

HOUSE BILL NO. 1753

94TH GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVES LAMPE (Sponsor), LOW (39), WILDBERGER,
SCHIEFFER AND OXFORD (Co-sponsors).

Read 1st time January 22, 2008 and copies ordered printed.

D. ADAM CRUMBLISS, Chief Clerk

3884L.01I

AN ACT

To amend chapter 376, RSMo, by adding thereto one new section relating to health insurance coverage for autism spectrum disorder.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Chapter 376, RSMo, is amended by adding thereto one new section, to be
2 known as section 376.1221, to read as follows:

376.1221. 1. Each health carrier or health benefit plan that offers or issues health
2 benefit plans which are delivered, issued for delivery, continued, or renewed in this state
3 on or after January 1, 2009, shall include coverage for their members for the treatment of
4 autism spectrum disorder.

5 2. (1) Coverage under this section is limited to treatment that is prescribed by the
6 insured's treating physician in accordance with a treatment plan. With regards to a health
7 benefit plan, an insurer shall not deny or refuse to issue coverage on, refuse to contract
8 with, or refuse to renew or refuse to reissue or otherwise terminate or restrict coverage on
9 an individual solely because the individual is diagnosed with autism spectrum disorder.

10 (2) The coverage required under subdivision (1) of this subsection shall not be
11 subject to dollar limits, deductibles, or coinsurance provisions that are less favorable to an
12 insured than the dollar limits, deductibles, or coinsurance provisions that apply to physical
13 illness generally under the health benefit plan, except as otherwise provided for in
14 subdivision (4) of this subsection. However, the coverage required under subdivision (1)
15 of this subsection may be subject to other general exclusions and limitations of the health
16 benefit plan, including but not limited to coordination of benefits, participating provider

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

17 requirements, restrictions on services provided by family or household members,
18 utilization review of health care services including review of medical necessity, case
19 management, and other managed care provisions.

20 (3) The treatment plan required under subdivision (1) of this subsection shall
21 include all elements necessary for the health benefit plan to appropriately pay claims.
22 Such elements include but are not limited to a diagnosis, proposed treatment by type,
23 frequency, and duration of treatment, the anticipated outcomes stated as goals, the
24 frequency by which the treatment plan will be updated, and the treating physician's
25 signature. The health benefit plan may only request an updated treatment plan once every
26 six months from the treating physician to review medical necessity, unless the health
27 benefit plan and the treating physician agree that a more frequent review is necessary due
28 to emerging clinical circumstances.

29 (4) To be eligible for benefits and coverage under this section, an individual shall
30 be diagnosed with autism spectrum disorder at age eight or younger. The benefits and
31 coverage provided under this section shall be provided to any eligible person less than
32 sixteen years of age. Coverage for behavioral therapy is subject to a fifty thousand dollar
33 maximum benefit per year. Beginning one year after the effective date of this section, such
34 maximum benefit shall be adjusted annually on January first of each calendar year to
35 reflect any change from the previous year in the current Consumer Price Index for All
36 Urban Consumers, as published by the United States Department of Labor's Bureau of
37 Labor Statistics.

38 2. For the purposes of this section, the following terms shall mean:

39 (1) "Autism spectrum disorder", one of the following disorders as defined in the
40 most recent edition of the Diagnostic and Statistical Manual of Mental Disorders of the
41 American Psychiatric Association:

42 (a) Autistic disorder;

43 (b) Asperger's syndrome;

44 (c) Pervasive developmental disorder - not otherwise specified;

45 (2) "Health benefit plan", the same meaning as such term is defined in section
46 376.1350;

47 (3) "Health carrier", the same meaning as such term is defined in section 376.1350.

48 3. The provisions of this section shall not apply to a supplemental insurance policy,
49 including a life care contract, accident-only policy, specified disease policy, hospital policy
50 providing a fixed daily benefit only, Medicare supplement policy, long-term care policy,
51 short-term major medical policy of six months or less duration, or any other supplemental
52 policy.

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