



**DEPARTMENT OF DEVELOPMENTAL SERVICES
AUTISM DIVISION**

40 Broad Street, 4th Floor, Boston, MA 02109

MESSAGE TO FAMILIES OF YOUNG CHILDREN WITH AUTISM

**An Important Message to Massachusetts Families
With Children Under Age 10
Diagnosed with an Autism Spectrum Disorder**

Open Request Application Period: October 16, 2026 to October 30, 2026

The Autism Division of the Department of Developmental Services (DDS) operates the Children's Autism Waiver Program that provides one-to-one interventions to help children with autism who exhibit severe behavior, social, and communication issues through a service called **Expanded Habilitation, Education** (intensive in-home services and supports). This service occurs in the child's home or other natural settings under the supervision of trained clinical staff and is available for a total of up to three years. The program also provides related support services such as community integration activities, family training, and respite. At the conclusion of the three years of intensive services, a child may access supplemental services that meet the child's needs and help with the transition out of the intensive portion of the Children's Autism Waiver Program until the child's 10th birthday.

Eligibility: the following requirements are necessary for participation in this waiver program:

1. The child must have a **confirmed diagnosis** of an Autism Spectrum Disorder, subject to verification by the Department of Developmental Services.
2. The child has not yet reached his/her 10th birthday. Children birth through age 9 may participate.
3. The child is a resident of Massachusetts.
4. The child meets the level of care required for services in an Intermediate Care Facility for persons with an Intellectual Disability (ICF/ID) as assessed by DEPARTMENT OF DEVELOPMENTAL SERVICES.
5. The family chooses to have the child receive services in the home and community.
6. The child must be able to be safely served in the community.
7. The child must have a legally responsible representative able to direct the services and supports of the program.
8. The child must be found by the MassHealth agency to be eligible for MassHealth Standard coverage, based on family income. **For families who have not yet applied for MassHealth, this must be done at the time of the filing of the Children's Autism Waiver Program Open Request Form.** (Instructions on how to apply for MassHealth are on the next page)

All services require that the child continues to meet the financial and clinical eligibility requirements for the Children's Autism Waiver Program throughout their enrollment. The Children's Autism Waiver Program will

continue to serve children with an autism spectrum disorder who meet the eligibility criteria for the Program, up until their 10th birthday. At this time the program may serve approximately 500 children a year.

The Children's Autism Waiver Program maintains reserved capacity (55 statewide slots) for children who are age 3 and transitioning out of Early Intervention. There is a high rate of turnover in the program every year, therefore, we pull from this Open Request list to fill open slots. The Autism Division is offering an opportunity to apply for the current applicant pool through an open request application period. The Autism Division held its last open request in October 2025.

The 2026 Open Request period runs from October 16, 2026 – October 30, 2026. Please be sure to MAIL, EMAIL, FAX or complete the application ONLINE between October 16th and October 30th, 2026. The Autism Division will discard submissions outside of this timeframe. The Autism Division is NOT accepting hand delivered applications. If you submitted an application during the last open request application period in October 2025, YOU MUST RESUBMIT AN APPLICATION FOR 2026.

How to Participate in the Open Request Process:

1. Get a copy of the *Open Request Application*

- a. Please contact your local Autism Support Center (see below) to request the *Open Request Application*.
- b. Autism Support Centers are available to help you complete the application.
- c. All forms are also posted on the DDS website: [DDS Children's Autism Waiver Service Program Overview | Mass.gov](#).
- d. **ONLY ONE APPLICATION PER CHILD**—The Autism Division will discard multiple applications. The Autism Division is not able to accept hand delivered forms.

2. Complete the *Open Request Application*. You will need your:

- a. child's date of birth
- b. child's social security number
- c. child's MassHealth ID number

3. How to Submit the *Open Request Application*:

a. By Mail

- i. All Applications must be Postmarked or Date Stamped by October 30, 2026.
- ii. Please complete the form in Pen and Print Clearly
- iii. Please Mail Form To:

DEPARTMENT OF DEVELOPMENTAL SERVICES - AUTISM DIVISION
ATTN: Children's Autism Waiver Program Open Request
40 Broad Street, 4th Floor
Boston, MA 02109

b. By Email

- i. All Applications must be emailed to DDS-ChildrensAutismWaiverProgram@mass.gov
- ii. All Applications must be sent directly from the Parent/Guardian Only
- iii. All Applications must be emailed between October 16, 2026 – October 30, 2026
- iv. Form can be completed electronically or printed, filled out clearly in pen and scanned into an email
- v. Attached Forms may be sent in the following formats: PDF (preferred), JPG if clearly visible
- vi. If completing on a smart phone/tablet-download a free scanner app and send via a PDF file.

c. Complete Online

- i. Application can be completed by using the following link: [2026 Open Interest Request Application](#)
- ii. Application can be completed by scanning the QR code:



- iii. All Applications must be completed online between October 16, 2026 – October 30, 2026

d. FAX to 1-857-323-8379

It is a priority of the Autism Division of DDS to ensure that the process for requesting participation for the Children's Autism Waiver Program is fully accessible to families and children with autism who are from linguistically and culturally diverse backgrounds. Materials are available in Amharic, Arabic, Chinese (Mandarin & Cantonese), Haitian Creole, Cape Verdean Creole, French, Portuguese (European and Brazilian), Russian, Spanish, Turkish, Vietnamese, Nepali and Somali.

Translation and interpretation are available free of charge to all participants.

How to Apply for MassHealth: You can apply for MassHealth in any of the following ways:

- If you have an account, sign into <https://www.mahealthconnector.org/> and apply for MassHealth
- If you do not have an account, the quickest way is to apply online and create a secure online account at <https://www.mahealthconnector.org/>
- Fill out and sign the [Massachusetts Application for Health and Dental Coverage and Help Paying Costs](#) and mail to:
Health Insurance Processing Center
P.O. Box 4405
Taunton, MA 02780
or Fax to 1-857-323-8300
- Call the MassHealth Member Customer Service Center at 1-800-841-2900
(TTY: 1-800- 497-4648 for people who are Deaf, hard of hearing, or speech disabled) or 1-877-MA ENROLL (877-623-6765).

For additional information about the Autism Waiver Program:

- Visit the DDS website: [DDS Children's Autism Waiver Service Program Overview | Mass.gov](#)
- Contact your local Autism Support Center (information below)
- Email us DDS-ChildrensAutismWaiverProgram@mass.gov or
- Call the Autism Division at DDS at 617-624-7778.

DDS CHILDREN'S AUTISM SERVICE CENTERS:

Western Massachusetts

Autism Connections, a Program of ServiceNet

11 Village Hill Road
Northampton, MA 01060 | (413) 585-8010

Central Massachusetts

Autism Resource Center, A Program of Advocates

712 Plantation Street
Worcester, MA 01605 | 508-835-4278

MetroWest

Autism Alliance, A Program of Advocates

1881 Worcester Rd, # 100A
Framingham, MA 01701 | 508-652-9900

Greater Boston

Vinfen

1208A VFW Parkway
West Roxbury, MA 02132 | 617-206-5038

Norfolk County

Lifeworks: The Family Autism Center

789 Clapboardtree Street
Westwood, MA 02090 | 781-762-4001

Southeastern Massachusetts

Community Autism Resources (CAR)

40-A Dean St,
Taunton, MA 02780 | 508-379-0371

Northeastern Massachusetts

Northeast ARC (NEARC) The Autism Support Center

100 Independence Way-Suite D3
Danvers, MA 01923 | 978-777-9135