

Autism Spectrum Disorder (ASD) Disparities in Medicare Fee-For-Service Beneficiaries



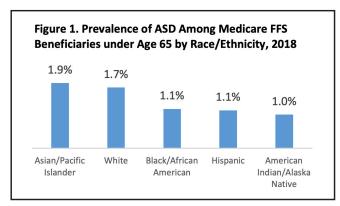
Autism Spectrum Disorder (ASD) includes multiple developmental disabilities. This chronic condition consists of a wide range of symptoms, skills, and levels of impairment resulting in social, communication, and behavioral challenges. Early intervention and behavioral treatment can optimize health and developmental outcomes for children diagnosed with ASD. According to the Centers for Disease Control and Prevention (CDC), approximately 1 in 54 children are living with ASD. ASD occurs in all racial, ethnic, and socioeconomic groups, but is more

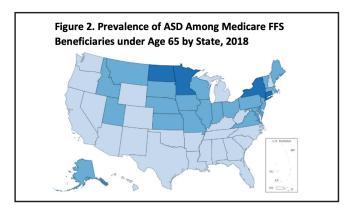
DATA SNAPSHOT

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than 4 times more prevalent among males than females.¹ Adults with autism are at higher risk of developing other chronic conditions such as diabetes, coronary heart disease and cancer.²

The Centers for Medicare & Medicaid Services' (CMS's) Chronic Condition data indicates that 0.3% of all Medicare fee-for-service (FFS) beneficiaries and 1.6% of those less than 65 years of age had claims with a diagnosis of ASD in 2018. Among beneficiaries who were less than 65 years old, ASD prevalence is higher among males (2.2%) than among females (0.8%). Within that population, 2.5% of dual beneficiaries, those with both Medicare and Medicaid, had claims with ASD, while 0.2% had the claims among Medicare only beneficiaries. Figure 1 shows the prevalence of ASD among beneficiaries less than 65 years of age by race and ethnicity. Asian/Pacific Islander (1.9%) and White (1.7%) beneficiaries had a higher prevalence of ASD compared to Black/African American (1.1%), Hispanic (1.1%) and American Indians/Alaska Natives (1%) beneficiaries.³ The Mapping Medicare Disparities Tool developed by CMS Office of Minority Health shows the prevalence of ASD among Medicare FFS beneficiaries varied by age, sex, race and ethnicity, eligibility for Medicare and Medicaid, and geographic areas in 2018.⁴ As shown in Figure 2 the prevalence of ASD among Medicare FFS beneficiaries under age 65 higher (3%) in Connecticut, Minnesota, New York and North Dakota.





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Medicare Part B provides Chronic Care Management Services to beneficiaries with multiple chronic conditions. April is National Autism Awareness Month. The goal is promoting the awareness and inclusion of individuals with ASD to achieve the highest quality of life possible. In response to the increased interest and activity related to ASD, CMS has provided a series of information and guidance intended to increase awareness and understanding of ASD.

Beneficiary Resources

- What is Autism Spectrum Disorder?
- Autism Spectrum Disorder and Medicaid
- Medicare and You Handbook
- Chronic Care Management Services
- Autism Spectrum Disorder (pdf)
- Autism Support

Provider Resources

- CMS: Medicare Chronic Conditions
- CMS-Medicare Learning Network: Medicare Preventive Services
- NICHD Autism Research Information
- Effective Health Care Program Autism
- Recommendations and Guidelines
- Developmental Screening in Pediatric and Primary Care Practice

References/Sources

- 1. Centers for Disease Control and Prevention. http://www.cdc.gov/ncbddd/autism/facts.html
- 2. Tyler CV, Schramm SC, Karafa M, Tang AS, Jain AK. Chronic disease risks in young adults with autism spectrum disorder: forewarned is forearmed. Am J Intellect Dev Disabil. 2011 Sep;116(5):371-80. doi: 10.1352/1944-7558-116.5.371.
- 3. Centers for Medicare & Medicaid Services. Chronic Conditions. https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Chronic-Conditions/CC_Main
- 4. Centers for Medicare & Medicaid Services. Mapping Medicare Disparities Tool. https://data.cms.gov/mapping-medicare-disparities

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If you have any questions or feedback, please contact HealthEquityTA@cms.hhs.gov.

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