



**ATAM – The Autism Treatment Association of Minnesota**

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February 19, 2024

**RE: Support HF 3741 / SF 3523**

Senator Melissa H. Wiklund  
Chair, Senate Health and Human Services Committee  
95 University Avenue W.  
Minnesota Senate Bldg., Room 2107  
St. Paul, MN 55155

Dear Senator Wiklund:

I am Dr. Eric Larsson, a Licensed Psychologist, a Board Certified Behavior Analyst, and the President of the Autism Treatment Association of Minnesota, a trade group that is composed of 13 in-home and center-based provider agencies. These agencies serve over 6,000 children and adults in their homes, schools, community, and service centers through a variety of professions, including behavior analysis.

The Minnesota Department of Health estimates that there are 100,000 children in Minnesota with behavioral health needs. 32,000 children in Minnesota have Medical Assistance for behavioral health needs which can be met through Behavior Analysis services as part of a plan of coordinated care with other helping professions.

Behavior Analysts work out in the field, in homes, neighborhoods, community centers, group homes, and hospitals with challenging behaviors that include isolation, aggression, and self-injury. They work as part of a team to help the family develop goals that are meaningful to them, and then observe the behaviors where they are causing concern, develop an objective measurement system, and implement reinforcement and training systems that can remediate the challenges. The goal is to enable the child to more fully engage with their family and community. With competent services, this intervention improves the child's quality of life. Done poorly, the situation can become worse and lead to more restrictive services.

This bill empowers the Board of Psychology to regulate the practice of behavior analysis in the same way that it regulates the practice of psychology. The Minnesota Psychological Association, the Minnesota Northland Association for Behavior Analysis, Fraser, and the Autism Treatment Association of Minnesota all support passage of HF 3741(Edelson)/SF 3523(Kupec), this behavior analyst licensing bill to protect these vulnerable populations and provide a local process to investigate complaints and discipline bad actors where allegations are proven.

The Council of Minnesota Health Boards has recommended that behavior analysts be licensed in Minnesota based on the national Behavior Analysis Certification Board (BACB) credential. There are 470 master's-level BCBA's and bachelor's-level BCaBA's who hold this credential in Minnesota. Thirty-seven other States, including all of Minnesota's surrounding States, already have laws that regulate BCBA's and 30 have laws that regulate BCaBA's.

The intent of this bill is to license behavior analysts without impacting the existing licensed professions who provide needed behavioral health and special needs services. The bill includes exemptions for any licensed professionals who currently provide behavior analytic services within their own existing scope of practice.

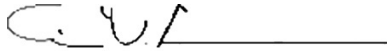
The bill also creates a Behavior Analyst Advisory Council that will collaborate with the Board of Psychology in implementing the Minnesota License. The cost to create licensure in Minnesota will be nominal as the licensure will be administered by the existing Board of Psychology, and utilize the existing credentialing system of the national Behavior Analysis Certification Board. By using this same national standard as the other states, the bill will streamline the ability of behavior analysts who are already licensed in other states, to enter and practice safely in Minnesota.

The Minnesota licensure will protect the public by discouraging unlicensed or sanctioned behavior analysts from moving into Minnesota. It will also keep competent behavior analysts from moving out of the State for better career prospects. With licensure, consumers will have the assurance that comes with knowing a behavior analyst has a license and the benefit of a local process to file a complaint. This licensure bill will provide for the same regulation and protections that exist for the other Minnesota health professions.

Recognizing the workforce shortage, the BACB had developed a tiered model of services that facilitates the hiring, training, and direct supervision of disadvantaged workers. This tiered system expands a career pathway that can lead to retention and recruitment of critical providers to meet the demand for these services in the years to come.

Please support this much needed licensure protection for Minnesotans.

Yours,



Eric V. Larsson, PhD, LP, BCBA-D  
President,  
Autism Treatment Association of Minnesota

Executive Director  
Lovaas Institute Midwest  
2925 Dean Parkway, #300,  
Minneapolis MN, 55416  
612.281.8331  
elarsson@lovaas.com