
A BILL FOR AN ACT

RELATING TO HEALTH.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. The purpose of this Act is to ensure the
2 provision of quality health care procedures for all Hawaii
3 residents by requiring coverage of and treatment for autism
4 spectrum disorders.

5 SECTION 2. Chapter 431, Hawaii Revised Statutes, is
6 amended by adding a new section to article 10A to be
7 appropriately designated and to read as follows:

8 "§431:10A- Autism spectrum disorders benefits and
9 coverage; notice; definitions. (a) Each individual or group
10 accident and health or sickness insurance policy, contract,
11 plan, or agreement issued or renewed in this State after
12 December 31, 2013, shall provide to the policyholder and
13 individuals under twenty-six years of age covered under the
14 policy, contract, plan, or agreement, coverage for the
15 screening, diagnosis, and treatment of autism spectrum
16 disorders.

17 (b) Every insurer shall provide written notice to its
18 policyholders regarding the coverage required by this section.



1 The notice shall be in writing and prominently positioned in any
2 literature or correspondence sent to policyholders and shall be
3 transmitted to policyholders within calendar year 2014 when
4 annual information is made available to members or in any other
5 mailing to members, but in no case later than December 31, 2014.

6 (c) Individual coverage for behavioral health treatment
7 provided under this section shall be subject to a maximum
8 benefit of \$50,000 per year and a maximum lifetime benefit of
9 \$300,000, but shall not be subject to any limits on the number
10 of visits to an autism service provider. After December 31,
11 2016, the insurance commissioner, on an annual basis, shall
12 adjust the maximum benefit for inflation using the medical care
13 component of the United States Department of Labor Consumer
14 Price Index for all urban consumers. The commissioner shall
15 publish the adjusted maximum benefit annually no later than
16 April 1 of each calendar year, which shall apply during the
17 following calendar year to health insurance policies subject to
18 this section. Payments made by an insurer on behalf of a
19 covered individual for any care, treatment, intervention, or
20 service other than behavioral health treatment, shall not be
21 applied toward any maximum benefit established under this
22 subsection.



1 (d) Coverage under this section may be subject to
2 copayment, deductible, and coinsurance provisions of a health
3 insurance policy that are no less favorable than the co-payment,
4 deductible, and coinsurance provisions for other medical
5 services covered by the policy.

6 (e) This section shall not be construed as limiting
7 benefits that are otherwise available to an individual under a
8 health insurance policy.

9 (f) Coverage for treatment under this section shall not be
10 denied on the basis that the treatment is habilitative or non-
11 restorative in nature.

12 (g) Except for inpatient services, if an individual is
13 receiving treatment for autism spectrum disorders, an insurer
14 may request a review of that treatment not more than once every
15 twelve months. The cost of obtaining any review shall be borne
16 by the insurer.

17 (h) This section shall not be construed as reducing any
18 obligation to provide services to an individual under an
19 individualized family service plan, an individualized education
20 program, or an individualized service plan.

21 (i) As of January 1, 2016, to the extent that this section
22 requires benefits that exceed the essential health benefits



1 specified under section 1302(b) of the Patient Protection and
2 Affordable Care Act of 2010 (P.L. 111-148), the specific
3 benefits that exceed the specified essential health benefits
4 shall not be required of a qualified health plan when the plan
5 is offered in this State through the Hawaii health insurance
6 exchange by a health carrier. Nothing in this subsection shall
7 nullify the application of this section to plans offered outside
8 the exchange.

9 (j) As used in this section, unless the context clearly
10 requires otherwise:

11 "Applied behavior analysis" means the design,
12 implementation, and evaluation of environmental modifications,
13 using behavioral stimuli and consequences, to produce socially
14 significant improvement in human behavior, including the use of
15 direct observation, measurement, and functional analysis of the
16 relations between environment and behavior.

17 "Autism service provider" means any person, entity, or
18 group that provides treatment of autism spectrum disorders.

