

# HOUSE BILL 273

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CF 9lr0958

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By: **Delegates Reznik, Ali, Anderson, Aumann, Barkley, Beidle, Benson, Bobo, Bromwell, Bronrott, Burns, Carr, Carter, G. Clagett, Dumais, Feldman, Frick, Gilchrist, Gutierrez, Guzzone, Healey, Hixson, Holmes, Howard, Hubbard, Hucker, Ivey, Kaiser, Kramer, Kullen, Lafferty, Lee, Manno, Mathias, Mizeur, Montgomery, Nathan-Pulliam, Oaks, Pena-Melnyk, Rice, Robinson, Rosenberg, Schuler, Shewell, Simmons, Sophocleus, Stein, Tarrant, Taylor, F. Turner, V. Turner, Valderrama, Waldstreicher, and Weldon**

Introduced and read first time: January 29, 2009

Assigned to: Health and Government Operations

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## A BILL ENTITLED

1 AN ACT concerning

2 **Health Insurance – Coverage of Autism Spectrum Disorders**

3 FOR the purpose of requiring certain insurers, nonprofit health service plans, and  
4 health maintenance organizations to provide coverage for the diagnosis of  
5 autism spectrum disorders and the treatment of autism spectrum disorders in  
6 certain individuals; requiring certain treatment for autism spectrum disorders  
7 to be provided by certain individuals; limiting coverage to a certain maximum  
8 benefit; providing for the annual adjustment of the maximum benefit; clarifying  
9 that certain benefits otherwise available to an individual are not limited by this  
10 Act; prohibiting certain limits on visits to an autism services provider; requiring  
11 a certain notice; providing that a certain determination constitutes an adverse  
12 decision under certain provisions of law; authorizing certain insurers, nonprofit  
13 health service plans, and health maintenance organizations to request an  
14 updated treatment plan at certain intervals; requiring certain insurers,  
15 nonprofit health service plans, and health maintenance organizations to pay the  
16 cost of the updated treatment plan; providing that certain insurers, nonprofit  
17 health service plans, and health maintenance organizations are not required to  
18 provide reimbursement for certain services; making the provisions of this Act  
19 applicable to health maintenance organizations; defining certain terms;  
20 providing for the application of this Act; providing for a delayed effective date;  
21 and generally relating to requiring health insurance coverage of autism  
22 spectrum disorders.

23 BY adding to

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EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 Article – Health – General  
2 Section 19–706(ttt)  
3 Annotated Code of Maryland  
4 (2005 Replacement Volume and 2008 Supplement)

5 BY adding to  
6 Article – Insurance  
7 Section 15–844  
8 Annotated Code of Maryland  
9 (2006 Replacement Volume and 2008 Supplement)

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

12 **Article – Health – General**

13 19–706.

14 **(TTT) THE PROVISIONS OF § 15–844 OF THE INSURANCE ARTICLE APPLY**  
15 **TO HEALTH MAINTENANCE ORGANIZATIONS.**

16 **Article – Insurance**

17 **15–844.**

18 **(A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE**  
19 **MEANINGS INDICATED.**

20 **(2) (I) “APPLIED BEHAVIOR ANALYSIS” MEANS THE DESIGN,**  
21 **IMPLEMENTATION, AND EVALUATION OF ENVIRONMENTAL MODIFICATIONS,**  
22 **USING BEHAVIORAL STIMULI AND CONSEQUENCES, TO:**

23 **1. PRODUCE SOCIALLY SIGNIFICANT IMPROVEMENT**  
24 **IN HUMAN BEHAVIOR; OR**

25 **2. PREVENT THE LOSS OF ATTAINED SKILL OR**  
26 **FUNCTION.**

27 **(II) “APPLIED BEHAVIOR ANALYSIS” INCLUDES THE USE OF**  
28 **DIRECT OBSERVATION, MEASUREMENT, AND FUNCTIONAL ANALYSIS OF THE**  
29 **RELATIONSHIP BETWEEN ENVIRONMENT AND BEHAVIOR.**

30 **(3) “AUTISM SPECTRUM DISORDERS” MEANS ANY OF THE**  
31 **PERVASIVE DEVELOPMENTAL DISORDERS, AS DESCRIBED IN THE CURRENT**

1 VERSION OF THE DIAGNOSTIC AND STATISTICAL MANUAL OF MENTAL  
2 DISORDERS.

3 (4) "DIAGNOSIS OF AUTISM SPECTRUM DISORDERS" MEANS  
4 MEDICALLY NECESSARY ASSESSMENTS, EVALUATIONS, OR TESTS TO DIAGNOSE  
5 WHETHER AN INDIVIDUAL HAS AN AUTISM SPECTRUM DISORDER.

6 (5) "HABILITATIVE OR REHABILITATIVE CARE" MEANS  
7 PROFESSIONAL, COUNSELING, AND GUIDANCE SERVICES AND TREATMENT  
8 PROGRAMS, INCLUDING APPLIED BEHAVIOR ANALYSIS, THAT ARE NECESSARY  
9 TO DEVELOP, MAINTAIN, AND RESTORE, TO THE MAXIMUM EXTENT  
10 PRACTICABLE, THE FUNCTIONING OF AN INDIVIDUAL.

11 (6) "PHARMACY CARE" MEANS:

12 (I) MEDICATIONS PRESCRIBED BY A LICENSED PHYSICIAN;  
13 AND

14 (II) ANY HEALTH-RELATED SERVICES NECESSARY TO  
15 DETERMINE THE NEED OR EFFECTIVENESS OF THE MEDICATIONS.

