



# LAWS OF ALASKA

2012

**Source**

HCS SB 74(RLS) am H

**Chapter No.**

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**AN ACT**

Requiring insurance coverage for autism spectrum disorders, describing the method for establishing a covered treatment plan for those disorders, and defining the covered treatment for those disorders; establishing the Comprehensive Autism Early Diagnosis and Treatment Task Force; and providing for an effective date.

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**BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:**

THE ACT FOLLOWS ON PAGE 1



**AN ACT**

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2 establishing a covered treatment plan for those disorders, and defining the covered treatment  
3 for those disorders; establishing the Comprehensive Autism Early Diagnosis and Treatment  
4 Task Force; and providing for an effective date.

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6 \* **Section 1.** AS 21.42 is amended by adding a new section to read:

7           **Sec. 21.42.397. Coverage for autism spectrum disorders.** (a) Except for a  
8 fraternal benefit society, a health care insurer that offers, issues for delivery, delivers,  
9 or renews a health care insurance plan in this state shall provide coverage for the costs  
10 of the diagnosis and treatment of autism spectrum disorders. Coverage required by this  
11 subsection must include treatment prescribed by a licensed physician, psychologist, or  
12 advanced nurse practitioner, provided by or supervised by an autism service provider,  
13 and as identified in a treatment plan developed following a comprehensive evaluation.  
14 Covered treatment includes medically necessary pharmacy care, psychiatric care,

1 psychological care, habilitative or rehabilitative care, and therapeutic care. In this  
2 subsection,

3 (1) "habilitative or rehabilitative care" means professional counseling,  
4 guidance services, and treatment programs necessary to develop, restore, or maintain  
5 the functioning of an individual to the maximum extent practicable, including applied  
6 behavior analysis or other structured behavioral therapies; in this paragraph, "applied  
7 behavior analysis" means the design, implementation, and evaluation of environmental  
8 modifications, using behavioral stimuli and consequences, including direct  
9 observation, measurement, and functional analysis of the relationship between  
10 environment and behavior, to produce socially significant improvement in human  
11 behavior or to prevent the loss of an attained skill or function;

12 (2) "therapeutic care" means services provided by or under the  
13 supervision of a speech-language pathologist licensed under AS 08.11 or an  
14 occupational therapist or physical therapist licensed under AS 08.84.

15 (b) Coverage under this section

16 (1) is required to be provided only to individuals under 21 years of  
17 age;

18 (2) may not limit the number of visits to an autism service provider for  
19 treatment;

20 (3) is subject to copayment, deductible, and coinsurance provisions,  
21 and other general exclusions or limitations included in a health insurance policy to the  
22 same extent as other health care services covered by the policy; and

23 (4) must cover medically necessary treatment that is coordinated with  
24 an education program, but may not be contingent on the coordination of treatment  
25 with an education program.

26 (c) An insurer providing health care insurance to a small employer in the  
27 group market with 20 or fewer employees is not required to provide insurance  
28 coverage to the small employer that includes the coverage required under (a) of this  
29 section.

30 (d) The director may waive the coverage required in this section for an insurer  
31 providing health care insurance to a small employer in the group market with 21 - 25

1 employees if the small employer demonstrates to the director by actual claims  
2 experience over any consecutive 12-month period that compliance with this section  
3 has increased the premium cost of the small employer's health insurance policy by  
4 three percent or more during the consecutive 12-month period.

5 (e) This section does not limit benefits that are otherwise available to an  
6 individual under a health care insurance plan.

7 (f) A health care insurer may not refuse to deliver, execute, issue, amend, or  
8 renew coverage to an individual or terminate coverage because the individual is  
9 diagnosed with or has received treatment for autism spectrum disorders.

