HOUSE SUBSTITUTE FOR SENATE BILL NO. 414

A bill to amend 1980 PA 350, entitled "The nonprofit health care corporation reform act," (MCL 550.1101 to 550.1704) by adding section 416e.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- 1 SEC. 416E. (1) EXCEPT AS OTHERWISE PROVIDED IN THIS SECTION, A
- 2 HEALTH CARE CORPORATION GROUP OR NONGROUP CERTIFICATE SHALL PROVIDE
- 3 COVERAGE FOR THE DIAGNOSIS OF AUTISM SPECTRUM DISORDERS AND
- 4 TREATMENT OF AUTISM SPECTRUM DISORDERS. A HEALTH CARE CORPORATION
- 5 SHALL NOT DO ANY OF THE FOLLOWING:
- 6 (A) LIMIT THE NUMBER OF VISITS A MEMBER MAY USE FOR TREATMENT
- 7 OF AUTISM SPECTRUM DISORDERS COVERED UNDER THIS SECTION.
- 8 (B) DENY OR LIMIT COVERAGE UNDER THIS SECTION ON THE BASIS
- 9 THAT TREATMENT IS EDUCATIONAL OR HABILITATIVE IN NATURE.
- 10 (C) EXCEPT AS OTHERWISE PROVIDED IN THIS SUBDIVISION, SUBJECT

- 1 COVERAGE UNDER THIS SECTION TO DOLLAR LIMITS, COPAYS, DEDUCTIBLES,
- 2 OR COINSURANCE PROVISIONS THAT DO NOT APPLY TO PHYSICAL ILLNESS
- 3 GENERALLY. COVERAGE UNDER THIS SECTION FOR TREATMENT OF AUTISM
- 4 SPECTRUM DISORDERS MAY BE LIMITED TO A MEMBER THROUGH 18 YEARS OF
- 5 AGE AND MAY BE SUBJECT TO A MAXIMUM ANNUAL BENEFIT AS FOLLOWS:
- 6 (i) FOR A COVERED MEMBER THROUGH 6 YEARS OF AGE, \$50,000.00.
- 7 (ii) FOR A COVERED MEMBER FROM 7 YEARS OF AGE THROUGH 12 YEARS
- 8 OF AGE, \$40,000.00.
- 9 (iii) FOR A COVERED MEMBER FROM 13 YEARS OF AGE THROUGH 18 YEARS
- 10 OF AGE, \$30,000.00.
- 11 (2) THIS SECTION DOES NOT LIMIT BENEFITS THAT ARE OTHERWISE
- 12 AVAILABLE TO A MEMBER UNDER A CERTIFICATE. A HEALTH CARE
- 13 CORPORATION SHALL UTILIZE EVIDENCE-BASED CARE AND MANAGED CARE
- 14 COST-CONTAINMENT PRACTICES PURSUANT TO THE HEALTH CARE
- 15 CORPORATION'S PROCEDURES SO LONG AS THAT CARE AND THOSE PRACTICES
- 16 ARE CONSISTENT WITH THIS SECTION. THE COVERAGE UNDER THIS SECTION
- 17 MAY BE SUBJECT TO OTHER GENERAL EXCLUSIONS AND LIMITATIONS OF THE
- 18 CERTIFICATE, INCLUDING, BUT NOT LIMITED TO, COORDINATION OF
- 19 BENEFITS, PARTICIPATING PROVIDER REQUIREMENTS, RESTRICTIONS ON
- 20 SERVICES PROVIDED BY FAMILY OR HOUSEHOLD MEMBERS, UTILIZATION
- 21 REVIEW OF HEALTH CARE SERVICES INCLUDING REVIEW OF MEDICAL
- 22 NECESSITY, CASE MANAGEMENT, AND OTHER MANAGED CARE PROVISIONS.
- 23 (3) IF A MEMBER IS RECEIVING TREATMENT FOR AN AUTISM SPECTRUM
- 24 DISORDER, A HEALTH CARE CORPORATION MAY, AS A CONDITION TO
- 25 PROVIDING THE COVERAGE UNDER THIS SECTION, DO ALL OF THE FOLLOWING:
- 26 (A) REQUIRE A REVIEW OF THAT TREATMENT CONSISTENT WITH CURRENT
- 27 PROTOCOLS AND MAY REQUIRE A TREATMENT PLAN. IF REQUESTED BY THE

