



BILL & AMENDMENT SUMMARY

Autism Services Insurance Coverage HF 215

Status of Bill: House Calendar
Committee: Commerce (Committee vote 21-1)
Lead Democrats: Rep. Hall
Floor Manager: Rep. Best
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Background

There are limited resources for coverage of autisms services provided by the State of Iowa. There is the Autism Support Program. The Autism Support Program provides payments for applied behavioral analysis treatment for autism spectrum disorder for no more than two years for youths under the age of fourteen, has no other coverage options, and has a household income less than 500% of the Federal Poverty Level. The maximum annual benefit is \$36,000. For FY 2017, the Legislature appropriated \$2 million for the Program.

In addition, Medicaid and insurance coverage for state employees cover applied behavioral analysis treatment for autism services.

Summary

House File 215 adds an exemption to those eligible for the Autism Support program to those now receiving private insurance that is outlined below, as part of HF 215.

Starting January 1, 2018 any state regulated insurance plans for large employers, which employs more than 50 employees, and non-state public employee, that begin or are renewed must cover applied behavioral analysis treatment for autism services, with limitations. This does not include individual health insurance plans, or small employer group plans.

Definitions

Applied behavior analysis is defined as the design, implementation, and evaluation of environmental modifications, using behavioral stimuli and consequences, to produce socially significant improvement in human behavior, including the use of direct observation, measurement, and functional analysis of the relationship between environment and behavior. **Applied behavior analysis** does not include supervisory services.

Autism spectrum disorder is defined as a complex neurodevelopmental medical disorder characterized by social impairment, communication difficulties, and restricted, repetitive, and stereotyped patterns of behavior.

Practitioner is defined as any of the following:

- A licensed physician.
- A licensed psychologist.
- A person who holds a master's degree or a doctoral degree and is certified by a national behavior analyst certification board as a behavior analyst.

Treatment plan is defined as a plan for the treatment of an autism spectrum disorder developed by a licensed physician or licensed psychologist after a comprehensive evaluation or reevaluation performed in a manner consistent with the most recent clinical report or recommendations of the American academy of pediatrics, as determined by the commissioner by rule.

Coverage – Limitations

The bill specifies the coverage limitations for different minor age groups to be:

- For an individual through age six, \$36,000 per year.
- For an individual age seven through age thirteen, \$25,000 per year.
- For an individual age fourteen through age eighteen, \$12,500 per year.

Payments made by the insurance company for services other than applied behavioral analysis cannot be applied to the maximum benefit allowed in the bill. The required coverage for applied behavioral analysis may be limited to dollar amounts, deductibles, co-payments, or co-insurance requirements that apply to other medical or surgical services as part of the insurance plan or policy. Coverage of applied behavioral analysis may be limited by applicable managed care requirements including prior authorizations, prior approvals, and a limited number of visits for applied behavioral analysis services. This new coverage requirement does not apply to various specified types of insurance.

Review of Treatment Plan

An insurance provider may request a review of a treatment plan for the covered individual no more than every three months, unless the insurance provider and the patient’s treating physician or psychologists have an agreement that a more frequent review is necessary. The agreement only applies to a specific individual and not to all of the patients the receiving applied behavioral analysis services from the practitioner. The cost of the review must be paid for by the insurance carrier.

Rulemaking Authority

The Insurance Commissioner may adopt administrative rules to administer and implement the new coverage requirements.

Amendments

H-1174 by Best. The amendment makes the following changes:

Definitions

- Strikes part of the definition for **applied behavior analysis**, stating that it does not include supervisory services.
- Expands the definition of **treatment plan** to include supervisory services as approved by the parameters of the insurance plans and managed care requirements.

Treatment Plans

- For reviewing treatment plans, new language is inserted so that during the first year of a treatment plan, the current language applies, and after the first year an insurance provider may request a review of a treatment plan for the covered individual no more than every six months.
- New language is added stating that the insurance carrier is prohibited from changing the treatment plan until the review of the treatment plan is completed.

Coverage Requirements & Rulemaking

- Strikes language that coverage must be provided in coordination with Chapter 514C.22, Biologically Based Mental Illness Coverage.
- Strikes language requiring the Iowa Insurance Commissioner to adopt administrative rules to implement and administer the new coverage requirements.

H-1017 by M. Smith. Expands the definition of **practitioner** to include a person licensed as a master social worker or an independent social worker as defined in Chapter 154C who has appropriate training in providing applied behavior analysis for the treatment of autism spectrum disorder.