State Health Insurance Legislation for Autism Spectrum Disorders (ASD) Part One: Legislation Enacted

	Α	В	С	D	Е	F	G	Н	I	J
1		Arizona	California	Kentucky	New York	Oklahoma	Oregon	Pennsylvania	South Carolina	Tennessee
2	Legislative Citation	Section 1. Title 20, Chapter 4, Article 3, Arizona Revised Statutes, is amended by adding section 20-826.04 (Known as Steven's Law)	CA Code ab 88; Chapter 534, §1374.72 and §10144.5	KY Rev State Ann. §3304.17A-143	Chapter 557 A539-A	Title 36, Section 4413	ORS 750.055 and 750.333	P.L. 682, No.284; HB 1150	Title 38-71-280	Title 56, Chapter 7, Part 23
3	Covered Services	Benefits include treatment, diagnosis, assessment and services	All or part of the mental health services required including SP, OT, PT and applied behavior analysis, case management, diagnosis and treatment; outpatient services; inpatient hospital services; prescription drugs		Includes full coverage for the prevention, early detection diagnosis and treatment of ASD	Diagnosis, proposed treatment by type, frequency, and duration of treatment, the anticipated outcomes stated as goals, the frequency by which the treatment plan will be updated, and the signature of the treating medical doctor.	Policies must include coverage for pervasive developmental disorders	item for individuals with an ASD which is determined by the Dept of Public Welfare based upon best practices or evidence-	Diagnosis, proposed treatment by type, frequency, and duratior of treatment, the anticipated outcomes stated as goals, the frequency by which the treatment plan will be updated, and the signature of the treating medical doctor.	Must provide benefits for ASD
4	Age limit	Children under age 16	Children under 18 years	Age 2 through 21	Not specified	Children under 16 years must be diagnosed at age 8 years or younger.		Children under 21 years of age.	Children under 16 years must be diagnosed at age 8 years or younger.	Children under age 12
5	Deductions	Allows insurers to impose deductibles, coinsurance or other cost sharing on the coverage.	Capitation payments are legal under <u>Health & Safety</u> <u>Code</u> § 1348.6 and involve fixed monthly payments by a plan to the PCP medical group on a per capita basis			\$50k maximum benefit per year.	Allows insurers to impose deductibles, coinsurance or other cost sharing on the coverage.		\$50k maximum benefit per year.	
6	Limits	Coverage for Behavioral Therapy to: \$50k max benefit/yr up to age 9 years \$25k max benefit/yr age 9- 16	Not be limited to maximum lifetime benefits, Copayments, Individual and family deductibles	\$500/mo for each covered child.		Not subject to dollar limits, deductibles or coinsurance provisions that are less favorable May be subject to general exclusion and limitations of health insurance plans coordination of benefits, particularly provider requirements, restrictions on services provided by a family/household member, utilization of review health care services including medical necessity, case management and othe managed care provisions		limit on the number of visits to an autism service provider.	Not subject to dollar limits, deductibles or coinsurance provisions that are less favorable May be subject to general exclusion and limitations of health insurance plans coordination of benefits, particularly provider requirements, restrictions on services provided by a family/household member, utilization of review health care services including medical necessity, case management and othe managed care provisions	Benefits shall be subject to deductibles and co- payment requirements and benefits limits which are no more stringent than those established for the treatment of other neurological disorders.

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1	Α	В	С	D	E	F	G	Н	I	J
1		Arizona	California	Kentucky	New York	Oklahoma	Oregon	Pennsylvania	South Carolina	Tennessee
	Exemptions	Individual or small employer contracts, policies or evidence of coverage Limited benefit coverage Long-term care insurance, life insurance and annuities offered by a group disability insurer Service provided outside of Arizona								
	Prohibitions	Prohibits - Excluding or denying coverage for treatment, including diagnosis, assessment and services based solely on the diagnosis of ASD Imposing dollar limits, deductibles or coinsurance provisions based in dx of ASD Excluding or denying coverage for medically necessary behavioral therapy services			Insurers are prohibited from denying hospital, surgical or medical care coverage to policyholders based solely on an ASD diagnosis					
8	Implementation Issues or Pitfalls	Requires behavioral services be provided or supervised by a licensed or certified provider		Habilitation services delivered through EI or school is not required	The health insurance plan may only request an updated treatment plan once every 6 months unless more frequent review is necessary as agreed upon by the health insurance plan and the medical doctor.			Dept of Public Welfare shall promulgate regulations establishing standards for qualified autism service providers.		Must be at least as comprehensive as those for other neurological disorders.