- 1 HEALTH CARE CORPORATION, THE COST OF TREATMENT REVIEW SHALL BE
- 2 BORNE BY THE HEALTH CARE CORPORATION.
- 3 (B) REQUEST THE RESULTS OF THE AUTISM DIAGNOSTIC OBSERVATION
- 4 SCHEDULE THAT HAS BEEN USED IN THE DIAGNOSIS OF AN AUTISM SPECTRUM
- 5 DISORDER FOR THAT MEMBER.
- 6 (C) REQUEST THAT THE AUTISM DIAGNOSTIC OBSERVATION SCHEDULE BE
- 7 PERFORMED ON THAT MEMBER NOT MORE FREQUENTLY THAN ONCE EVERY 3
- 8 YEARS.
- 9 (D) REQUEST THAT AN ANNUAL DEVELOPMENT EVALUATION BE CONDUCTED
- 10 AND THE RESULTS OF THAT ANNUAL DEVELOPMENT EVALUATION BE SUBMITTED
- 11 TO THE HEALTH CARE CORPORATION.
- 12 (4) BEGINNING JANUARY 1, 2014, A QUALIFIED HEALTH PLAN OFFERED
- 13 THROUGH AN AMERICAN HEALTH BENEFIT EXCHANGE ESTABLISHED IN THIS
- 14 STATE PURSUANT TO THE FEDERAL ACT IS NOT REQUIRED TO PROVIDE
- 15 COVERAGE UNDER THIS SECTION TO THE EXTENT THAT IT EXCEEDS COVERAGE
- 16 THAT IS INCLUDED IN THE ESSENTIAL HEALTH BENEFITS AS REQUIRED
- 17 PURSUANT TO THE FEDERAL ACT. AS USED IN THIS SUBSECTION, "FEDERAL
- 18 ACT" MEANS THE FEDERAL PATIENT PROTECTION AND AFFORDABLE CARE ACT,
- 19 PUBLIC LAW 111-148, AS AMENDED BY THE FEDERAL HEALTH CARE AND
- 20 EDUCATION RECONCILIATION ACT OF 2010, PUBLIC LAW 111-152, AND ANY
- 21 REGULATIONS PROMULGATED UNDER THOSE ACTS.
- 22 (5) THIS SECTION DOES NOT REQUIRE THE COVERAGE OF PRESCRIPTION
- 23 DRUGS AND RELATED SERVICES UNLESS THE MEMBER IS COVERED BY A
- 24 PRESCRIPTION DRUG PLAN. THIS SECTION DOES NOT REQUIRE A HEALTH CARE
- 25 CORPORATION TO PROVIDE COVERAGE FOR AUTISM SPECTRUM DISORDERS TO A
- 26 MEMBER UNDER MORE THAN 1 OF ITS CERTIFICATES. IF A MEMBER HAS MORE
- 27 THAN 1 POLICY, CERTIFICATE, OR CONTRACT THAT COVERS AUTISM SPECTRUM

