

Senate File 64 - Introduced

SENATE FILE 64

BY BEALL

A BILL FOR

1 An Act requiring certain group health insurance policies,
2 contracts, or plans to provide coverage for autism spectrum
3 disorders for certain persons, requiring certification of
4 behavior specialists, providing for a repeal, and including
5 applicability and effective date provisions.
6 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. NEW SECTION. 514C.29 Autism spectrum disorders
2 coverage.

3 1. Notwithstanding the uniformity of treatment requirements
4 of section 514C.6, a group policy, contract, or plan providing
5 for third-party payment or prepayment of health, medical, and
6 surgical coverage benefits shall provide coverage benefits
7 to covered individuals under twenty-one years of age for the
8 diagnostic assessment of autism spectrum disorders and for the
9 treatment of autism spectrum disorders if the policy, contract,
10 or plan is either of the following:

11 a. A policy, contract, or plan issued by a carrier, as
12 defined in section 513B.2, or an organized delivery system
13 authorized under 1993 Iowa Acts, chapter 158, to an employer
14 who on at least fifty percent of the employer's working days
15 during the preceding calendar year employed more than fifty
16 full-time equivalent employees. In determining the number
17 of full-time equivalent employees of an employer, employers
18 who are affiliated or who are able to file a consolidated tax
19 return for purposes of state taxation shall be considered one
20 employer.

21 b. A plan established pursuant to chapter 509A for public
22 employees.

23 2. As used in this section, unless the context otherwise
24 requires:

25 a. "Applied behavioral analysis" means the design,
26 implementation, and evaluation of environmental modifications,
27 using behavioral stimuli and consequences, to produce socially
28 significant improvement in human behavior or to prevent loss
29 of attained skill or function, including the use of direct
30 observation, measurement, and functional analysis of the
31 relations between environment and behavior.

32 b. "Autism service provider" means a person, entity,
33 or group providing treatment of autism spectrum disorders,
34 pursuant to a treatment plan.

35 c. "Autism spectrum disorders" means any of the pervasive

1 developmental disorders including autistic disorder, Asperger's
2 disorder, and pervasive developmental disorders not otherwise
3 specified. The commissioner, by rule, shall define "*autism*
4 *spectrum disorders*" consistent with definitions provided in the
5 most recent edition of the American psychiatric association's
6 diagnostic and statistical manual of mental disorders, as such
7 definitions may be amended from time to time. The commissioner
8 may adopt the definitions provided in such manual by reference.

9 *d. "Behavior specialist"* means an individual, certified
10 by the commissioner, who designs, implements, or evaluates a
11 behavior modification intervention component of a treatment
12 plan, including those based on applied behavioral analysis, to
13 produce socially significant improvements in human behavior or
14 to prevent loss of attained skill or function, through skill
15 acquisition and the reduction of problematic behavior.

16 *e. "Diagnostic assessment of autism spectrum disorders"* means
17 medically necessary assessment, evaluations, or tests performed
18 by a licensed physician, licensed physician assistant, licensed
19 psychologist, or licensed registered nurse practitioner to
20 diagnose whether an individual has an autism spectrum disorder.

21 *f. "Pharmacy care"* means medications prescribed by a
22 licensed physician, licensed physician assistant, or licensed
23 registered nurse practitioner and any assessment, evaluation,
24 or test prescribed or ordered by a licensed physician, licensed
25 physician assistant, or licensed registered nurse practitioner
26 to determine the need for or effectiveness of such medications.

27 *g. "Psychiatric care"* means direct or consultative services
28 provided by a licensed physician who specializes in psychiatry.

29 *h. "Psychological care"* means direct or consultative
30 services provided by a licensed psychologist.

31 *i. "Rehabilitative care"* means professional services and
32 treatment programs, including applied behavioral analysis,
33 provided by an autism service provider to produce socially
34 significant improvement in human behavior or to prevent loss
35 of attained skill or function.

1 *j.* "Therapeutic care" means services provided by a licensed
2 speech pathologist, licensed occupational therapist, or
3 licensed physical therapist.

4 *k.* "Treatment of autism spectrum disorders" means treatment
5 that is identified in a treatment plan and includes medically
6 necessary pharmacy care, psychiatric care, psychological care,
7 rehabilitative care, and therapeutic care that is one of the
8 following:

9 (1) Prescribed, ordered, or provided by a licensed
10 physician, licensed physician assistant, licensed psychologist,
11 licensed social worker, or licensed registered nurse
12 practitioner.

