

SECOND REGULAR SESSION

SENATE BILL NO. 618

95TH GENERAL ASSEMBLY

INTRODUCED BY SENATORS RUPP AND SCHMITT.

Pre-filed December 1, 2009, and ordered printed.

TERRY L. SPIELER, Secretary.

3534S.021

AN ACT

To amend chapter 376, RSMo, by adding thereto one new section relating to insurance coverage for diagnosis and treatment of autism spectrum disorders.

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
2 section, to be known as section 376.1224, to read as follows:

**376.1224. 1. For purposes of this section, the following terms
2 shall mean:**

3 **(1) "Applied behavior analysis", the design, implementation, and**
4 **evaluation of environmental modifications, using behavioral stimuli**
5 **and consequences, to produce socially significant improvement in**
6 **human behavior, including the use of direct observation, measurement,**
7 **and functional analysis of the relationships between environment and**
8 **behavior;**

9 **(2) "Autism service provider":**

10 **(a) Any person, entity, or group that provides diagnostic or**
11 **treatment services for autism spectrum disorders who is licensed or**
12 **certified by the state of Missouri;**

13 **(b) Any person who is certified as a board certified behavior**
14 **analyst by the behavior analyst certification board; or**

15 **(c) Any person, if not licensed or certified, who is supervised by**
16 **a person who is certified as a board certified behavioral analyst by the**
17 **Behavioral Analyst Certification Board, whether such board certified**
18 **behavioral analyst supervises as an individual or as an employee of or**
19 **in association with an entity or group; provided however, the definition**
20 **of autism service provider shall specifically exclude parents and**

21 siblings of autistic persons to the extent such parents or siblings are
22 providing diagnostic or treatment services to their child or sibling;

23 (3) "Autism spectrum disorders", a neurobiological disorder, an
24 illness of the nervous system, which includes Autistic Disorder,
25 Asperger's Disorder, Pervasive Developmental Disorder Not Otherwise
26 Specified, Rett's Disorder, and Childhood Disintegrative Disorder, as
27 defined in the most recent edition of the Diagnostic and Statistical
28 Manual of Mental Disorders of the American Psychiatric Association;

29 (4) "Diagnosis of autism spectrum disorders", medically necessary
30 assessments, evaluations, or tests in order to diagnose whether an
31 individual has an autism spectrum disorder;

32 (5) "Habilitative or rehabilitative care", professional, counseling,
33 and guidance services and treatment programs, including applied
34 behavior analysis, that are necessary to develop and restore the
35 functioning of an individual;

36 (6) "Health benefit plan", shall have the same meaning ascribed
37 to it as in section 376.1350;

38 (7) "Health carrier", shall have the same meaning ascribed to it
39 as in section 376.1350;

40 (8) "Pharmacy care", medications or nutritional supplements used
41 to address symptoms of an autism spectrum disorder prescribed by a
42 licensed physician, and any health-related services deemed medically
43 necessary to determine the need or effectiveness of the medications or
44 nutritional supplements;

45 (9) "Psychiatric care", direct or consultative services provided by
46 a psychiatrist licensed in the state in which the psychiatrist practices;

47 (10) "Psychological care", direct or consultative services
48 provided by a psychologist licensed in the state in which the
49 psychologist practices;

50 (11) "Therapeutic care", services provided by licensed speech
51 therapists, occupational therapists, or physical therapists;

52 (12) "Treatment for autism spectrum disorders", care prescribed
53 or ordered for an individual diagnosed with an autism spectrum
54 disorder by a licensed physician or licensed psychologist, including,
55 without limitation, equipment necessary for such care, pursuant to the
56 powers granted under such licensed physician's or licensed
57 psychologist's license, including, but not limited to:

- 58 **(a) Psychiatric care;**
59 **(b) Psychological care;**
60 **(c) Habilitative or rehabilitative care, including applied behavior**
61 **analysis therapy;**
62 **(d) Therapeutic care;**
63 **(e) Pharmacy care.**

64 **2. All health benefit plans that are delivered, issued for delivery,**
65 **continued, or renewed on or after August 28, 2010, if written inside the**
66 **state of Missouri, or written outside the state of Missouri but insuring**
67 **Missouri residents, shall provide individuals coverage for the diagnosis**
68 **and treatment of autism spectrum disorders.**

69 **3. With regards to a health benefit plan, a health carrier shall**
70 **not deny or refuse to issue coverage on, refuse to contract with, or**
71 **refuse to renew or refuse to reissue or otherwise terminate or restrict**
72 **coverage on an individual or their dependent solely because the**
73 **individual is diagnosed with autism spectrum disorder or because the**
74 **individual receives coverage under this section.**

75 **4. (1) Coverage provided under this section is limited to**
76 **treatment that is ordered by the insured's treating licensed physician**
77 **or licensed psychologist, pursuant to the powers granted under such**
78 **licensed physician's or licensed psychologist's license, in accordance**
79 **with a treatment plan. Service exclusions contained in the insurance**
80 **policy or health maintenance organization contract that are**
81 **inconsistent with the treatment plan shall be considered invalid as to**
82 **autism spectrum disorder;**

