A BILL FOR AN ACT

RELATING TO HEALTH INSURANCE.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

- 1 SECTION 1. The purpose of this Act is to ensure the 2 provision of quality health care procedures for all Hawaii 3 residents by requiring coverage of and treatment for autism 4 spectrum disorders. SECTION 2. Chapter 431, Hawaii Revised Statutes, is 5 amended by adding a new section to article 10A to be 6 7 appropriately designated and to read as follows: 8 "\$431:10A- Autism spectrum disorders benefits and 9 coverage; notice; definitions. (a) Any other law to the 10 contrary notwithstanding, each employer group health insurance policy, contract, plan, or agreement issued or renewed in this 11 state after December 31, 2008, shall provide to the policyholder 12 13 and individuals under twenty-one years of age covered under the 14 policy, contract, plan, or agreement, coverage for the diagnosis 15 and treatment of autism spectrum disorders. 16 (b) Every insurer shall provide notice to its 17 policyholders regarding the coverage required by this section.
- 18 The notice shall be in writing and prominently positioned in any
 - The notice shall be in writing and prominently positioned in any HB2727 HD2 HMS 2008-2773

1 literature or correspondence sent to policyholders and shall be 2 transmitted to policyholders when annual information is made available to policyholders, or in any other mailing to 3 4 policyholders. 5 (c) Coverage provided under this section shall be subject 6 to a maximum benefit of \$75,000 per year, but shall not be 7 subject to any limits on the number of visits to an autism 8 service provider. After December 31, 2010, the insurance commissioner, on an annual basis, shall adjust the maximum 9 10 benefit for inflation using the medical care component of the 11 United States Department of Labor consumer price index for all 12 urban consumers. The commissioner shall publish the adjusted 13 maximum benefit annually no later than April 1 of each calendar 14 year, which shall apply during the following calendar year to 15 health insurance policies subject to this section. Payments made by an insurer on behalf of a covered individual for any 16 care, treatment, intervention, service, or item, the provision 17 18 of which was for the treatment of a health condition unrelated 19 to the covered individual's autism spectrum disorder, shall not 20 be applied toward any maximum benefit established under this 21 subsection.

1 (d) Coverage under this section shall be subject to copayment, deductible, and co-insurance provisions of a health 2 3 insurance policy to the extent that other medical services 4 covered by the policy are subject to these provisions. 5 (e) This section shall not be construed as limiting 6 benefits that are otherwise available to an individual under a 7 health insurance policy. 8 (f) As used in this section, unless the context clearly 9 requires otherwise: 10 "Applied behavior analysis" means the design, implementation, and evaluation of environmental modifications, 11 12 using behavioral stimuli and consequences, to produce socially 13 significant improvement in human behavior, including the use of 14 direct observation, measurement, and functional analysis of the 15 relations between environment and behavior. 16 "Autism service provider" means any person, entity, or 17 group that provides treatment of autism spectrum disorders. 18 "Autism spectrum disorders" means any of the pervasive 19 developmental disorders as defined by the most recent edition of 20 the Diagnostic and Statistical Manual of Mental Disorders, 21 including autistic disorder, Asperger's disorder, pervasive

1	developme	ental disorder not otherwise specified, Rett's disorder,							
2	and childhood disintegrative disorder.								
3	"Diagnosis of autism spectrum disorders" means medically								
4	necessary assessments, evaluations, or tests conducted to								
5	diagnose whether an individual has an autism spectrum disorder.								
6	"Health insurance policy" means any group health, sickness								
7	or accident policy or subscriber contract or certificate issued								
8	by an insurance entity subject to this section.								
9	"Medically necessary" means any care, treatment,								
10	intervention, service, or item that is prescribed, provided, or								
11	ordered by a physician, psychologist, or registered nurse								
12	practitioner licensed to practice in this state in accordance								
13	with accepted standards or practice and that is reasonably								
14	expected to accomplish any of the following:								
15	(1)	Prevent the onset of an illness, condition, injury, or							
16		disability;							
17	(2)	Reduce or ameliorate the physical, mental, or							
18		developmental effects of an illness, condition,							
19		injury, or disability; or							
20	(3)	Assist to achieve or maintain maximum functional							
21		capacity in performing daily activities, taking into							
22		account both the functional capacity of the recipient							