13 (2) Provided by an autism service provider.

14 (3) Provided by a person, entity, or group that works under
15 the direction of an autism service provider.

16 1. "Treatment plan" means a plan for the treatment of
17 autism spectrum disorders developed by a licensed physician or
18 licensed psychologist pursuant to a comprehensive evaluation
19 or reevaluation performed in a manner consistent with the most
20 recent clinical report or recommendations of the American
21 academy of pediatrics, as determined by the commissioner by
22 rule.

23 3. Coverage is required pursuant to this section in a
24 maximum benefit amount of not less than thirty-six thousand
25 dollars per year but shall not be subject to any limits on the
26 number of visits to an autism service provider for treatment of
27 autism spectrum disorders. Beginning in 2015, the commissioner
28 shall, on or before April 1 of each calendar year, publish
29 an adjustment to the maximum benefit required equal to the
30 percentage change in the United States department of labor
31 consumer price index for all urban consumers in the preceding
32 year, and the published adjusted maximum benefit shall be
33 applicable to group policies, contracts, or plans subject to
34 this section that are issued or renewed on or after January 1
35 of the following calendar year. Payments made under a group

1 policy, contract, or plan subject to this section on behalf
2 of a covered individual for treatment of a health condition
3 unrelated to or distinguishable from the individual's autism
4 spectrum disorder shall not be applied toward any maximum
5 benefit established under this subsection.

6 4. Coverage required pursuant to this section shall be
7 subject to copayment, deductible, and coinsurance provisions,
8 and any other general exclusions or limitations of a group
9 policy, contract, or plan to the same extent as other medical
10 or surgical services covered by the group policy, contract, or
11 plan.

12 5. Coverage required by this section shall be provided
13 in coordination with coverage required for the treatment of
14 autistic disorders pursuant to section 514C.22.

15 6. This section shall not be construed to limit benefits
16 which are otherwise available to an individual under a group
17 policy, contract, or plan.

18 7. This section shall not be construed to require coverage
19 by a group policy, contract, or plan of any service solely
20 based on inclusion of the service in an individualized
21 education program. Consistent with federal or state law and
22 upon consent of the parent or guardian of a covered individual,
23 the treatment of autism spectrum disorders may be coordinated
24 with any services included in an individualized education
25 program. However, coverage for the treatment of autism
26 spectrum disorders shall not be contingent upon coordination of
27 services with an individualized education program.

28 8. This section shall not apply to accident-only,
29 specified disease, short-term hospital or medical, hospital
30 confinement indemnity, credit, dental, vision, Medicare
31 supplement, long-term care, basic hospital and medical-surgical
32 expense coverage as defined by the commissioner, disability
33 income insurance coverage, coverage issued as a supplement
34 to liability insurance, workers' compensation or similar
35 insurance, or automobile medical payment insurance, or

1 individual accident and sickness policies issued to individuals
2 or to individual members of a member association.

3 9. A carrier, organized delivery system, or plan
4 established pursuant to chapter 509A may manage the benefits
5 provided through common methods including but not limited to
6 providing payment of benefits or providing care and treatment
7 under a capitated payment system, prospective reimbursement
8 rate system, utilization control system, incentive system
9 for the use of least restrictive and costly levels of care,
10 a preferred provider contract limiting choice of specific
11 providers, or any other system, method, or organization
12 designed to assure services are medically necessary and
13 clinically appropriate.

14 10. An insurer may review a treatment plan for treatment
15 of autism spectrum disorders once every six months, subject to
16 its utilization review requirements, including case management,
17 concurrent review, and other managed care provisions. A more
18 or less frequent review may be agreed upon by the insured and
19 the licensed physician or licensed psychologist developing the
20 treatment plan.

21 11. For the purposes of this section, the results of a
22 diagnostic assessment of autism spectrum disorder shall be
23 valid for a period of not less than twelve months, unless a
24 licensed physician or licensed psychologist determines that a
25 more frequent assessment is necessary.

26 12. The commissioner, in consultation with the board of
27 medicine, shall adopt rules providing for the certification of
28 behavior specialists.

29 a. An applicant for a certificate as a behavior specialist
30 shall submit a written application on forms provided by the
31 commissioner evidencing and insuring that the applicant meets
32 all of the following requirements:

33 (1) Is of good moral character.

