

MCYS MODEL VS DIRECT FUNDING

The MCYS model is more expensive than direct funding families

- The current system is **66% MORE EXPENSIVE** than Direct Funding parents – **after taking into account overhead costs associated with running it** (Auditor General of Ontario's Annual Report 2013, p.77)
 - The cost per child/year averages \$56,000
 - The range in costs per child/year are \$50,800-\$67,000
- Comparisons of cost/hour have consistently shown it to be **MORE EFFICIENT TO DIRECT FUND** (e.g. Costing Analysis of Autism Intervention Program - Final Report, MCYS, October 2008)
 - In 2008, the cost/hour of DSO therapy ranged from \$47-\$87/hour
 - In 2008, the cost/hour of DFO therapy ranged from \$27-\$44/hour

Contracted Regional Service Providers act as both gate-keepers for funding private services and their competitors

- They determine the number of spots available for each option in their region (Auditor General of Ontario's Annual Report 2013, p.60).
- It is unclear whether **ANY** direct funding of the private provision of services will be allowed under the new model.
- 10 years ago, **17% OF THE TOTAL COST PER CHILD** was being spent on “program administration” (Costing Analysis of Autism Intervention Program - Final Report, MCYS, October 2008)
 - 42% = salaries, wages and benefits for regional providers
 - 57% = direct operating expenses of regional providers
 - > 1% = other service providers' administration costs
- BC, Alberta, and, soon, Saskatchewan use Direct Funding.

Paying now saves money later

- A 2006 estimate put the total savings to tax payers of IBI for all at **\$45,133,011 IN 2003 DOLLARS** (Motiwala, Gupta, Lilly, Ungar, and Coyte, 2006, p. 136).
- The same study showed that it would be a cost-savings policy as **THE TOTAL COST OF CARE OVER A LIFETIME IS LESS** and **MORE PEOPLE LIVE DEPENDENCY-FREE.**

There is untapped capacity that could be leveraged NOW

- **ONTARIO HAS MORE BCBAS THAN ANY OTHER PROVINCE IN CANADA** - the gold standard for clinical supervision and delivery of IBI programs. (See the Behavior Analyst Certification Board registry, 2016, <http://info.bacb.com>)
 - There are **433 BCBAs** currently in practice in Ontario (there are only 20 in Alberta)
- **573 STUDENTS GRADUATED WITH A GRADUATE CERTIFICATE IN AUTISM AND BEHAVIOURAL SCIENCE IN 2011 IN ONTARIO** (MCYS Results-based Plan Briefing Book, 2011-12, <http://www.children.gov.on.ca/>)
 - 12 Ontario colleges offer this program

THE OAC/AAOAP MISSION

To leverage the lower cost, flexibility and transparency of a direct funding model so that all children with ASD for whom ABA/IBI has been prescribed by a qualified clinician are able to get intervention in a timely manner regardless of their age.

THE OAC/AAOAP ASK

1. Direct Funding for Autism Intervention Services Now
2. No Age Cut-Off for Children Needing IBI

THE SOLUTION

A system of autism service provision that does **NOT** rely on a cycle of wait lists, limited durations, or an expensive bureaucracy and which addresses:

- The need for **IMMEDIATE** intervention in the manner clinically recommended
- The need for intervention to be **SUSTAINED**, i.e. no max durations/returns to a wait list
- The need for intervention to be **INDIVIDUALIZED**, i.e. not made to fit a bureaucracy and as understood by people with real expertise in behaviour analysis and intervention (BCBAs).



FOR MORE INFORMATION & UPDATES

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