

SENATE No.

The Commonwealth of Massachusetts

PRESENTED BY:

Joyce, Brian (SEN)

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the passage of the accompanying bill:

An Act providing health care coverage for autism spectrum disorders.

PETITION OF:

NAME:

Joyce, Brian (SEN)

DISTRICT/ADDRESS:

Norfolk, Bristol and Plymouth

[SIMILAR MATTER FILED IN PREVIOUS SESSION
SEE SENATE, NO. S00595 OF 2007-2008.]

The Commonwealth of Massachusetts

In the Year Two Thousand and Nine

AN ACT PROVIDING HEALTH CARE COVERAGE FOR AUTISM SPECTRUM DISORDERS.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1 SECTION 1. Chapter 32A of the General Laws is hereby amended by inserting after
2 section 17I the following section:-

3 Section 17J. (a) The commission shall provide coverage for Autism Spectrum Disorders to any
4 active or retired employee of the commonwealth who is insured under the group insurance
5 commission under the same terms and conditions that apply to other Autism Spectrum Disorders
6 covered under the policy, except as otherwise provided in this section.

7 (b) In this section, "ASD " shall mean Autism Spectrum Disorders.

8 (c) Such coverage shall not impose any annual or lifetime dollar maximum on coverage for ASD
9 other than an annual or lifetime dollar maximum that applies in the aggregate to all items and
10 services covered under the policy.

11 (d) Such coverage shall not apply amounts paid for ASD to any annual or lifetime dollar
12 maximum applicable to other ASD covered under the policy other than an annual or lifetime
13 dollar maximum that applies in the aggregate to all items and services covered under the policy.

14 (e) Such coverage may include a reasonable coinsurance requirement for ASD, not to exceed 20
15 per cent of the allowable cost of the ASD, unless all covered benefits applying coinsurance under
16 the plan do so at a higher amount. If the policy provides coverage for services from
17 nonparticipating providers, the policy may include a reasonable coinsurance requirement for
18 ASD, not to exceed 40 per cent of the allowable cost of the ASD when obtained from a
19 nonparticipating provider, unless all covered benefits applying coinsurance under the plan do so
20 at a higher amount.

21 (f) Such coverage may require prior authorization as a condition of coverage for ASD.

22 SECTION 2. Chapter 175 of the General Laws is hereby amended by inserting after section 47Z
23 the following section:-

24 Section 47AA. (a) Any blanket or general policy of insurance, except a blanket or general policy
25 of insurance which provides supplemental coverage to Medicare or other governmental
26 programs, described in subdivision (A), (C) or (D) of section 110 which provides hospital
27 expense and surgical expense insurance and which is issued or subsequently renewed by
28 agreement between the insurer and the policy holder, within or without the commonwealth,
29 during the period this section is effective, or any policy of accident or sickness insurance as
30 described in section 108 which provides hospital expense and surgical expense insurance, except
31 a policy which provides supplemental coverage to Medicare or other governmental programs,

32 and which is delivered or issued for delivery or subsequently renewed by agreement between the
33 insurer and the policy holder in the commonwealth, during the period that this section is
34 effective, or any employees' health and welfare fund which provides hospital expense and
35 surgical expense benefits and which is promulgated or renewed to any person or group of
36 persons in the commonwealth, while this section is effective, shall provide coverage for ASD
37 under the same terms and conditions that apply to other ASD covered under the policy, except as
38 otherwise provided in this section.

39 (b) In this section, "ASD" shall mean ASD.

40 (c) No such policy shall impose any annual or lifetime dollar maximum on coverage for ASD
41 other than an annual or lifetime dollar maximum that applies in the aggregate to all items and
42 services covered under the policy.

43 (d) No such policy shall apply amounts paid for ASD to any annual or lifetime dollar maximum
44 applicable to other ASD covered under the policy other than an annual or lifetime dollar
45 maximum that applies in the aggregate to all items and services covered under the policy.

46 (e) Any such policy may include a reasonable coinsurance requirement for, not to exceed 20 per
47 cent of the allowable cost of the ASD, unless all covered benefits applying coinsurance under the
48 plan do so at a higher amount. If such policy provides coverage for services from
49 nonparticipating providers, the contract may include a reasonable coinsurance requirement for
50 ASD, not to exceed 40 per cent of the allowable cost of the ASD when obtained from a
51 nonparticipating provider, unless all covered benefits applying coinsurance under the plan do so
52 at a higher amount.

53 (f) Any such policy may require prior authorization as a condition of coverage for ASD.

54 (g) Any such policy shall only be required to provide coverage for the most appropriately
55 medically necessary model ASD that adequately meets the needs of the policyholder.

56 SECTION 3. Chapter 176A of the General Laws is hereby amended by inserting after section
57 8AA the following section:-

58 Section 8BB. (a) A contract between a subscriber and the corporation under an individual or
59 group hospital service plan which provides hospital expense and surgical expense insurance,
60 except contracts providing supplemental coverage to Medicare or other governmental programs,
61 delivered, issued or renewed by agreement between the insurer and the policyholder, within or
62 without the commonwealth, shall provide benefits to all individual subscribers and members
63 within the commonwealth and to all group members having a principal place of employment
64 within the commonwealth for coverage for ASD. If ASD are covered as a durable medical
65 equipment benefit ASD, coverage shall be provided under the same terms and conditions that
66 apply to other durable medical equipment covered under the contract, except as otherwise
67 provided in this section. If ASD are covered as a stand-alone benefit, coverage shall be
68 consistent with the terms and conditions as described in this section.

