GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2009

S

SENATE BILL 1265*

| Short Title: | Treatment of Autism Disorders. | (Public) |
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| Sponsors: | Senators Purcell; Atwater, Bingham, Dorsett, Foriest, Garrou, Gra Kinnaird, Queen, and Snow. | aham, Jones, |
| Referred to: | Health Care. | |

May 20, 2010

A BILL TO BE ENTITLED

| 1 | | | A BILL TO BE ENTITLED |
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| 2 | AN ACT | TO RE | EQUIRE HEALTH BENEFIT PLANS, INCLUDING THE STATE HEALTH |
| 3 | | | TEACHERS AND STATE EMPLOYEES, TO PROVIDE COVERAGE FOR |
| 4 | TREA | ATMEN | T OF AUTISM SPECTRUM DISORDERS AS RECOMMENDED BY THE |
| 5 | JOIN | T STU | DY COMMITTEE ON AUTISM SPECTRUM DISORDER AND PUBLIC |
| 6 | SAFI | ETY. | |
| 7 | The Gene | eral Ass | embly of North Carolina enacts: |
| 8 | | SECT | FION 1. Article 3 of Chapter 58 of the General Statutes is amended by adding |
| 9 | a new see | | |
| 10 | " <u>§ 58-3-</u> 1 | | <u>verage for autism spectrum disorders.</u> |
| 11 | <u>(a)</u> | Defin | itions. – As used in this section: |
| 12 | | <u>(1)</u> | Autism services provider Any person, entity, or group that provides |
| 13 | | | treatment of autism spectrum disorders. |
| 14 | | <u>(2)</u> | Autism spectrum disorders Any of the pervasive developmental disorders |
| 15 | | | as defined in the Diagnostic and Statistical Manual of Mental Disorders |
| 16 | | | (DSM-IV), or subsequent edition published by the American Psychiatric |
| 17 | | | Association, or the International Statistical Classification of Diseases and |
| 18 | | | Related Health Problems (ICD-10), or subsequent edition published by the |
| 19 | | | World Health Organization. |
| 20 | | <u>(3)</u> | Behavioral care Any practices for the purpose of any or all of the |
| 21 | | | following: |
| 22 | | | <u>a.</u> Increasing appropriate or adaptive behaviors. |
| 23 | | | b. Decreasing maladaptive behaviors. |
| 24 | | | c. Developing, maintaining, or restoring, to the maximum extent |
| 25 | | | practicable, the functioning of an individual, including the systematic |
| 26 | | | management of environmental factors or the consequences of |
| 27 | | | behaviors. |
| 28 | | <u>(4)</u> | Diagnosis of autism spectrum disorder Any medically necessary |
| 29 | | | assessment, evaluations, or tests to diagnose whether an individual has an |
| 30 | | | autism spectrum disorder. |
| 31 | | <u>(5)</u> | Health plan As defined in G.S. 58-3-167. For purposes of this section, |
| 32 | | | "health benefit plan" includes the State Health Plan for Teachers and State |
| 33 | | | Employees. |



