

House File 2346 - Introduced

HOUSE FILE 2346

BY HEATON

A BILL FOR

1 An Act requiring certain health insurance policies, contracts,
2 or plans to provide coverage for the diagnosis and treatment
3 of autism spectrum disorders, and providing an applicability
4 date.

5 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. NEW SECTION. 514C.26 Autism spectrum disorders
2 coverage.

3 1. As used in this section, unless the context otherwise
4 requires:

5 a. "*Applied behavior analysis*" means the design,
6 implementation, and evaluation of environmental modifications,
7 using behavioral stimuli and consequences, to produce socially
8 significant improvement in human behavior, including the use of
9 direct observation, measurement, and functional analysis of the
10 relationships between environment and behavior.

11 b. "*Autism service provider*" means any of the following:

12 (1) Any person, entity, or group that provides diagnostic
13 or treatment services for autism spectrum disorders who is
14 licensed or certified by the state of Iowa.

15 (2) Any person who is certified as a behavior analyst.

16 (3) Any person, if not licensed or certified, who is
17 supervised by a person who is certified as a behavior analyst,
18 whether such certified behavior analyst supervises as an
19 individual or as an employee of or in association with an
20 entity or group. However, an "*autism service provider*" does
21 not include parents and siblings of autistic persons to the
22 extent that such parents or siblings are providing diagnostic
23 or treatment services to their child or sibling.

24 c. "*Autism spectrum disorder*" means a neurobiological
25 disorder or an illness of the nervous system, which includes
26 autistic disorder, Asperger's disorder, pervasive developmental
27 disorder not otherwise specified, Rett's disorder, and
28 childhood disintegrative disorder. The commissioner, by rule,
29 shall define "*autism spectrum disorder*" consistent with the
30 most recent edition of the American psychiatric association's
31 diagnostic and statistical manual of mental disorders, as such
32 definitions may be amended from time to time. The commissioner
33 may adopt the definitions provided in such manual by reference.

34 d. "*Carrier*" means the same as in 513B.2.

35 e. "*Diagnosis of autism spectrum disorder*" means medically

1 necessary assessments, evaluations, or tests in order to
2 diagnose whether an individual has an autism spectrum disorder.

3 *f. "Habilitative or rehabilitative care"* means professional,
4 counseling, or guidance services and treatment programs,
5 including applied behavior analysis, that are necessary to
6 develop and restore the functioning of an individual.

7 *g. "Health insurance coverage"* means the same as in 513B.2.

8 *h. "Pharmacy care"* means medications or nutritional
9 supplements used to address symptoms of an autism spectrum
10 disorder prescribed by a licensed physician, and any
11 health-related services deemed medically necessary to determine
12 the need for or effectiveness of the medications or nutritional
13 supplements prescribed.

14 *i. "Psychiatric care"* means direct or consultative services
15 provided by a psychiatrist licensed in the state in which the
16 psychiatrist practices.

17 *j. "Psychological care"* means direct or consultative
18 services provided by a psychologist licensed in the state in
19 which the psychologist practices.

20 *k. "Therapeutic care"* means services provided by a speech
21 therapist, occupational therapist, or physical therapist
22 licensed in the state in which the therapist practices.

23 *l. "Treatment for autism spectrum disorder"* means care
24 prescribed or ordered for an individual diagnosed with an
25 autism spectrum disorder by a licensed physician or licensed
26 psychologist, including but not limited to equipment necessary
27 for such care, pursuant to the powers granted under such
28 licensed physician's or licensed psychologist's license,
29 including but not limited to the following:

30 (1) Psychiatric care.

31 (2) Psychological care.

32 (3) Habilitative or rehabilitative care, including applied
33 behavior analysis therapy.

34 (4) Therapeutic care.

35 (5) Pharmacy care.

1 2. Notwithstanding the uniformity of treatment requirements
2 of section 514C.6, an individual or group policy, contract, or
3 plan providing for third-party payment or prepayment of health,
4 medical, and surgical coverage benefits shall provide benefits
5 for the diagnosis and treatment of autism spectrum disorders.

6 3. A carrier shall not deny or refuse to issue coverage,
7 refuse to contract with, refuse to renew, refuse to reissue,
8 or otherwise terminate or restrict coverage on an insured
9 solely because the insured is diagnosed with an autism spectrum
10 disorder or because the insured receives coverage under this
11 section.

12 4. *a.* Coverage required under this section is limited
13 to diagnosis and treatment that is ordered by the insured's
14 treating physician or psychologist, pursuant to the powers
15 granted under such physician's or psychologist's license, in
16 accordance with a treatment plan. Service exclusions contained
17 in the health insurance coverage that are inconsistent with
18 the treatment plan shall be considered invalid as to autism
19 spectrum disorders.

20 *b.* The treatment plan, upon request of the carrier, shall
21 include all elements necessary for the carrier to review the
22 treatment plan.

23 *c.* Except for inpatient services, if an insured is receiving
24 treatment for an autism spectrum disorder, the carrier shall
25 have the right to review the treatment plan not more than once
26 every six months unless the carrier and the insured's treating
27 physician or psychologist agree that a more frequent review is
28 necessary. The cost of obtaining any review shall be borne by
29 the carrier.