69 (b) In this section, "ASD" shall mean ASD.

70 (c) No such contract shall impose any annual or lifetime dollar maximum on coverage for ASD
71 other than an annual or lifetime dollar maximum that applies in the aggregate to all items and
72 services covered under the contract.

73 (d) No such contract shall apply amounts paid for ASD to any annual or lifetime dollar
74 maximum applicable to other durable medical equipment ASD covered under the policy other
75 than an annual or lifetime dollar maximum that applies in the aggregate to all items and services
76 covered under the contract.

77 (e) Any such contract may include a reasonable coinsurance requirement for ASD, not to exceed
78 20 per cent of the allowable cost of the ASD, unless all covered benefits applying coinsurance
79 under the plan do so at a higher amount. If the contract provides coverage for services from
80 nonparticipating providers, the contract may include a reasonable coinsurance requirement for
81 ASD, not to exceed 40 per cent of the allowable cost of the ASD when obtained from a
82 nonparticipating provider, unless all covered benefits applying coinsurance under the plan do so
83 at a higher amount.

84 (f) Any such contract may require prior authorization as a condition of coverage for ASD.

85 (g) Any such contract shall only be required to provide coverage for the most appropriate
86 medically necessary model ASD that adequately meets the medical needs of the policyholder.

87 SECTION 4. Chapter 176B of the General Laws is hereby amended by inserting after
88 section 4ZAA the following section:-

89 Section 4BB. (a) Any subscription certificate under an individual or group medical service
90 agreement, except certificates which provide supplemental coverage to Medicare or other
91 governmental programs that shall be delivered, issued or renewed within the commonwealth
92 shall provide, as benefits to all individual subscribers or members within the commonwealth and
93 to all group members having a principal place of employment within the commonwealth,

94 coverage for ASD. If ASD are covered as a durable medical equipment benefit ASD, coverage
95 shall be provided under the same terms and conditions that apply to other durable medical
96 equipment ASD covered under the policy, except as otherwise provided in this section. If ASD
97 are covered as a ASD, coverage shall be consistent with the terms and conditions as described in
98 this section.

99 (b) In this section, “ASD” shall mean an ASD.

100 (c) No such certificate shall impose any annual or lifetime dollar maximum on coverage for
101 ASD other than an annual or lifetime dollar maximum that applies in the aggregate to all items
102 and services covered under the certificate.

103 (d) No such certificate shall apply amounts paid for ASD to any annual or lifetime dollar
104 maximum applicable to other durable medical equipment ASD covered under the certificate
105 other than an annual or lifetime dollar maximum that applies in the aggregate to all items and
106 services covered under the certificate.

107 (e) Any such certificate may include a reasonable coinsurance requirement for ASD, not to
108 exceed 20 per cent of the allowable cost of ASD, unless all covered benefits applying
109 coinsurance under the plan do so at a higher amount. If the certificate provides coverage for
110 services from nonparticipating providers, the contract may include a reasonable coinsurance
111 requirement for ASD, not to exceed 40 per cent of the allowable cost of ASD when obtained
112 from a nonparticipating provider, unless all covered benefits applying coinsurance under the plan
113 do so at a higher amount.

114 (f) Any such certificate may require prior authorization as a condition of coverage for ASD.

115 (g) Any such contract shall only be required to provide coverage for the most appropriate
116 medically necessary model ASD that adequately meets the medical needs of the policyholder.

117 SECTION 5. Chapter 176G of the General Laws is hereby amended by inserting after section 4S
118 the following section:-

119 Section 4T. (a) Individual and group health maintenance contracts shall provide coverage for
120 ASD. If ASD are covered as a durable medical equipment benefit ASD, coverage shall be
121 provided under the same terms and conditions that apply to other durable medical equipment
122 ASD covered under the contracts, except as otherwise provided in this section. ASD are covered
123 as coverage shall be consistent with the terms and conditions as described in this section.

124 (b) In this section, "ASD" shall mean an Autism Spectrum Disorder.

125 (c) A health maintenance contract shall not impose any annual or lifetime dollar maximum on
126 coverage for other than an annual or lifetime dollar maximum that applies in the aggregate to all
127 items and services covered under the contract.

128 (d) A health maintenance contract shall not apply amounts paid for to any annual or lifetime
129 dollar maximum applicable to other durable medical equipment covered under the contract other
130 than an annual or lifetime dollar maximum that applies in the aggregate to all items and services
131 covered under the contract.

132 (e) A health maintenance contract may include a reasonable coinsurance requirement for , not to
133 exceed 20 per cent of the allowable cost of the , unless all covered benefits applying coinsurance
134 under the plan do so at a higher amount. If the health maintenance contract provides coverage

135 for services from nonparticipating providers, the contract may include a reasonable coinsurance
136 requirement for , not to exceed 40 per cent of the allowable cost of the when obtained from a
137 nonparticipating provider, unless all covered benefits applying coinsurance under the plan do so
138 at a higher amount.

139 (f) A health maintenance contract may require prior authorization as a condition of coverage for.

140 (g) A health maintenance contract shall only be required to provide coverage for the most
141 appropriate medically necessary model that adequately meets the medical needs of the
142 policyholder.

143 SECTION 6. This act shall apply to all policies, contracts, agreements, plans or certificates of
144 insurance issued or delivered within the commonwealth on or after January 1, 2007, or upon
145 renewal to all policies, contracts, agreements, plans or certificates of insurance in effect before
146 January 1, 2007.

147