- 1 DISORDERS, THE BENEFITS PROVIDED ARE SUBJECT TO THE LIMITS OF THIS
- 2 SECTION WHEN COORDINATING BENEFITS.
- 3 (6) AS USED IN THIS SECTION:
- 4 (A) "APPLIED BEHAVIOR ANALYSIS" MEANS THE DESIGN,
- 5 IMPLEMENTATION, AND EVALUATION OF ENVIRONMENTAL MODIFICATIONS,
- 6 USING BEHAVIORAL STIMULI AND CONSEQUENCES, TO PRODUCE SIGNIFICANT
- 7 IMPROVEMENT IN HUMAN BEHAVIOR, INCLUDING THE USE OF DIRECT
- 8 OBSERVATION, MEASUREMENT, AND FUNCTIONAL ANALYSIS OF THE
- 9 RELATIONSHIP BETWEEN ENVIRONMENT AND BEHAVIOR.
- 10 (B) "AUTISM DIAGNOSTIC OBSERVATION SCHEDULE" MEANS THE
- 11 PROTOCOL AVAILABLE THROUGH WESTERN PSYCHOLOGICAL SERVICES FOR
- 12 DIAGNOSING AND ASSESSING AUTISM SPECTRUM DISORDERS OR ANY OTHER
- 13 STANDARDIZED DIAGNOSTIC MEASURE FOR AUTISM SPECTRUM DISORDERS THAT
- 14 IS APPROVED BY THE COMMISSIONER, IF THE COMMISSIONER DETERMINES
- 15 THAT THE DIAGNOSTIC MEASURE IS RECOGNIZED BY THE HEALTH CARE
- 16 INDUSTRY AND IS AN EVIDENCE-BASED DIAGNOSTIC TOOL.
- 17 (C) "AUTISM SPECTRUM DISORDERS" MEANS ANY OF THE FOLLOWING
- 18 PERVASIVE DEVELOPMENTAL DISORDERS AS DEFINED BY THE DIAGNOSTIC AND
- 19 STATISTICAL MANUAL:
- 20 (i) AUTISTIC DISORDER.
- (ii) ASPERGER'S DISORDER.
- 22 (iii) PERVASIVE DEVELOPMENTAL DISORDER NOT OTHERWISE SPECIFIED.
- 23 (D) "BEHAVIORAL HEALTH TREATMENT" MEANS EVIDENCE-BASED
- 24 COUNSELING AND TREATMENT PROGRAMS, INCLUDING APPLIED BEHAVIOR
- 25 ANALYSIS, THAT MEET BOTH OF THE FOLLOWING REQUIREMENTS:
- 26 (i) ARE NECESSARY TO DEVELOP, MAINTAIN, OR RESTORE, TO THE
- 27 MAXIMUM EXTENT PRACTICABLE, THE FUNCTIONING OF AN INDIVIDUAL.

- 1 (ii) ARE PROVIDED OR SUPERVISED BY A BOARD CERTIFIED BEHAVIOR
- 2 ANALYST OR A LICENSED PSYCHOLOGIST SO LONG AS THE SERVICES
- 3 PERFORMED ARE COMMENSURATE WITH THE PSYCHOLOGIST'S FORMAL
- 4 UNIVERSITY TRAINING AND SUPERVISED EXPERIENCE.
- 5 (E) "DIAGNOSIS OF AUTISM SPECTRUM DISORDERS" MEANS
- 6 ASSESSMENTS, EVALUATIONS, OR TESTS, INCLUDING THE AUTISM DIAGNOSTIC
- 7 OBSERVATION SCHEDULE, PERFORMED BY A LICENSED PHYSICIAN OR A
- 8 LICENSED PSYCHOLOGIST TO DIAGNOSE WHETHER AN INDIVIDUAL HAS 1 OF
- 9 THE AUTISM SPECTRUM DISORDERS.
- 10 (F) "DIAGNOSTIC AND STATISTICAL MANUAL" OR "DSM" MEANS THE
- 11 DIAGNOSTIC AND STATISTICAL MANUAL OF MENTAL DISORDERS PUBLISHED BY
- 12 THE AMERICAN PSYCHIATRIC ASSOCIATION OR OTHER MANUAL THAT CONTAINS
- 13 COMMON LANGUAGE AND STANDARD CRITERIA FOR THE CLASSIFICATION OF
- 14 MENTAL DISORDERS AND THAT IS APPROVED BY THE COMMISSIONER, IF THE
- 15 COMMISSIONER DETERMINES THAT THE MANUAL IS RECOGNIZED BY THE HEALTH
- 16 CARE INDUSTRY AND THE CLASSIFICATION OF MENTAL DISORDERS IS AT
- 17 LEAST AS COMPREHENSIVE AS THE MANUAL PUBLISHED BY THE AMERICAN
- 18 PSYCHIATRIC ASSOCIATION ON THE EFFECTIVE DATE OF THIS SECTION.
- 19 (G) "PHARMACY CARE" MEANS MEDICATIONS PRESCRIBED BY A LICENSED
- 20 PHYSICIAN AND RELATED SERVICES PERFORMED BY A LICENSED PHARMACIST
- 21 AND ANY HEALTH-RELATED SERVICES CONSIDERED MEDICALLY NECESSARY TO
- 22 DETERMINE THE NEED OR EFFECTIVENESS OF THE MEDICATIONS.
- 23 (H) "PSYCHIATRIC CARE" MEANS EVIDENCE-BASED DIRECT OR
- 24 CONSULTATIVE SERVICES PROVIDED BY A PSYCHIATRIST LICENSED IN THE
- 25 STATE IN WHICH THE PSYCHIATRIST PRACTICES.
- 26 (I) "PSYCHOLOGICAL CARE" MEANS EVIDENCE-BASED DIRECT OR
- 27 CONSULTATIVE SERVICES PROVIDED BY A PSYCHOLOGIST LICENSED IN THE

