

# HOUSE BILL NO. 4657

April 15, 2021, Introduced by Rep. Kahle and referred to the Committee on Health Policy.

A bill to amend 1956 PA 218, entitled  
"The insurance code of 1956,"  
by amending section 3406s (MCL 500.3406s), as amended by 2016 PA  
276.

**THE PEOPLE OF THE STATE OF MICHIGAN ENACT:**

1           Sec. 3406s. (1) Except as otherwise provided in this section,  
2 an insurer that delivers, issues for delivery, or renews in this  
3 state a health insurance policy shall provide coverage for the  
4 diagnosis of autism spectrum disorders and treatment of autism

1 spectrum disorders. An insurer shall not do any of the following:

2 (a) Terminate coverage or refuse to deliver, execute, issue,  
3 amend, adjust, or renew coverage solely because an individual is  
4 diagnosed with, or has received treatment for, an autism spectrum  
5 disorder.

6 (b) Limit the number of visits an insured or enrollee may use  
7 for treatment of autism spectrum disorders covered under this  
8 section.

9 (c) Deny or limit coverage under this section on the basis  
10 that treatment is educational or habilitative in nature.

11 (d) Except as otherwise provided in this subdivision, subject  
12 coverage under this section to dollar limits, copays, deductibles,  
13 or coinsurance provisions that do not apply to physical illness  
14 generally. An insurer may limit coverage under this section for  
15 treatment of autism spectrum disorders to an insured or enrollee  
16 through 18 years of age and may subject the coverage to a maximum  
17 annual benefit as follows:

18 (i) For a covered insured or enrollee through 6 years of age,  
19 \$50,000.00.

20 (ii) For a covered insured or enrollee from 7 years of age  
21 through 12 years of age, \$40,000.00.

22 (iii) For a covered insured or enrollee from 13 years of age  
23 through 18 years of age, \$30,000.00.

24 (2) This section does not limit benefits that are otherwise  
25 available to an insured or enrollee under a policy, contract, or  
26 certificate. An insurer shall utilize evidence-based care and  
27 managed care cost-containment practices pursuant to the insurer's  
28 procedures if the care and practices are consistent with this  
29 section. An insurer may subject coverage under this section to

1 other general exclusions and limitations of the policy, contract,  
2 or certificate, including, but not limited to, coordination of  
3 benefits, affiliated provider requirements, restrictions on  
4 services provided by family or household members, utilization  
5 review of health care services including review of medical  
6 necessity, case management, and other managed care provisions.

7 (3) If an insured or enrollee is receiving treatment for an  
8 autism spectrum disorder, an insurer may, as a condition to  
9 providing the coverage under this section, do all of the following:

10 (a) Require a review of the treatment consistent with current  
11 protocols and may require a treatment plan. If requested by the  
12 insurer, the cost of treatment review must be borne by the insurer.

13 (b) Request the results of the autism diagnostic observation  
14 schedule that has been used in the diagnosis of an autism spectrum  
15 disorder for the insured or enrollee.

16 (c) Request that the autism diagnostic observation schedule be  
17 performed on the insured or enrollee not more frequently than once  
18 every 3 years.

19 (d) Request that an annual development evaluation be conducted  
20 and the results of the annual development evaluation be submitted  
21 to the insurer.

22 (4) A qualified health plan offered through an American health  
23 benefit exchange established in this state pursuant to the federal  
24 act is not required to provide coverage under this section to the  
25 extent that it exceeds coverage that is included in the essential  
26 health benefits as required pursuant to the federal act. As used in  
27 this subsection, "federal act" means the patient protection and  
28 affordable care act, Public Law 111-148, as amended by the health  
29 care and education reconciliation act of 2010, Public Law 111-152,

1 and any regulations promulgated under those acts.

2 (5) This section does not apply to a short-term or 1-time  
3 limited duration policy or certificate of no longer than 6 months  
4 as described in section 2213b.

5 (6) This section does not require the coverage of prescription  
6 drugs and related services unless the insured or enrollee is  
7 covered by a prescription drug plan. This section does not require  
8 an insurer to provide coverage for autism spectrum disorders to an  
9 insured or enrollee under more than 1 of its health insurance  
10 policies. If an insured or enrollee has more than 1 health  
11 insurance policy that covers autism spectrum disorders, the  
12 benefits provided are subject to the limits of this section when  
13 coordinating benefits.

