|  |
| --- |
| NCC - white oval_bevel_shadow_transp.png***State of Nevada******Department of Health and Human Services******Aging and Disability Services Division******rt Division Here>***ConsumerFACT SHEET |

**AUTISM TREATMENT ASSISTANCE PROGRAM (ATAP)**

|  |
| --- |
| **Purpose** |

 To assist parents and caregivers with the costs of providing Autism-specific treatments to children with Autism Spectrum Disorder

|  |
| --- |
| **Target Population** |

Individuals who are Nevada residence under the age of 19 and have a diagnosis or determination of an Autism Spectrum Disorder by a physician, psychologist, pediatric neurologist or other qualified professionals.

|  |
| --- |
| **Eligibility** |

Children from 18 months to 19 years of age; Children diagnosed with Autism, Asperger’s Syndrome, PDD-NOS, Pervasive Developmental Disorders Not Specified.

|  |
| --- |
| **Services** |

* Uses Applied Behavior Analysis techniques to develop useful behaviors and to reduce behaviors that may be harmful or interfere with learning.
* The ATAP program uses a Supervision Tier Structure designed to protect the child’s budget by limiting what providers can charge and ensure basic level of treatment supervision is received and expected on a monthly basis.
* There are multiple ATAP plan types; they are selected during an assessment between an ATAP care manager, provider and parent. These plans are designed to address every child’s needs based on hours received.
* Speech, Occupational and Physical therapy are also available.

|  |
| --- |
| **Program Policies and Procedures** |

|  |
| --- |
| **How to Apply** |

 Initial application/inquiry – 775-687-4210 (English/Spanish)

|  |
| --- |
| **For Information** |
| **Carson City Administrative Office- ATAP Program** (775) 687-4210 |  |
|  |  |
| **Website** |
| Website: | <http://adsd.nv.gov/Programs/Autism/ATAP/ATAP/> |
| Brochure: | <http://adsd.nv.gov/uploadedFiles/adsdnvgov/content/Programs/Autism/ATAP/ATAP_Brochure.pdf> |

*Last updated: 4/12/16 BA*