with ASD suggest that neurological underpinnings of ASD manifest in utero. However, this is a largely untested hypothesis. Researchers at Wayne State University and the National Institutes of Child Health and Human Development’s Perinatology Research Branch are addressing this gap by studying brain development in siblings of children with ASD -- beginning even before birth. ASD siblings more frequently experience symptoms of ASD, and are thus able to shed light on the brain differences that precede ASD symptomatology. These researchers are comparing ASD siblings scanned with MRI pre-and postnatally to typically developing children in an effort to identify differences in brain development that have prenatal origins. They are recruiting pregnant mothers that have at least one child with ASD into a longitudinal fetal brain imaging study.

Until recently, function in the human fetal brain has proven a “black box” of neuroscience research. Using newly emergent technologies that are non-harmful and non-invasive (e.g., no dyes, no radiation) the Wayne State researchers are able to measure neural networks of the fetal brain as they develop. They are using a technique, referred to as “resting-state” functional MRI, to measure spontaneous activity across the fetal brain.
Greetings Autism Community of Michigan! All of us at AAoM are so pleased to bring you this first newsletter which we plan to distribute monthly. Given the many statewide initiatives and reform efforts which we have collectively navigated over the past several years, combined with new, innovative projects, community events, and other developments, we felt a more regular means of communication was essential to keeping you informed. We are also hoping this communication will serve as an effective tool for service providers, as well, in keeping the autism community informed of your own developments, program offerings, and events, as a way to better reach our families across the state.

Editions will include new information, as it comes to us, and regular features, to include;

- Advocacy and legislative updates
- Insurance updates
- National initiatives and federal policy
- Tips for improved practice management
- University announcements and grant funded projects
- MI Autism Council updates
- Special education news
- MiNavigator stories
- Special events and community offerings

We view this as an opportunity to collaborate and coordinate activities that take place across our great state which effect multiple stakeholders; service providers, educators, universities, funders, autism volunteer and advocacy groups, state departments, and of course, families. We will regularly solicit your input and feedback to create the best publication to meet your needs.

Enjoy and thank you for all you do to make life better for individuals living with autism and their families in Michigan.

Sincerely,

Colleen Allen, Ph.D.,
President and CEO, Autism Alliance of MI
Governor Appointee, MI Autism Council

The mission of Autism Alliance of Michigan is to lead collaborative efforts across the state that will improve the quality of life for individuals with autism through education, comprehensive services, community awareness, inclusion efforts, and coordinated advocacy.

To learn more visit www.aaomi.org
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They look for patterns in the brain's spontaneous activity that reveal coordinated function between brain regions. Quite remarkably, from these coordination patterns researchers are able to infer a picture of the connectional architecture of the fetal brain. This is the only study in the world that is leveraging this radical scientific advance to better understand the earliest neural signatures of ASD.

The fetal imaging team at Wayne State University has already made several advances in developmental science using this technique. They have established previously non-existent normative models of human fetal brain connectome development that include properties such as developmental increase in cross-hemispheric, long-range, and cortical-subcortical functional connectivity. They have also described decreased modularity and increased negative posterior cingulate cortex connectivity in older compared to younger fetuses. Most recently, they reported that weaker connections exist in the preterm brain prior to the complications of early delivery, providing novel insight into the relationship between premature birth and subsequent neurological and behavioral health disorders. They are hopeful that application of this technology to the study of ASD will illuminate mechanisms that underlie this perplexing disorder. It may not be science fiction to imagine using brain scans in the future to identify early markers that can predict the emergence of developmental and psychiatric disorders in childhood, prior to symptom onset.

It’s Open Enrollment Time! Mary Schwyn, Insurance Specialist, AAoM

It’s that time of the year when many of us are going through open enrollment. Although open enrollment is dependent on a company’s fiscal year, the majority (including federal employees) most of publically traded companies, and Affordable Care Act insurance will start open enrollment within the next month and 2017 benefits active January 1. Not all employers will be offering open enrollment at this time, if patients need more information they should contact their human resources department.

Stakeholders have two roles during this period; helping families navigate the autism insurance maze and insuring providers practices are current with updated insurance information.

Providing Advice for Families

In-Network Providers. Before switching insurance carriers patients need to make sure all of the therapists, medical providers and medications are covered by the potential insurance plan. Add up all the costs. Many employers offer several different plans. Check which services apply to the co-insurance, what are the copays per visit, and what are the out-of-pocket maximums. Lower monthly premiums don’t necessarily mean lower out of pocket costs.

ACA “Child-only” Plans. If patients have self-funded plans, that don’t include an autism benefit, now is the time to investigate Individual or “Child-only” plans through the Michigan Marketplace. Open enrollment for an individual or child-only plan is November 1 – December 15, for plans starting January 1, 2017.
High Deductible Plans

Ultimately, it’s the patient’s responsibility to know their insurance plan and their fiduciary responsibility. However, it’s beneficial to discuss high deductible plans with patients. For example, if a family with a child receiving ABA has a $6000 aggregate deductible, it’s helpful to know prior to services starting or as soon as possible.

Medical and behavioral health care insurance can be extremely confusing for families, the Navigators and Insurance Specialist at AAOM are available to help patients to guide patients in the right direction. Call 877-463-AAOM for provider or family assistance.

**Do you have new insurance? Do you have any changes in your insurance?**

**Insurance Verification.** At the beginning of the year or anytime there has been a change in insurance, complete an insurance verification which includes the patient’s copay, deductible, and out-of-pocket maximum. Make sure to compare you results with the patients, they are often different.

**Provider Responsibilities**

Ask. Autism providers see patients more frequently, and therefore sometimes neglect to ask routine questions that physicians’ offices typically ask. Patients don’t always remember to provide new insurance information to their clinicians.

Please Visit Our Community Calender at www.navigator.autismallianceofmichigan.org for more events.