19 "Autism spectrum disorders" means any of the pervasive
20 developmental disorders as defined by the most recent edition of
21 the Diagnostic and Statistical Manual of Mental Disorders,
22 including autistic disorder, Asperger's disorder, pervasive



1 developmental disorder not otherwise specified, Rett's disorder,
2 and childhood disintegrative disorder.

3 "Behavioral health treatment" means professional,
4 counseling, and guidance services and treatment programs,
5 including applied behavior analysis, that are necessary to
6 develop, maintain, and restore, to the maximum extent
7 practicable, the functioning of an individual.

8 "Diagnosis of autism spectrum disorders" means medically
9 necessary assessments, evaluations, or tests conducted to
10 diagnose whether an individual has an autism spectrum disorder.

11 "Health insurance policy" means any individual or group
12 accident and health or sickness policy, or subscriber contract
13 or certificate issued by an insurance entity subject to this
14 section.

15 "Pharmacy care" means medications prescribed by a licensed
16 physician or registered nurse practitioner and any health-
17 related services that are deemed medically necessary to
18 determine the need or effectiveness of the medications.

19 "Psychiatric care" means direct or consultative services
20 provided by a licensed psychiatrist.

21 "Psychological care" means direct or consultative services
22 provided by a licensed psychologist.



1 "Therapeutic care" means services provided by licensed
2 speech pathologists, registered occupational therapists, or
3 licensed physical therapists.

4 "Treatment for autism spectrum disorders" includes the
5 following care prescribed, provided, or ordered for an
6 individual diagnosed with an autism spectrum disorder by a
7 licensed physician, psychiatrist, psychologist, social worker,
8 or registered nurse practitioner if the care is determined to be
9 medically necessary:

- 10 (1) Behavioral health treatment;
- 11 (2) Pharmacy care;
- 12 (3) Psychiatric care;
- 13 (4) Psychological care; and
- 14 (5) Therapeutic care."

15 SECTION 3. Chapter 432, Hawaii Revised Statutes, is
16 amended by adding a new section to article I to be appropriately
17 designated and to read as follows:

18 "§432:1- Autism spectrum disorders benefits and
19 coverage; notice; definitions. (a) Each individual or group
20 hospital or medical service plan, policy, contract, or agreement
21 issued or renewed in this State after December 31, 2013, shall
22 provide to the member and individuals under twenty-six years of



1 age covered under the service plan, policy, contract, or
2 agreement, coverage for the diagnosis and treatment of autism
3 spectrum disorders.

4 (b) Every mutual benefit society shall provide written
5 notice to its members regarding the coverage required by this
6 section. The notice shall be in writing and prominently
7 positioned in any literature or correspondence sent to members
8 and shall be transmitted to members within calendar year 2014
9 when annual information is made available to members or in any
10 other mailing to members, but in no case later than December 31,
11 2014.

12 (c) Individual coverage provided under this section shall
13 be subject to a maximum benefit of \$50,000 per year and a
14 maximum lifetime benefit of \$300,000, but shall not be subject
15 to any limits on the number of visits to an autism service
16 provider. After December 31, 2016, the insurance commissioner,
17 on an annual basis, shall adjust the maximum benefit for
18 inflation, using the medical care component of the United States
19 Department of Labor Consumer Price Index for all urban
20 consumers. The commissioner shall publish the adjusted maximum
21 benefit annually no later than April 1 of each calendar year,
22 which shall apply during the following calendar year to health



1 insurance policies subject to this section. Payments made by a
2 mutual benefit society on behalf of a covered individual for any
3 care, treatment, intervention, service, or item, the provision
4 of which was for the treatment of a health condition unrelated
5 to the covered individual's autism spectrum disorder, shall not
6 be applied toward any maximum benefit established under this
7 subsection.

8 (d) Coverage under this section shall be subject to
9 copayment, deductible, and coinsurance provisions of a health
10 insurance policy to the extent that other medical services
11 covered by the policy are subject to these provisions.

