
CALIFORNIA AUTISM INSURANCE REFORM LAW

In October 2011, **California** became the **28th** state to pass autism insurance reform. The law (SB 946) requires that every health care plan contract that provides hospital, medical, or surgical coverage shall also provide coverage for behavioral health treatment for pervasive developmental disorder or autism.¹ Behavioral health treatment includes applied behavior analysis (ABA) and other evidence-based behavior intervention programs.

California's autism mandate required all applicable health plans provide coverage for behavioral health treatment for pervasive developmental disorder or autism no later than July 1, 2012; however, due to the uncertainty with what would happen with the federal health insurance reform law, this law sunsets July 1, 2014. Therefore, the mandate applies to all employer-provided health plans that are fully-funded and private individual insurance plans. The law does not apply to:

- health care service plans that do not deliver mental health or behavioral health services to enrollees;
- the Medi-Cal program, the Healthy Families Program or the Public Employees Retirement System (CalPERS);
- self-insured employer-provided plans.
- health care benefit plans or contracts entered into with the Board of Administration of the Public Employees' Retirement System (CalPERS).

The terms and conditions applied to coverage for behavioral health treatment for pervasive developmental disorder or autism, including maximum lifetime benefits, co-payments, and individual and family deductibles are equal to those for all benefits under the plan contract.

Behavioral health treatments including applied behavior analysis (ABA) and other evidence-based behavior intervention programs are covered. In order to be covered, the behavioral health treatment must:

- be prescribed by a licensed physician and surgeon, or developed by a licensed psychologist;

¹ The law states that pervasive developmental disorder or autism must be covered. Pervasive developmental disorder includes autistic disorder, Asperger's disorder and pervasive developmental disorder - not otherwise specified (PDD-NOS).

- be supported by a written treatment plan containing measurable goals prescribed by a qualified autism service provider (e.g., a Board Certified Behavior Analyst (BCBA) or other licensed service provider with similar competence and experience).
- be provided by a qualified autism service provider, a qualified autism service professional such as an Associate Behavior Analyst, or a qualified autism service paraprofessional (i.e., a “line therapist”). Qualified autism service professionals and paraprofessionals must be supervised and employed by a qualified autism service provider.

On the Federal level, The Federal Mental Health Parity Act, which took effect on 10/3/09,² requires parity in benefits for mental health and substance abuse disorders. Under this law, carriers cannot have a benefit limit or dollar maximum for a mental health diagnosis that is not also applied to any other medical condition. Therefore, this federal law overrides most of the state laws that include a calendar year dollar maximum for autism treatment.

In addition, the federal Health Insurance Reform Bill signed by President Obama includes an amendment for autism insurance reform that would require coverage for ABA therapy with no yearly dollar maximum on coverage. By 2014, most health care plans will be required to cover ABA therapy. The language was broadly written and requires coverage of behavioral health treatments, which would include ABA.

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