16 (7) "PSYCHIATRIC CARE" MEANS DIRECT OR CONSULTATIVE  
17 SERVICES PROVIDED BY A BOARD-CERTIFIED PSYCHIATRIST.

18 (8) "PSYCHOLOGICAL CARE" MEANS DIRECT OR CONSULTATIVE  
19 SERVICES PROVIDED BY A LICENSED PSYCHOLOGIST.

20 (9) "TREATMENT FOR AUTISM SPECTRUM DISORDERS" MEANS  
21 HABILITATIVE OR REHABILITATIVE CARE, PHARMACY CARE, PSYCHIATRIC  
22 CARE, OR PSYCHOLOGICAL CARE PRESCRIBED BY A LICENSED PHYSICIAN OR A  
23 LICENSED PSYCHOLOGIST TO AN INDIVIDUAL DIAGNOSED WITH AN AUTISM  
24 SPECTRUM DISORDER AS PART OF A TREATMENT PLAN THAT INCLUDES  
25 THERAPEUTIC GOALS AND OUTCOME MEASURES.

26 (B) THIS SECTION APPLIES TO:

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

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

1           (C) AN ENTITY SUBJECT TO THIS SECTION SHALL PROVIDE COVERAGE  
2 FOR THE DIAGNOSIS OF AUTISM SPECTRUM DISORDERS AND THE  
3 EVIDENCE-BASED, MEDICALLY NECESSARY TREATMENT OF AUTISM SPECTRUM  
4 DISORDERS IN INDIVIDUALS UNDER THE AGE OF 21 YEARS.

5           (D) APPLIED BEHAVIOR ANALYSIS COVERED UNDER THIS SECTION  
6 SHALL BE PROVIDED BY AN INDIVIDUAL WHO IS:

7           (1) LICENSED UNDER TITLE 14 OR TITLE 18 OF THE HEALTH  
8 OCCUPATIONS ARTICLE OR UNDER THE SUPERVISION OF AN INDIVIDUAL  
9 LICENSED UNDER TITLE 14 OR TITLE 18 OF THE HEALTH OCCUPATIONS  
10 ARTICLE; OR

11           (2) A BOARD CERTIFIED BEHAVIOR ANALYST OR A BOARD  
12 CERTIFIED ASSOCIATE BEHAVIOR ANALYST CREDENTIALLED BY THE BEHAVIOR  
13 ANALYST CERTIFICATION BOARD.

14           (E) (1) SUBJECT TO PARAGRAPH (2) OF THIS SUBSECTION,  
15 COVERAGE UNDER THIS SECTION SHALL BE LIMITED TO A MAXIMUM BENEFIT  
16 OF \$50,000 ANNUALLY.

17           (2) BEGINNING JANUARY 1, 2011, THE MAXIMUM BENEFIT SHALL  
18 BE ADJUSTED ANNUALLY FOR INFLATION BY USING THE MEDICAL CARE  
19 COMPONENT OF THE UNITED STATES DEPARTMENT OF LABOR CONSUMER  
20 PRICE INDEX FOR ALL URBAN CONSUMERS (CPI-U).

21           (F) THIS SECTION MAY NOT BE CONSTRUED AS LIMITING BENEFITS  
22 THAT OTHERWISE ARE AVAILABLE TO AN INDIVIDUAL UNDER A HEALTH  
23 INSURANCE POLICY OR CONTRACT OR A HEALTH MAINTENANCE ORGANIZATION  
24 CONTRACT.

25           (G) COVERAGE UNDER THIS SECTION IS NOT SUBJECT TO LIMITS ON  
26 THE NUMBER OF VISITS AN INDIVIDUAL MAY MAKE TO AN AUTISM SERVICES  
27 PROVIDER.

28           (H) AN ENTITY SUBJECT TO THIS SECTION SHALL PROVIDE NOTICE  
29 ANNUALLY TO ITS INSURED AND ENROLLEES ABOUT THE COVERAGE  
30 REQUIRED UNDER THIS SECTION.

31           (I) (1) AN ENTITY SUBJECT TO THIS SECTION PERIODICALLY MAY  
32 REQUEST AN UPDATED TREATMENT PLAN, BUT NOT MORE OFTEN THAN ONCE  
33 EVERY 6 MONTHS, UNLESS THE LICENSED PHYSICIAN OR LICENSED  
34 PSYCHOLOGIST WHO PRESCRIBES CARE FOR AN INDIVIDUAL AGREES THAT

1 MORE FREQUENT REVIEW OF THE INDIVIDUAL'S TREATMENT PLAN IS  
2 NECESSARY.

3 (2) AN ENTITY SUBJECT TO THIS SECTION THAT REQUESTS AN  
4 UPDATED TREATMENT PLAN SHALL BEAR THE COST OF OBTAINING THE PLAN.

5 (J) A DETERMINATION BY AN ENTITY SUBJECT TO THIS SECTION TO  
6 DENY COVERAGE FOR THE DIAGNOSIS OF AUTISM SPECTRUM DISORDERS OR  
7 THE TREATMENT OF AUTISM SPECTRUM DISORDERS CONSTITUTES AN ADVERSE  
8 DECISION UNDER SUBTITLE 15-10A OF THIS TITLE.

9 (K) AN ENTITY SUBJECT TO THIS SECTION IS NOT REQUIRED TO  
10 PROVIDE REIMBURSEMENT FOR SERVICES DELIVERED THROUGH EARLY  
11 INTERVENTION OR SCHOOL SERVICES.

12 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall apply to all  
13 policies, contracts, and health benefit plans issued, delivered, or renewed in the State  
14 on or after January 1, 2010.

15 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect  
16 January 1, 2010.