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| <u>(6)</u> | Licensed or certified Licensed or certified by the Sta | te of North Carolina |
| | for services provided in North Carolina or by the state | in which the care is |
| | provided. | |
| <u>(7)</u> | Medically necessary Any care, treatment, intervent | ion, service, or item |
| | that does, or is reasonably expected to do any of the follo | <u>owing:</u> |
| | <u>a.</u> <u>Prevent the onset or worsening of an illness,</u> | condition, injury, or |
| | <u>disability.</u> | |
| | b. <u>Reduce or ameliorate the physical, men</u> | |
| | developmental effects of an illness, condition, in | |
| | c. Assist to achieve or maintain functional capacity | |
| | activities, taking into account both the function | ± • |
| | individual and the functional capacities that | are appropriate for |
| | individuals the same age. | |
| <u>(8)</u> | Pharmacy care Medications prescribed by a license | |
| | health-related services deemed medically necessary to | determine the need |
| | for or effectiveness of the medications. | |
| <u>(9)</u> | Psychiatric care. – Direct or consultative services pro | ovided by a licensed |
| (10) | psychiatrist. | |
| <u>(10)</u> | <u>Psychological care. – Direct or consultative services pr</u> | ovided by a licensed |
| (11) | psychologist or licensed psychological associate. | |
| <u>(11)</u> | <u>Therapeutic care. – Services provided by a licensed</u> | or certified speech |
| (12) | therapist, occupational therapist, or physical therapist. | the following com |
| <u>(12)</u> | <u>Treatment for autism spectrum disorders.</u> – Any of | |
| | prescribed or ordered by a licensed physician or a licer | · · · |
| | an individual diagnosed with an autism spectrum disorder a. Behavioral care- when provided or supervise | |
| | <u>a.</u> <u>Behavioral care- when provided or supervise</u> certified health care professional as defined | - |
| | within the scope of practice as defined by law. | <u>III 0.5. 50 5 172(0)</u> |
| | <u>b.</u> <u>Pharmacy care.</u> | |
| | <u>c.</u> <u>Psychiatric care.</u> | |
| | d. Psychological care. | |
| | e. Therapeutic care. | |
| (b) Every | health benefit plan, including the State Health Plan for | Teachers and State |
| | Il provide coverage for the diagnosis and treatment | |
| disorders in indiv | viduals. No insurer shall terminate coverage or refuse to de | eliver, execute, issue, |
| amend, adjust, or | r renew coverage to an individual solely because the inc | lividual is diagnosed |
| with one of the | autism spectrum disorders or has received treatment | for autism spectrum |
| disorders. | | |
| | rage under this section shall not be subject to any limits or | the number of visits |
| | y make to an autism services provider. | |
| | rage under this section shall not be denied on the basis th | at the treatments are |
| | ucational in nature. | |
| | rage under this section may be subject to co-payme | |
| • | visions of a health benefit plan that are not less favorable | |
| | coinsurance provisions that apply to other medical serv | vices covered by the |
| health benefit pla | | |
| | section shall not be construed as limiting benefits that are | e otherwise available |
| | <u>under a health benefit plan.</u> | hight to a set i |
| | rage for behavioral therapy under this section will be su | • |
| | cy-five thousand dollars (\$75,000) per year. Payments ma | |
| Denait of a cover | ed individual for any care, treatment, intervention, service | , or nem unrelated to |

autism spectrum disorders shall not be applied toward any maximum benefit established under 1 2 this section. 3 Except for inpatient services, if an individual is receiving treatment for autism (h) 4 spectrum disorders, a health benefit plan shall have the right to request a review of that 5 treatment not more than once every 12 months unless the insurer and the individual's licensed 6 medical doctor or licensed psychologist agree that a more frequent review is necessary. The 7 cost of obtaining any review shall be borne by the insurer." 8 SECTION 2. G.S. 135-45 reads as rewritten: 9 "§ 135-45. Undertaking. 10 The State of North Carolina undertakes to make available a State Health Plan (a)

11 (hereinafter called the "Plan") exclusively for the benefit of eligible employees, eligible retired 12 employees, and certain of their eligible dependents, which will pay benefits in accordance with 13 the terms of this Article. The Plan shall have all the powers and privileges of a corporation and 14 shall be known as the State Health Plan for Teachers and State Employees. The Executive 15 Administrator and Board of Trustees shall carry out their duties and responsibilities as fiduciaries for the Plan. The Plan shall administer one or more group health plans that are 16 17 comprehensive in coverage and shall provide eligible employees and retired employees 18 coverage on a noncontributory basis under at least one of the group plans with benefits equal to 19 that specified in subsection (g) of this section. The Executive Administrator and Board of 20 Trustees may operate group plans as a preferred provider option, or health maintenance, 21 point-of-service, or other organizational arrangement and may offer the plans to employees and 22 retirees on a noncontributory or partially contributory basis. Plans offered on a partially 23 contributory basis must provide benefits that are additional to that specified in subsection (g) of 24 this section and may not be offered unless approved in an act of the General Assembly.

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...

(g) The Executive Administrator and Board of Trustees shall not change the Plan's comprehensive health benefit coverage, co-payments, deductibles, out-of-pocket expenditures, and lifetime maximums in effect on July 1, 2009, January 1, 2011, that would result in a net increased cost to the Plan or in a reduction in benefits to Plan members unless and until the proposed changes are directed to be made in an act of the General Assembly.

31 (h) The Plan shall provide coverage under its Basic and Standard PPO options for the 32 diagnosis and treatment of lymphedema. The coverage shall be the equivalent of coverage 33 under G.S. 58-3-280.

<u>(i)</u> The Plan shall provide coverage under its Basic and Standard PPO options for the
diagnosis and treatment of autism spectrum disorder. The coverage shall be the equivalent of
coverage under G.S. 58-3-192."

37 SECTION 3. This act becomes effective January 1, 2011, and applies to all health
38 benefit plans that are delivered, issued for delivery, or renewed within this State, or outside this
39 State if insuring North Carolina residents, on and after that date.