83 **(2) The treatment plan, upon request by the health benefit plan**
84 **or health carrier, shall include all elements necessary for the health**
85 **benefit plan or health carrier to review the treatment plan;**

86 **(3) Except for inpatient services, if an individual is receiving**
87 **treatment for an autism spectrum disorder, a health carrier shall have**
88 **the right to review the treatment plan not more than once every six**
89 **months unless the health carrier and the individual's treating physician**
90 **or psychologist agree that a more frequent review is necessary. The**
91 **cost of obtaining any review shall be borne by the health benefit plan**
92 **or health carrier, as applicable.**

93 **5. Coverage provided under this section for applied behavior**
94 **analysis shall be subject to a maximum benefit of seventy-two thousand**

95 dollars per calendar year and such coverage shall only be afforded to
96 individuals under the age of twenty-one. Any coverage required under
97 this section, other than the coverage for applied behavior analysis,
98 shall not be subject to the age limitation described in this subsection.

99 6. Subject to the provisions set forth in subdivision (3) of
100 subsection 4 of this section, coverage provided under this section shall
101 not be subject to any limits on the number of visits an individual may
102 make to an autism service provider.

103 7. This section shall not be construed as limiting benefits which
104 are otherwise available to an individual under a health benefit
105 plan. Subject to the provisions of subsection 5 of this section, the
106 coverage required by this section shall not be subject to any greater
107 deductible, coinsurance, co-payment, or utilization review of health
108 care services, including review of medical necessity, than other
109 physical health care services provided by a health benefit
110 plan. Coverage for treatment under this section shall not be denied on
111 the basis that it is educational or habilitative in nature.

112 8. To the extent any payments or reimbursements are being made
113 for applied behavior analysis, such payments or reimbursements shall
114 be made to either:

115 (1) The autism service provider;

116 (2) The person who is supervising an autism service provider,
117 who is also certified as a board certified behavior analyst by the
118 Behavior Analyst Certification Board; or

119 (3) The entity or group for whom such supervising person, who
120 is certified as a board certified behavior analyst by the Behavior
121 Analyst Certification Board, works or is associated.

122 9. If a request for qualifications is made of a person who is not
123 an autism service provider, such person shall provide documented
124 evidence of education and professional training, if any, of such person.

125 10. The provisions of this section shall apply to any health care
126 plans issued to employees and their dependents under the Missouri
127 consolidated health care plan established pursuant to chapter 103, that
128 are delivered, issued for delivery, continued, or renewed in this state
129 on or after August 28, 2010. The terms "employees" and "health care
130 plans" shall have the same meaning ascribed to them in section 103.003.

131 11. The provisions of this section shall also apply to the following

132 types of plans that are established, extended, modified, or renewed on
133 or after August 28, 2010:

134 (1) All self-insured governmental plans, as that term is defined
135 in 29 U.S.C. Section 1002(32);

136 (2) All self-insured group arrangements, to the extent not
137 preempted by federal law;

138 (3) All plans provided through a multiple employer welfare
139 arrangement, or plans provided through another benefit arrangement,
140 to the extent permitted by the Employee Retirement Income Security
141 Act of 1974, or any waiver or exception to that act provided under
142 federal law or regulation; and

143 (4) All self-insured school district health plans.

144 12. The provisions of this section shall not automatically apply
145 to an individually underwritten health benefit plan, but shall be offered
146 as an option to any such plan.

147 13. The provisions of this section shall not apply to a
148 supplemental insurance policy, including a life care contract, accident-
149 only policy, specified disease policy, hospital policy providing a fixed
150 daily benefit only, Medicare supplement policy, long-term care policy,
151 short-term major medical policy of six months or less duration, or any
152 other supplemental policy.

153 14. Any health carrier or other entity subject to the provisions
154 of this section shall not be required to provide reimbursement to a
155 school district for treatment for autism spectrum disorders provided by
156 the school district. This section shall not be construed as affecting any
157 obligation to provide services to an individual under an individualized
158 family service plan, an individualized education plan, or an
159 individualized service plan.

160 15. The provisions of sections 376.383, 376.384, and 376.1350 to
161 376.1399, shall apply to this section.

162 16. The director of the department of insurance, financial
163 institutions and professional registration shall grant a small employer
164 with a group health plan, as that term is defined in section 379.930, a
165 waiver from the provisions of this section if the small employer
166 demonstrates to the director by actual experience over any consecutive
167 twenty-four month period that compliance with this section has
168 increased the cost of the health insurance policy by an amount that

169 results in a five percent increase over the period of a calendar year, in
170 premium costs to the small employer.

171 17. The provisions of this section shall not apply to the Mo
172 HealthNet program as described in section 208.001, nor shall the
173 provisions of this section apply to any program administered or
174 sponsored by the Mo HealthNet division. Nothing in this section shall
175 be construed as providing the coverage described in this section to Mo
176 HealthNet participants.

✓

Unofficial

Bill

Copy