

HOUSE RESEARCH

Bill Summary

FILE NUMBER: H.F. 181
Version: As introduced

DATE: January 29, 2013

Authors: Norton and others

Subject: Health insurance coverage of autism spectrum disorders

Analyst: Tom Pender (651) 296-1885
Emily Cleveland (651) 296-5808

This publication can be made available in alternative formats upon request. Please call 651-296-6753 (voice); or the Minnesota State Relay Service at 1-800-627-3529 (TTY) for assistance. Summaries are also available on our website at: www.house.mn/hrd/hrd.htm.

Overview

This bill requires private sector health insurance to cover autism spectrum disorders.

Section

1 Coverage for autism spectrum disorders. Adds § 62A.3094.

Subd. 1. Definitions. Defines the term “autism spectrum disorders” to include autism and related conditions. Defines the term “health plan” to include all private sector health coverage, both individual and group, that the state can regulate. Defines “medically necessary care” to include health care services, diagnostic testing, and preventative services. Defines “mental health professional” in the same manner as it is defined in the Children’s Mental Health Act.

Subd. 2. Coverage required. (a) Requires health plans to cover autism spectrum disorders. Lists some services that would be included in that requirement.

(b) Requires the health plan to accept the treatment plan recommended by the enrollee’s treating physician or mental health professional.

(c) Prohibits health plans from terminating an enrollee’s insurance coverage due to the enrollee having an autism spectrum disorder.

(d) Prohibits health plans from requiring an updated treatment plan more often than every six months, unless the health plan and treating provider agree to a more frequent

Section

schedule for updates.

Subd. 3. No effect on other law. Provides that nothing in this section limits the existing mental health parity law requiring insurers to cover mental health on the same basis as other illnesses.

Subd. 4. State health care programs. Provides that the coverage requirements in this section do not affect the benefits available under medical assistance, MinnesotaCare, and the state employee group insurance plan (SEGIP).

Effective date: Makes the law effective August 1, 2013, and applies to coverage issued or renewed on or after that date. (This means for instance that an insurance policy renewed on July 1, 2013, would have to comply at its next annual renewal.)