Part Two: Proposed/In Progress State Efforts to Insure Coverage for Services for ASD

A	В	С	D	Е	F	G	Н
1	Colorado	Georgia	Indiana	Maryland	New Jersey	Ohio	Wisconsin
Citation	Senate Bill 08-163 ~ Establishes an autism commission, fiscal impact study Senate Bill 07-004 ~ Requires DHS to develop a Coordinated Payment System and requires El be covered by Medical Assistance and Private Health Insurance	GA Code Ann §33-24-59.10 (adds definition of Autism)	IN Code §§27-13-7-14.7 27-8-14.2 thru 27-8-14.2-5 (as added by P.L. 148-2001, Sec.3	House Bill 99 was adopted during the 1998 session of the General Assembly. It required the Maryland Department of Health and Mental Hygiene (DHMH) to apply to the Health Care Financing Administration (HCFA) for two Home and Community-Based Services Waivers under Section 1915(c) of the Social Security Actone would target autistic children and the other would target seriously emotionally disturbed individuals residing in residential treatment centers. Thus, in August 1998, DHMH applied for a 1915(c) Home and Community-Based Service Waiver that, if approved, would allow autistic children in need of an Intermediate Care Facility for the Mentally Retarded (ICF-MR) to receive the necessary waiver services to maintain them in the community.		A bill (H.B. 170) was considered in November 2007. (Unable to track down current information. Bill was "resting" with the insurance committee).	Reported byWI Gov's Media Room that Gov Doyle was to submit a bill in Feb 2007 for insureres to cover "severe autistic children". Unable to locate any legislative action.
Covered Services	El services	Subject to the same terms and conditions as neurological disorders	Policies must include coverage for pervasive developmental disorders	"Respite Care "Environmental Accessibility Adaptations "Family Training "Supported Employment "Day Habilitation (regular / intensive,/therapeutic) "Residential Habilitation "Targeted Case Management Program through the existing regulations COMAR 10.09.52, Service Coordination for Childrer with Disabilities			
Age limit	Children B-3 ~ Limited mandated coverage for children 3-6 yrs (for this piece of legislation).			Children who are ages 1 through the end of the semester that the child turns 21 years old with an Individualized Family Service Plan (IFSP) or an Individualized Education Program (IEP) and receives more than 15 hours per week of special education and related services;			
	Precludes the applicability of deductions, copayments and lifetime caps on coverage.		May not be subject to deductibles, copayments or coinsurance that are less favorable				
Limits	May not inhibit, encumber or control the use of local funds including county, grants, mill levies and private grants and contributions.		May not be subject to dollar limit.	All Waiver Service providers must be approved Medicaid providers and appropriately licensed or certified. For more information on the Autism Waiver, call the Maryland State Department of Education at 410-767-0264 or the Department of Health and Mental Hygiene at 410-767-5220.			

Part Two: Proposed/In Progress State Efforts to Insure Coverage for Services for ASD (cont'd)

Compiled by Anne Taylor, NECTAC February 2009				
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	Exemptions				Financial eligibility will be based upon the child's income and resources. The Department of Human Resources will			
7	7				determine financial eligibility.			
8	Prohibitions			Cannot deny or refuse to issue coverage, refuse to contract or renew/reissue, terminate or restrict coverage based upon PDD diagnisis.				
ę	Implementation Issues or Pitfalls				Significant administrative requirements at the local and State level as well as for the family.			