10 (g) In this section,

11 (1) "autism service provider" means an individual who is licensed,  
12 certified, or registered by the applicable state licensing board or by a nationally  
13 recognized certifying organization and who provides direct services to an individual  
14 with an autism spectrum disorder;

15 (2) "autism spectrum disorders" means pervasive developmental  
16 disorders, or a group of conditions having substantially the same characteristics as  
17 pervasive developmental disorders, as defined in the American Psychiatric  
18 Association's Diagnostic and Statistical Manual of Mental Disorders-IV-TR, as  
19 amended or reissued from time to time;

20 (3) "health care insurance plan" has the meaning given in  
21 AS 21.54.500;

22 (4) "health care insurer" has the meaning given in AS 21.54.500;

23 (5) "medically necessary" means any care, treatment, intervention,  
24 service, or item prescribed by a licensed physician, psychologist, or advanced nurse  
25 practitioner in accordance with accepted standards of practice that will, or is  
26 reasonably expected to,

27 (A) prevent the onset of an illness, condition, injury, or  
28 disability;

29 (B) reduce or ameliorate the physical, mental, or developmental  
30 effects of an illness, condition, injury, or disability;

31 (C) assist to achieve or maintain maximum functional capacity

1 in performing daily activities, taking into account both the functional capacity  
2 of the individual and the functional capacity of other persons of the individual's  
3 age.

4 \* **Sec. 2.** The uncodified law of the State of Alaska is amended by adding a new section to  
5 read:

6 AUTISM TASK FORCE. (a) The Comprehensive Autism Early Diagnosis and  
7 Treatment Task Force is created in the legislative branch for the purpose of making  
8 recommendations for the development of a statewide comprehensive plan to support early  
9 diagnosis and treatment of autism and studying the effects of the state's providing insurance  
10 coverage for autism spectrum disorder.

11 (b) The task force consists of nine members who, except for those in (1) and (2) of  
12 this subsection, shall be appointed jointly by the President of the Senate and the Speaker of  
13 the House of Representatives as follows:

14 (1) one senator selected by the President of the Senate, who shall serve as co-  
15 chair;

16 (2) one representative selected by the Speaker of the House of  
17 Representatives, who shall serve as co-chair;

18 (3) one member representing mental health service providers;

19 (4) one member from the Governor's Council on Disabilities and Special  
20 Education (AS 47.80.030);

21 (5) the commissioner of health and social services or the commissioner's  
22 designee;

23 (6) the commissioner of administration or the commissioner's designee;

24 (7) the director of the division of insurance, Department of Commerce,  
25 Community, and Economic Development, or the director's designee;

26 (8) one member representing a private insurance provider who offers health-  
27 insurance-related services in the state; and

28 (9) one parent or guardian of an autistic child.

29 (c) The task force shall, not later than January 15, 2013, submit a report to the  
30 legislature and the Governor. The report must include

31 (1) policy options to achieve a comprehensive autism spectrum disorder early

1 diagnosis and treatment program that results in coverage to the greatest number of residents in  
2 the state;

3 (2) recommendations to the legislature and the Governor that include draft  
4 legislation required to achieve the policy options proposed by the task force;

5 (3) an evaluation of the fiscal effect of the policy options proposed by the task  
6 force that includes a five-year projection of both public sector and private sector costs and  
7 expenditures;

8 (4) an analysis of how the implementation of P.L. 111-148 (Patient Protection  
9 and Affordable Care Act) is expected to affect the options, recommendations, and fiscal  
10 evaluations of the task force.

11 (d) The task force shall meet as needed during the interim following the Second  
12 Regular Session in 2012.

13 (e) The task force may request administrative and technical support from the  
14 Department of Education and Early Development.

15 (f) Members of the task force shall serve without compensation but are entitled to per  
16 diem and travel expenses authorized for boards and commissions under AS 39.20.180.

17 (g) The task force terminates on January 15, 2013, unless extended.

18 \* **Sec. 3.** The uncodified law of the State of Alaska is amended by adding a new section to  
19 read:

20 APPLICABILITY. AS 21.42.397, enacted by sec. 1 of this Act, applies to a health  
21 insurance policy that is offered, issued for delivery, delivered, or renewed on or after  
22 January 1, 2013.

23 \* **Sec. 4.** Section 2 of this Act takes effect immediately under AS 01.10.070(c).

24 \* **Sec. 5.** Except as provided in sec. 4 of this Act, this Act takes effect January 1, 2013.