- 1 STATE IN WHICH THE PSYCHOLOGIST PRACTICES.
- 2 (J) "THERAPEUTIC CARE" MEANS EVIDENCE-BASED SERVICES PROVIDED
- 3 BY A LICENSED OR CERTIFIED SPEECH THERAPIST, OCCUPATIONAL
- 4 THERAPIST, PHYSICAL THERAPIST, OR SOCIAL WORKER.
- 5 (K) "TREATMENT OF AUTISM SPECTRUM DISORDERS" MEANS EVIDENCE-
- 6 BASED TREATMENT THAT INCLUDES THE FOLLOWING CARE PRESCRIBED OR
- 7 ORDERED FOR AN INDIVIDUAL DIAGNOSED WITH 1 OF THE AUTISM SPECTRUM
- 8 DISORDERS BY A LICENSED PHYSICIAN OR A LICENSED PSYCHOLOGIST WHO
- 9 DETERMINES THE CARE TO BE MEDICALLY NECESSARY:
- 10 (i) BEHAVIORAL HEALTH TREATMENT.
- 11 (ii) PHARMACY CARE.
- 12 (iii) PSYCHIATRIC CARE.
- 13 (iv) PSYCHOLOGICAL CARE.
- 14 (v) THERAPEUTIC CARE.
- 15 (1) "TREATMENT PLAN" MEANS A WRITTEN, COMPREHENSIVE, AND
- 16 INDIVIDUALIZED INTERVENTION PLAN THAT INCORPORATES SPECIFIC
- 17 TREATMENT GOALS AND OBJECTIVES AND THAT IS DEVELOPED BY A BOARD
- 18 CERTIFIED OR LICENSED PROVIDER WHO HAS THE APPROPRIATE CREDENTIALS
- 19 AND WHO IS OPERATING WITHIN HIS OR HER SCOPE OF PRACTICE, WHEN THE
- 20 TREATMENT OF AN AUTISM SPECTRUM DISORDER IS FIRST PRESCRIBED OR
- 21 ORDERED BY A LICENSED PHYSICIAN OR LICENSED PSYCHOLOGIST AS
- 22 DESCRIBED IN SUBDIVISION (K).
- 23 Enacting section 1. This amendatory act applies to
- 24 certificates delivered, executed, issued, amended, adjusted, or
- 25 renewed in this state beginning 180 days after the date this
- 26 amendatory act is enacted into law.
- 27 Enacting section 2. This amendatory act does not take effect

- unless all of the following bills of the 96th Legislature are 1
- 2 enacted into law:
- (a) Senate Bill No. 415. 3
- (b) Senate Bill No. 981.