30 5. Coverage required under this section for applied
31 behavior analysis shall be subject to a maximum benefit
32 of seventy-two thousand dollars per calendar year and such
33 coverage shall only be afforded to insureds under the age of
34 twenty-one. Any coverage required under this section, other
35 than the coverage for applied behavior analysis, shall not be

1 subject to this age limitation.

2 6. Subject to the provisions of subsection 4, paragraph "c",
3 coverage provided under this section shall not be subject to
4 any limits on the number of visits an insured may make to an
5 autism service provider.

6 7. This section shall not be construed as limiting benefits
7 which are otherwise available to an insured under a health
8 benefit policy, contract, or plan. Subject to the provisions
9 of subsection 5, the coverage required by this section shall
10 not be subject to any greater deductible, coinsurance,
11 copayment, or utilization review of health care services,
12 including review of medical necessity, than other coverage for
13 physical health care services provided by a health benefit
14 policy, contract, or plan. Coverage for treatment under this
15 section shall not be denied on the basis that it is educational
16 or habilitative in nature.

17 8. To the extent that any payments or reimbursements are
18 being made for applied behavior analysis, such payments or
19 reimbursements shall be made to any of the following:

20 a. An autism service provider.

21 b. The person who is supervising an autism service provider,
22 who is also certified as a behavior analyst.

23 c. The entity or group for whom such supervising person, who
24 is certified as a behavior analyst, works or is associated.

25 9. If a request for qualifications is made of a person who
26 is not an autism service provider, such person shall provide
27 documented evidence of the education and professional training,
28 if any, of such person.

29 10. The commissioner of insurance, in consultation with
30 the board of medicine, shall adopt rules providing for the
31 certification of autism service providers and behavior
32 analysts.

33 11. A carrier shall not be required to provide reimbursement
34 to a school district for treatment for autism spectrum
35 disorders provided by the school district. This section

1 shall not be construed as affecting any obligation to
2 provide services to an individual under an individualized
3 family service plan, an individualized education plan, or an
4 individualized service plan.

5 12. The provisions of this section shall not automatically
6 apply to individually underwritten health insurance coverage
7 but shall be offered as an option to any such policy, contract,
8 or plan.

9 13. This section shall not apply to accident-only,
10 specified disease, short-term hospital or medical, hospital
11 confinement indemnity, credit, dental, vision, Medicare
12 supplement, long-term care, basic hospital and medical-surgical
13 expense coverage as defined by the commissioner, disability
14 income insurance coverage, coverage issued as a supplement
15 to liability insurance, workers' compensation or similar
16 insurance, automobile medical payment insurance, or individual
17 accident and sickness policies issued to individuals or to
18 individual members of a member association.

19 14. This section applies to third-party payment provider
20 policies, contracts, or plans, and to plans established
21 pursuant to chapter 509A that are delivered, issued for
22 delivery, continued, or renewed in this state on or after
23 January 1, 2011.

24 EXPLANATION

25 This bill creates new Code section 514C.26 which requires
26 certain health insurance policies, contracts, and plans to
27 provide coverage benefits for the diagnosis and treatment
28 of autism spectrum disorders. "Autism spectrum disorder"
29 means a neurobiological disorder or an illness of the nervous
30 system which includes autistic disorder, Asperger's disorder,
31 pervasive developmental disorder not otherwise specified,
32 Rett's disorder, and childhood disintegrative disorder, as
33 defined by the commissioner of insurance by rules consistent
34 with definitions provided in the most recent edition of the
35 American psychiatric association's diagnostic and statistical

1 manual of mental disorders.

2 Coverage required under the bill is limited to diagnosis and
3 treatment that is ordered by an insured's treating licensed
4 physician or psychologist in accordance with a treatment plan.
5 Exclusion of services in health insurance coverage that are
6 inconsistent with the treatment plan are invalid as to autism
7 spectrum disorders. The carrier is entitled to review the
8 treatment plan, but except for inpatient services, not more
9 than once every six months. Coverage required for applied
10 behavior analysis is subject to a maximum annual benefit of
11 \$72,000 and is required only for individuals under the age of
12 21.

13 The bill shall not be construed to limit benefits which
14 are otherwise available to an insured under a health benefit
15 policy, contract, or plan and such benefits shall not be
16 subject to any greater deductible, coinsurance, copayment, or
17 utilization review than other coverage for physical health care
18 services.

19 Payments or reimbursements made for applied behavior
20 analysis must be made to an autism service provider, a person
21 who is supervising an autism service provider who is also
22 certified as a behavior analyst, or the entity or group for
23 whom the supervising person works or is associated.

24 The commissioner of insurance, in consultation with the
25 board of medicine, is required to adopt rules providing for
26 the certification of autism service providers and behavior
27 analysts.

28 A carrier is not required to provide reimbursement to a
29 school district for treatment for autism spectrum disorders
30 provided by the school district. Coverage required by the bill
31 is not required to be automatically applied to individually
32 underwritten health insurance coverage but shall instead be
33 offered as an option. The provisions of the bill do not apply
34 to specified limited-purpose insurance.

35 The new Code section applies to individual and group

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1 third-party payment provider policies, contracts, or plans, and
2 to plans that are established pursuant to chapter 509A, that
3 are delivered, issued for delivery, continued, or renewed in
4 this state on or after January 1, 2011.