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1	and those functional capacities that are appropriate							
2	to recipients of care of the same age.							
3	"Pharmacy care" means medications prescribed by a licensed							
4	physician or registered nurse practitioner and any health-							
5	related services that are deemed medically necessary to							
6	determine the need or effectiveness of the medications.							
7	"Psychiatric care" means direct or consultative services							
8	provided by a licensed psychiatrist.							
9	"Psychological care" means direct or consultative services							
10	provided by a licensed psychologist.							
11	"Rehabilitative and habilitative care" means professional,							
12	counseling, and guidance services and treatment programs,							
13	including applied behavior analysis, which are necessary to							
14	develop, maintain, and restore, to the maximum extent							
15	practicable, the functioning of an individual.							
16	"Therapeutic care" means services provided by licensed							
17	speech pathologists, registered occupational therapists, or							
18	licensed physical therapists.							
19	"Treatment for autism spectrum disorders" includes the							
20	following care prescribed, provided, or ordered for an							
21	individual diagnosed with an autism spectrum disorder by a							
22	licensed physician, psychologist, or registered nurse							
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    practitioner if the care is determined to be medically
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    necessary:
 3
              Psychiatric care;
         (1)
 4
         (2) Psychological care;
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         (3)
              Rehabilitative and habilitative care;
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         (4)
              Therapeutic care; and
 7
         (5)
              Pharmacy care."
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         SECTION 3. Chapter 432, Hawaii Revised Statutes, is
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    amended by adding a new section to article 1 to be appropriately
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    designated and to read as follows:
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         "§432:1- Autism spectrum disorders benefits and
    coverage; notice; definitions. (a) Any other law to the
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    contrary notwithstanding, each individual and group hospital or
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    medical service plan, policy, contract, or agreement issued or
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    renewed in this state after December 31, 2008, shall provide to
    the member and individuals under twenty-one years of age covered
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    under the service plan, policy, contract, or agreement, coverage
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    for the diagnosis and treatment of autism spectrum disorders.
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         (b) Every mutual benefit society shall provide notice to
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    its members regarding the coverage required by this section.
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    The notice shall be in writing and prominently positioned in any
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    literature or correspondence sent to members and shall be
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2 to members, or in any other mailing to members. 3 (c) Coverage provided under this section shall be subject to a maximum benefit of \$75,000 per year, but shall not be 4 5 subject to any limits on the number of visits to an autism 6 service provider. After December 31, 2010, the insurance commissioner, on an annual basis, shall adjust the maximum 7 benefit for inflation using the medical care component of the 8 9 United States Department of Labor consumer price index for all 10 urban consumers. The commissioner shall publish the adjusted 11 maximum benefit annually no later than April 1 of each calendar 12 year, which shall apply during the following calendar year to 13 health insurance policies subject to this section. Payments 14 made by a mutual benefit society on behalf of a covered 15 individual for any care, treatment, intervention, service, or 16 item, the provision of which was for the treatment of a health 17 condition unrelated to the covered individual's autism spectrum

transmitted to members when annual information is made available

(d) Coverage under this section shall be subject to co-payment, deductible, and co-insurance provisions of a health

disorder, shall not be applied toward any maximum benefit

established under this subsection.

- 1 insurance policy to the extent that other medical services
- 2 covered by the policy are subject to these provisions.
- 3 (e) This section shall not be construed as limiting
- 4 benefits that are otherwise available to an individual under a
- 5 health insurance policy.
- 6 (f) As used in this section, unless the context clearly
- 7 requires otherwise:
- 8 "Applied behavior analysis" means the design,
- 9 implementation, and evaluation of environmental modifications,
- 10 using behavioral stimuli and consequences, to produce socially
- 11 significant improvement in human behavior, including the use of
- 12 direct observation, measurement, and functional analysis of the
- 13 relations between environment and behavior.
- 14 "Autism service provider" means any person, entity, or
- 15 group that provides treatment of autism spectrum disorders.
- 16 "Autism spectrum disorders" means any of the pervasive
- 17 developmental disorders as defined by the most recent edition of
- 18 the Diagnostic and Statistical Manual of Mental Disorders,
- 19 including autistic disorder, Asperger's disorder, pervasive
- 20 developmental disorder not otherwise specified, Rett's disorder,
- 21 and childhood disintegrative disorder.

1	"Diagnosis of autism spectrum disorders" means medically								
2	necessary assessments, evaluations, or tests conducted to								
3	diagnose whether an individual has an autism spectrum disorder.								
4	"Health insurance policy" means any group health, sickness,								
5	or accident policy or subscriber contract or certificate issued								
6	by a mutual benefit society subject to this section.								
7	"Medically necessary" means any care, treatment,								
8	intervention, service or item that is prescribed, provided, or								
9	ordered by a physician, psychologist, or registered nurse								
10	practitioner licensed to practice in this state in accordance								
11	with accepted standards or practice and that is reasonably								
12	expected	to accomplish any of the following:							
13	(1)	Prevent the onset of an illness, condition, injury, or							
14		disability;							
15	(2)	Reduce or ameliorate the physical, mental, or							
16		developmental effects of an illness, condition,							
17		injury, or disability; or							
18	(3)	Assist to achieve or maintain maximum functional							
19		capacity in performing daily activities, taking into							
20		account both the functional capacity of the recipient							
21		and those functional capacities that are appropriate							
22		to recipients of care of the same age.							