12 (e) This section shall not be construed as limiting
13 benefits that are otherwise available to an individual under a
14 health insurance policy.

15 (f) As used in this section, unless the context clearly
16 requires otherwise:

17 "Applied behavior analysis" means the design,
18 implementation, and evaluation of environmental modifications,
19 using behavioral stimuli and consequences, to produce socially
20 significant improvement in human behavior, including the use of
21 direct observation, measurement, and functional analysis of the
22 relations between environment and behavior.



1 "Autism service provider" means any person, entity, or
2 group that provides treatment of autism spectrum disorders.

3 "Autism spectrum disorders" means any of the pervasive
4 developmental disorders as defined by the most recent edition of
5 the Diagnostic and Statistical Manual of Mental Disorders,
6 including autistic disorder, Asperger's disorder, pervasive
7 developmental disorder not otherwise specified, Rett's disorder,
8 and childhood disintegrative disorder.

9 "Behavioral health treatment" means professional,
10 counseling, and guidance services and treatment programs,
11 including applied behavior analysis, that are necessary to
12 develop, maintain, and restore, to the maximum extent
13 practicable, the functioning of an individual.

14 "Diagnosis of autism spectrum disorders" means medically
15 necessary assessments, evaluations, or tests conducted to
16 diagnose whether an individual has an autism spectrum disorder.

17 "Health insurance policy" means any individual or group
18 hospital or medical service plan, policy, contract, or agreement
19 or member contract or certificate issued by a mutual benefit
20 society subject to this section.

21 "Pharmacy care" means medications prescribed by a licensed
22 physician or registered nurse practitioner and any health-



1 related services that are deemed medically necessary to
2 determine the need or effectiveness of the medications.

3 "Psychiatric care" means direct or consultative services
4 provided by a licensed psychiatrist.

5 "Psychological care" means direct or consultative services
6 provided by a licensed psychologist.

7 "Therapeutic care" means services provided by licensed
8 speech pathologists, registered occupational therapists, or
9 licensed physical therapists.

10 "Treatment for autism spectrum disorders" includes the
11 following care prescribed, provided, or ordered for an
12 individual diagnosed with an autism spectrum disorder by a
13 licensed physician, psychiatrist, psychologist, social worker,
14 or registered nurse practitioner if the care is determined to be
15 medically necessary:

- 16 (1) Behavioral health treatment;
17 (2) Pharmacy care;
18 (3) Psychiatric care;
19 (4) Psychological care; and
20 (5) Therapeutic care."

21 SECTION 4. Section 432D-23, Hawaii Revised Statutes, is
22 amended to read as follows:



1 "§432D-23 Required provisions and benefits.
2 Notwithstanding any provision of law to the contrary, each
3 policy, contract, plan, or agreement issued in the State after
4 January 1, 1995, by health maintenance organizations pursuant to
5 this chapter, shall include benefits provided in sections
6 431:10-212, 431:10A-115, 431:10A-115.5, 431:10A-116, 431:10A-
7 116.2, 431:10A-116.5, 431:10A-116.6, 431:10A-119, 431:10A-120,
8 431:10A-121, 431:10A-125, 431:10A-126, [~~and~~] 431:10A-122, and
9 [~~431:10A-116.2~~] 431:10A- , and chapter 431M."

10 SECTION 5. The coverage and benefit to be provided by a
11 health maintenance organization under section 4 of this Act
12 shall begin for all policies, contracts, plans, or agreements
13 issued in this State by a health maintenance organization after
14 December 31, 2013.

15 SECTION 6. Statutory material to be repealed is bracketed
16 and stricken. New statutory material is underscored.

17 SECTION 7. This Act shall take effect on January 1, 2030.

18



Report Title:

Mandatory Health Coverage; Autism Spectrum Disorders

Description:

Requires health insurers, mutual benefit societies, and health maintenance organizations to provide health care coverage and benefits for autism spectrum disorders beginning after 12/31/2013. Takes effect 1/1/2030. (SD1)

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.

