

HOUSE BILL 715

J1, C3, J2

6lr1048
CF SB 644

By: **Delegates Kramer, Angel, Barkley, B. Barnes, Barve, Beitzel, Brooks, Buckel, Cullison, Fraser-Hidalgo, Frush, Jalisi, Korman, Krimm, Lafferty, Luedtke, McComas, W. Miller, Morales, Pena-Melnyk, Platt, Reznik, Valderrama, and Waldstreicher**

Introduced and read first time: February 5, 2016

Assigned to: Health and Government Operations

A BILL ENTITLED

1 AN ACT concerning

2 **Early Identification of Autism Act**

3 FOR the purpose of requiring the Secretary of Health and Mental Hygiene to require health
4 care practitioners, when providing a well-child examination at certain ages, to
5 administer a certain screening tool for autism; requiring the Secretary to require a
6 child to be referred for certain services under certain circumstances; providing that
7 a certain diagnosis is not required for a referral; requiring certain insurers, nonprofit
8 health service plans, and health maintenance organizations to provide coverage for
9 the administration of the screening tool; providing for the application of certain
10 provisions of this Act; and generally relating to screening for autism.

11 BY adding to

12 Article – Health – General

13 Section 13–2801 and 13–2802 to be under the new subtitle “Subtitle 28. Early
14 Identification of Autism”

15 Annotated Code of Maryland

16 (2015 Replacement Volume)

17 BY adding to

18 Article – Insurance

19 Section 15–817.1

20 Annotated Code of Maryland

21 (2011 Replacement Volume and 2015 Supplement)

22 Preamble

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 WHEREAS, The Centers for Disease Control and Prevention statistics for Maryland
2 indicate that 1 in 60 children born today, including 1 in 37 boys, will be diagnosed with
3 autism; and

4 WHEREAS, It is important to identify children with autism by age 2 or earlier and
5 begin appropriate interventions as soon as possible; and

6 WHEREAS, Early intervention may help speed the child's overall development,
7 reduce inappropriate behaviors, lead to better long-term functioning, and address a variety
8 of unique developmental needs in childhood; and

9 WHEREAS, The American Academy of Pediatrics recommends that all children
10 receive autism screening at 18 and 24 months of age; now, therefore,

11 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
12 That the Laws of Maryland read as follows:

13 **Article – Health – General**

14 **SUBTITLE 28. EARLY IDENTIFICATION OF AUTISM.**

15 **13–2801.**

16 **THE SECRETARY SHALL REQUIRE HEALTH CARE PRACTITIONERS, WHEN**
17 **PROVIDING A WELL-CHILD EXAMINATION AT THE AGES OF 18 MONTHS AND 24**
18 **MONTHS, TO ADMINISTER A STANDARDIZED SCREENING TOOL UTILIZING THE**
19 **MODIFIED CHECKLIST FOR AUTISM IN TODDLERS, REVISED (M-CHAT-R) OR A**
20 **COMPARABLE SCREENING TOOL, AS RECOMMENDED BY THE AMERICAN ACADEMY**
21 **OF PEDIATRICS.**

22 **13–2802.**

23 **(A) IF A CHILD HAS A POSITIVE RESULT ON THE STANDARDIZED SCREENING**
24 **TOOL ADMINISTERED UNDER § 13–2801 OF THIS SUBTITLE, THE SECRETARY SHALL**
25 **REQUIRE THE CHILD TO BE REFERRED FOR:**

26 **(1) A COMPREHENSIVE AUTISM SPECTRUM DISORDER EVALUATION;**

27 **(2) EARLY INTERVENTION SERVICES THROUGH THE MARYLAND**
28 **INFANTS AND TODDLERS PROGRAM; AND**

29 **(3) AN AUDIOLOGIC EVALUATION.**

30 **(B) A DEFINITIVE DIAGNOSIS OF AN AUTISM SPECTRUM DISORDER IS NOT**
31 **REQUIRED FOR A REFERRAL UNDER SUBSECTION (A) OF THIS SECTION.**

1 Article – Insurance

2 15-817.1.

3 (A) THIS SECTION APPLIES TO:

4 (1) INSURERS AND NONPROFIT HEALTH SERVICE PLANS THAT
5 PROVIDE HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS
6 ON AN EXPENSE-INCURRED BASIS UNDER HEALTH INSURANCE POLICIES OR
7 CONTRACTS THAT ARE ISSUED OR DELIVERED IN THE STATE; AND

8 (2) HEALTH MAINTENANCE ORGANIZATIONS THAT PROVIDE
9 HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS UNDER
10 CONTRACTS THAT ARE ISSUED OR DELIVERED IN THE STATE.

11 (B) AN ENTITY SUBJECT TO THIS SECTION SHALL PROVIDE COVERAGE FOR
12 THE ADMINISTRATION OF THE SCREENING TOOL REQUIRED TO BE ADMINISTERED
13 UNDER § 13-2801 OF THE HEALTH – GENERAL ARTICLE.

14 SECTION 2. AND BE IT FURTHER ENACTED, That the requirements of §
15 15-817.1 of the Insurance Article, as enacted by Section 1 of this Act, shall apply to all
16 policies, contracts, and health benefit plans issued, delivered, or renewed in the State on or
17 after January 1, 2017.

18 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect
19 October 1, 2016.