14 (7) As used in this section:

15 (a) "Applied behavior analysis" means the design,  
16 implementation, and evaluation of environmental modifications,  
17 using behavioral stimuli and consequences, to produce significant  
18 improvement in human behavior, including the use of direct  
19 observation, measurement, and functional analysis of the  
20 relationship between environment and behavior.

21 (b) "Autism diagnostic observation schedule" means the  
22 protocol available through Western Psychological Services for  
23 diagnosing and assessing autism spectrum disorders or any other  
24 standardized diagnostic measure for autism spectrum disorders that  
25 is approved by the director, if the director determines that the  
26 diagnostic measure is recognized by the health care industry and is  
27 an evidence-based diagnostic tool.

28 (c) "Autism spectrum disorders" means any of the following  
29 pervasive developmental disorders as defined by the Diagnostic and

1 Statistical Manual:

2 (i) Autistic disorder.

3 (ii) Asperger's disorder.

4 (iii) Pervasive developmental disorder not otherwise specified.

5 (d) "Behavioral health treatment" means evidence-based  
6 counseling and treatment programs, including applied behavior  
7 analysis, that meet both of the following requirements:

8 (i) Are necessary to develop, maintain, or restore, to the  
9 maximum extent practicable, the functioning of an individual.

10 (ii) Are provided or supervised by a board certified behavior  
11 analyst or a licensed psychologist if the services performed are  
12 commensurate with the psychologist's formal university training and  
13 supervised experience.

14 (e) "Diagnosis of autism spectrum disorders" means  
15 assessments, evaluations, or tests, including the autism diagnostic  
16 observation schedule, performed by a licensed physician or a  
17 licensed psychologist to diagnose whether an individual has 1 of  
18 the autism spectrum disorders.

19 (f) "Diagnostic and Statistical Manual" means the Diagnostic  
20 and Statistical Manual of Mental Disorders published by the  
21 American Psychiatric Association or another manual that contains  
22 common language and standard criteria for the classification of  
23 mental disorders and that is approved by the director, if the  
24 director determines that the manual is recognized by the health  
25 care industry and the classification of mental disorders is at  
26 least as comprehensive as the manual published by the American  
27 Psychiatric Association on April 18, 2012.

28 (g) **"Parent implemented model of intervention" means an**  
29 **evidence-based model in which parents directly use individualized**

1 intervention practices with their children to increase positive  
 2 learning opportunities and the acquisition of important skills, and  
 3 in which parents learn to implement these practices in their home  
 4 or community, or both, through a structured parent training  
 5 program. A supervising health professional must regularly review  
 6 and consider whether the model is being appropriately applied,  
 7 whether it is effective, and whether it continues to be medically  
 8 necessary. The review and consideration under this subdivision must  
 9 be done in person or by use of 2-way real-time audiovisual  
 10 technology.

11 (h) ~~(g)~~—"Pharmacy care" means medications prescribed by a  
 12 licensed physician and related services performed by a licensed  
 13 pharmacist and any health-related services considered medically  
 14 necessary to determine the need or effectiveness of the  
 15 medications.

16 (i) ~~(h)~~—"Psychiatric care" means evidence-based direct or  
 17 consultative services provided by a psychiatrist licensed in the  
 18 state in which the psychiatrist practices.

19 (j) ~~(i)~~—"Psychological care" means evidence-based direct or  
 20 consultative services provided by a psychologist licensed in the  
 21 state in which the psychologist practices.

22 (k) ~~(j)~~—"Therapeutic care" means evidence-based services  
 23 provided by a licensed or certified speech therapist, occupational  
 24 therapist, physical therapist, or social worker.

25 (l) ~~(k)~~—"Treatment of autism spectrum disorders" means  
 26 evidence-based treatment that includes the following care  
 27 prescribed or ordered for an individual diagnosed with 1 of the  
 28 autism spectrum disorders by a licensed physician or a licensed  
 29 psychologist who determines the care to be medically necessary:

1 (i) Behavioral health treatment.

2 (ii) Pharmacy care.

3 (iii) Psychiatric care.

4 (iv) Psychological care.

5 (v) Therapeutic care.

6 **(vi) Parent implemented model of intervention.**

7 **(m)** ~~(l)~~—"Treatment plan" means a written, comprehensive, and  
8 individualized intervention plan that incorporates specific  
9 treatment goals and objectives and that is developed by a board  
10 certified or licensed provider who has the appropriate credentials  
11 and who is operating within his or her scope of practice, when the  
12 treatment of an autism spectrum disorder is first prescribed or  
13 ordered by a licensed physician or licensed psychologist as  
14 described in subdivision ~~(k)~~ **(l)**.