34 (2) Has received a master's or higher degree from a
35 board-approved, accredited college or university, including

1 a major course of study in school, clinical, or counseling
2 psychology, special education, social work, speech therapy,
3 occupational therapy, or another related field.

4 (3) Has at least one year of experience involving
5 functional behavior assessments, including the development and
6 implementation of behavioral supports or treatment plans.

7 (4) Has completed at least one thousand hours in direct
8 clinical experience with individuals with behavioral challenges
9 or at least one thousand hours of experience in a related field
10 with individuals with autism spectrum disorders.

11 (5) Has completed relevant training programs, including
12 professional ethics, autism-specific training, assessments
13 training, instructional strategies and best practices,
14 crisis intervention, comorbidity and medications, family
15 collaboration, and addressing specific skill deficits training.

16 *b.* The commissioner shall not issue a certificate to an
17 applicant who has been convicted of a felony, of a controlled
18 substance-related offense under chapter 124 or of the laws of
19 another jurisdiction unless all of the following requirements
20 have been met:

21 (1) At least ten years have elapsed from the date of
22 conviction of such an offense.

23 (2) The applicant satisfactorily demonstrates to the
24 commissioner that the applicant has made significant progress
25 in personal rehabilitation since the conviction such that
26 certification of the applicant would not be expected to create
27 a substantial risk of harm to the health and safety of patients
28 or the public, or a substantial risk of further criminal
29 violations.

30 (3) The applicant otherwise satisfies the requirements of
31 this subsection.

32 13. The commissioner shall adopt rules pursuant to chapter
33 17A to implement and administer this section.

34 14. This section applies to third-party payment provider
35 policies, contracts, or plans, and to plans established

1 pursuant to chapter 509A that are delivered, issued for
2 delivery, continued, or renewed in this state on or after
3 January 1, 2012.

4 Sec. 2. REPEAL. Section 514C.28, Code 2011, is repealed.

5 Sec. 3. EFFECTIVE DATE. The following provision of this Act
6 takes effect January 1, 2012:

7 1. The section of this Act repealing section 514C.28.

8

EXPLANATION

9 This bill creates new Code section 514C.24 which requires
10 certain group health insurance policies, contracts, or plans to
11 provide coverage benefits for the diagnosis and treatment of
12 autism spectrum disorders. The new provision is applicable to
13 group health policies, contracts, or plans issued to employers
14 with more than 50 employees and to health plans established
15 under Code chapter 509A for public employees. Coverage
16 benefits are required for covered individuals under 21 years
17 of age.

18 "Autism spectrum disorders" includes autistic disorder,
19 Asperger's disorder, and pervasive developmental disorders
20 not otherwise specified, as defined by the commissioner of
21 insurance by rule consistent with definitions provided in the
22 most recent edition of the American psychiatric association's
23 diagnostic and statistical manual of mental disorders.

24 Required coverage for the diagnosis and treatment of autism
25 spectrum disorders must be not less than \$36,000 per year and
26 without limits on the number of visits to an autism service
27 provider. Beginning in 2015, the commissioner is required to
28 make annual adjustments to the maximum benefit required equal
29 to the change in the United States department of labor consumer
30 price index. Payments made on behalf of a covered individual
31 that are unrelated to or distinguishable from the individual's
32 autism spectrum disorder cannot be applied toward this maximum
33 benefit.

34 Coverage of autism spectrum disorders under the new Code
35 section is to be provided in coordination with coverage

1 required for the treatment of autistic disorders pursuant to
2 Code section 514C.22. The Code section shall not be construed
3 to limit benefits otherwise available to an individual under a
4 group health policy, contract, or plan.

5 The commissioner, in consultation with the board of
6 medicine, is required to adopt rules for the certification
7 of behavior specialists who design, implement, or evaluate
8 behavior modification intervention components of treatment
9 plans for autism spectrum disorders that are developed by a
10 licensed physician or licensed psychologist.

11 The new Code section applies to third-party payment provider
12 policies, contracts, or plans, and to plans established
13 pursuant to Code chapter 509A that are delivered, issued for
14 delivery, continued, or renewed in this state on or after
15 January 1, 2012.

16 Code section 514C.28, which currently mandates coverage
17 for autism spectrum disorders only in group plans established
18 pursuant to Code chapter 509A for state employees, is repealed
19 effective January 1, 2012.