Date

Patient Name
DOB
Insurance Name
Insurance Number
Reference Number if applicable

To Whom It May Concern:

My name is _____ and I am the (primary care pediatrician, neurologist, developmental pediatrician, child psychiatrist, psychologist, etc) who cares for _____ (DOB) who is a ___ year old (girl/boy) with autism spectrum disorder. I am writing this letter because children with autism require not only applied behavior analysis (the primary and best evidence based intervention for children with autism) but also community supports such as speech, occupational therapy and special instruction to make developmental progress. However, for the therapy to be maximized the ABA therapist should be collaborating with the team and helping ensure that the other therapy is delivered using principles of applied behavior. For this to be effective the ABA therapist (BSC, BCBA, BCaBA) should be able to co-treat with other habilitation providers such as but not limited to speech pathologists, occupational therapists, school providers, special instructors etc. so that _____'s outcome will be the best it can be. Co-treating is considered "best practice", is not a duplication of any service, is **not** considered "group therapy" and will ultimately provide a cost savings as it is the only way to ensure coordinated care with proper generalization to all environments.

Thank you for your attention to this matter,

Sincerely,

(insert signature and contact information)