- 1 "Pharmacy care" means medications prescribed by a licensed physician or registered nurse practitioner and any health-2 3 related services that are deemed medically necessary to 4 determine the need or effectiveness of the medications. 5 "Psychiatric care" means direct or consultative services 6 provided by a licensed psychiatrist. 7 "Psychological care" means direct or consultative services 8 provided by a licensed psychologist. 9 "Rehabilitative care" means professional, counseling, and 10 guidance services and treatment programs, including applied 11 behavior analysis, that are necessary to develop, maintain, and 12 restore, to the maximum extent practicable, the functioning of 13 an individual. 14 "Therapeutic care" means services provided by licensed 15 speech pathologists, registered occupational therapists, or 16 licensed physical therapists. 17 "Treatment for autism spectrum disorders" includes the following care prescribed, provided, or ordered for an 18 19 individual diagnosed with an autism spectrum disorder by a 20 licensed physician, psychologist, or registered nurse practitioner if the care is determined to be medically 21
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necessary:

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H.B. NO. H.D. 2

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         (1) Psychiatric care;
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         (2) Psychological care;
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         (3) Rehabilitative care;
         (4) Therapeutic care; and
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5
              Pharmacy care."
         (5)
         SECTION 4. Section 432D-23, Hawaii Revised Statutes, is
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    amended to read as follows:
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         "$432D-23 Required provisions and benefits.
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    Notwithstanding any provision of law to the contrary, each
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    policy, contract, plan, or agreement issued in the [State] state
    after January 1, 1995, by health maintenance organizations
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    pursuant to this chapter, shall include benefits provided in
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    sections 431:10-212, 431:10A-115, 431:10A-115.5, 431:10A-116,
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    431:10A-116.5, 431:10A-116.6, 431:10A-119, 431:10A-120, [and]
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    431:10A-121, and 431:10A- , and chapter 431M."
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         SECTION 5. The benefit to be provided by health
    maintenance organizations corresponding to the benefit provided
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    under section 431:10A- , Hawaii Revised Statutes, as contained
    in the amendment to section 432D-23, Hawaii Revised Statutes, in
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    section 4 of this Act, shall take effect for all policies,
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    contracts, plans, or agreements issued in the state after
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December 31, 2008.

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H.B. NO. H.D. 2

- 1 SECTION 6. Every insurer and mutual benefit society shall
- 2 provide the information required in section 431:10A- (b) and
- 3 section 432:1- (b) to policyholders and members, respectively,
- 4 no later than December 31, 2008.
- 5 SECTION 7. (a) There is established in the department of
- 6 health for administrative purposes a temporary autism disorders
- 7 spectrum benefits and coverage task force. The children with
- 8 special health needs branch shall be responsible for
- 9 administering the work of the temporary task force, providing a
- 10 facilitator, and submitting a report to the legislature. The
- 11 goals of the temporary task force shall be to discuss and seek
- 12 input on the problems faced by parents of children with autism
- 13 and what can be done to ensure that proper benefits and services
- 14 are provided through public and private resources to address the
- 15 special needs of children with autism, including providing
- 16 services involving applied behavioral analyses techniques.
- 17 (b) The members of the temporary autism disorders spectrum
- 18 benefits and coverage task force shall consist of nine members
- 19 as follows:
- 20 (1) A member of the house of representatives appointed by
- 21 the speaker of the house of representatives;



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H.B. NO. H.D. 2

1	(2)	A me	ember	of	the	senate	appointed	рÀ	the	president	of
2		the	senat	ce;							

- (3) The superintendent of education or the superintendent's designee;
- 5 (4) The director of human services or the director's designee;
- 7 (5) The director of health or the director's designee;
- 10 (7) The chief executive officer of the Hawaii Medical

 11 Service Association or the chief executive officer's

 12 designee; and
- 13 (8) Two parents of children diagnosed with autistic14 spectrum disorder appointed by the governor.
- (c) The temporary autism disorders spectrum benefits and coverage task force shall submit a report of its findings and recommendations, including any proposed legislation, to the legislature no later than twenty days prior to the convening of the regular session of 2009.
- 20 SECTION 8. Statutory material to be repealed is bracketed 21 and stricken. New statutory material is underscored.

- 1 SECTION 9. This Act shall take effect on July 1, 2020;
- 2 provided that section 7 of this bill shall be repealed on June
- 3 30, 2009.

Report Title:

Mandatory Health Coverage; Autism Spectrum Disorders

Description:

Requires all health insurers, mutual benefit societies, and health maintenance organizations to provide mandatory coverage for all policyholders, member, subscribers, and individuals under age 21 for the diagnosis and treatment of autism spectrum disorders. (HB2727 HD2)