HCS SS SCS SB 167 -- INSURANCE COVERAGE FOR AUTISM SPECTRUM DISORDERS

SPONSOR: Rupp (Scharnhorst)

COMMITTEE ACTION: Voted "do pass" by the Committee on Health Care Policy by a vote of 7 to 1.

Beginning January 1, 2010, this substitute requires health carriers issuing or renewing a health plan to provide individuals younger than 18 years of age insurance coverage for the diagnosis and treatment of autism spectrum disorders (ASD). Carriers cannot deny or refuse to issue insurance coverage on; refuse to contract with; or refuse to renew or reissue, terminate, or restrict coverage on an individual or his or her dependent solely because of being diagnosed with ASD. The coverage provided by an insurance carrier for ASD is limited to the treatment ordered by the insured individual's licensed treating physician or psychologist in accordance with a treatment plan. Except for inpatient services, the health benefit plan or carrier can request a review of the treatment not more than once every six months at its expense unless the individual's treating physician or psychologist agrees that a more frequent review is necessary.

Individual coverage for the applied behavior analysis will have a maximum benefit of \$36,000 per year for individuals younger than 15 years of age, and there is no maximum benefit limit for individuals 15 years of age and older with no limit on the number of times an individual visits an autism service provider. After December 31, 2010, and annually thereafter, the Director of the Department of Insurance, Financial Institutions and Professional Registration must adjust the maximum benefit for applied behavioral analysis for inflation using the Medical Care Component of the United States Department of Labor Consumer Price Index for All Urban Consumers.

Payments made by a health carrier for health services unrelated to ASD for an individual with ASD cannot be applied toward the ASD maximum benefit. ASD services cannot be subject to any greater deductible, co-insurance, or co-payment than other physical health care services provided by the health benefit plan. Payments and reimbursements for applied behavior analysis services provided by a person performing diagnostic or treatment services for ASD, known as a direct implementer, must be made to a person who supervises the direct implementer and is certified by the Behavior Analyst Certification Board within the National Commission for Certifying Agencies or an entity or group for whom the supervising person works or is associated.

Health care plans delivered, issued, continued, or renewed on or

after January 1, 2010, to employees and their dependents under the Missouri Consolidated Health Care Plan, self-insured governmental plans, self-insured group arrangements, plans provided through a multiple employer welfare arrangement if permitted by the federal Employee Retirement Income Security Act of 1974, and self-insured school district health plans are subject to ASD coverage requirements. Individually sold health benefit plans and certain other supplemental insurance policies are not subject to ASD coverage requirements.

The substitute requires the department director to grant a waiver from the mandated coverage for the diagnosis and treatment of ASD if a group contract holder demonstrates to the department director by actual experience over any consecutive 24-month period that compliance with the provisions of the substitute has increased the cost of the health insurance policy by an amount that results in a 5% increase, over the period of a calendar year, in the premium costs to the group contract holder.

FISCAL NOTE: Estimated Cost on General Revenue Fund of Unknown could exceed \$1,965,780 in FY 2010, Unknown could exceed \$3,931,560 in FY 2011, and Unknown could exceed \$3,931,560 in FY 2012. Estimated Cost on Other State Funds of Could exceed \$452,080 in FY 2010, Could exceed \$904,160 in FY 2011, and Could exceed \$904,160 in FY 2012.

PROPONENTS: Supporters say that the insurance mandate will only result in a nominal increase in cost and will be less than not covering a child with autism. Autism is a neurobiological disorder that responds well to treatment.

Testifying for the bill were Senator Rupp; Molly Schad; and Judevine Center for Autism.

OPPONENTS: Those who oppose the bill say that health insurance costs will increase; only a small percentage of children will actually be covered; and applied behavior analysis is considered an educational intervention and, therefore, is not covered by insurance policies.

Testifying against the bill were United Health Care; America's Health Insurance Plans; Coventry Health Care; Anthem Blue Cross and Blue Shield; Blue Cross Blue Shield of Kansas City; and Missouri Insurance Coalition.