

By the Committees on Governmental Oversight and Accountability; Banking and Insurance; and Health Regulation; and Senators Ring, Gardiner, and Fasano

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1                   A bill to be entitled  
2           An act relating to autism and other developmental  
3           disabilities; creating s. 381.986, F.S.; requiring  
4           that a physician refer a minor to an appropriate  
5           specialist for screening for autism spectrum disorder  
6           under certain circumstances; defining the term  
7           "appropriate specialist"; amending ss. 627.6686 and  
8           641.31098, F.S.; defining the terms "developmental  
9           disability" and "direct patient access"; providing  
10          health insurance coverage for individuals with certain  
11          developmental disabilities; requiring certain insurers  
12          and health maintenance organizations to provide direct  
13          patient access to an appropriate specialist for the  
14          screening, evaluation, or diagnosis of autism spectrum  
15          disorder or other developmental disabilities;  
16          requiring the insurer's policy or the health  
17          maintenance organization's contract to provide a  
18          minimum number of visits per year for the screening,  
19          evaluation, or diagnosis of autism spectrum disorder  
20          or other developmental disabilities; revising the  
21          effective dates of certain enforcement provisions;  
22          providing a declaration of important state interest;  
23          providing applicability; providing an effective date.

24  
25 Be It Enacted by the Legislature of the State of Florida:

26  
27           Section 1. Section 381.986, Florida Statutes, is created to  
28 read:

29           381.986 Screening for autism spectrum disorder.-

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30       (1) If the parent or legal guardian of a minor believes  
31 that the minor exhibits symptoms of autism spectrum disorder as  
32 defined in ss. 627.6686 and 641.31098, the parent or legal  
33 guardian may report his or her observation to a physician  
34 licensed in this state. The physician shall perform screening in  
35 accordance with American Academy of Pediatrics' guidelines. If  
36 the physician determines that referral to a specialist is  
37 medically necessary, he or she shall refer the minor to an  
38 appropriate specialist to determine whether the minor meets  
39 diagnostic criteria for autism spectrum disorder as defined in  
40 ss. 627.6686 and 641.31098. If the physician determines that  
41 referral to a specialist is not medically necessary, the  
42 physician shall inform the parent or legal guardian that they  
43 can self-refer to the Early Steps intervention program or other  
44 specialist in autism. This section does not apply to a physician  
45 providing care under s. 395.1041.

46       (2) As used in this section, the term "appropriate  
47 specialist" means a qualified professional who is experienced in  
48 the evaluation of autism spectrum disorder as defined in ss.  
49 627.6686 and 641.31098, is licensed in this state, and has  
50 training in validated diagnostic tools. The term includes, but  
51 is not limited to:

- 52       (a) A psychologist;  
53       (b) A psychiatrist;  
54       (c) A neurologist;  
55       (d) A developmental or behavioral pediatrician; or  
56       (e) A professional whose licensure, by rule, is deemed  
57 appropriate by the Children's Medical Services Early Steps  
58 Program within the Department of Health.

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59 Section 2. Section 627.6686, Florida Statutes, is amended  
60 to read:

61 627.6686 Coverage for individuals with developmental  
62 disabilities ~~autism spectrum disorder required; exception.~~—

63 (1) This section and s. 641.31098 may be cited as the  
64 “Steven A. Geller Autism Coverage Act.”

65 (2) As used in this section, the term:

66 (a) “Applied behavior analysis” means the design,  
67 implementation, and evaluation of environmental modifications,  
68 using behavioral stimuli and consequences, to produce socially  
69 significant improvement in human behavior, including, but not  
70 limited to, the use of direct observation, measurement, and  
71 functional analysis of the relations between environment and  
72 behavior.

73 (b) “Autism spectrum disorder” means any of the following  
74 disorders as defined in the most recent edition of the  
75 Diagnostic and Statistical Manual of Mental Disorders of the  
76 American Psychiatric Association:

- 77 1. Autistic disorder.  
78 2. Asperger’s syndrome.  
79 3. Pervasive developmental disorder not otherwise  
80 specified.

81 (c) “Developmental disability” means a disorder or syndrome  
82 attributable to cerebral palsy or Down syndrome, which manifests  
83 before the age of 18 years and constitutes a substantial  
84 handicap that can reasonably be expected to continue  
85 indefinitely. As used in this section:

- 86 1. “Cerebral palsy” has the same meaning as in s. 393.063.  
87 2. “Down syndrome” means a disorder caused by the presence

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88 of an extra chromosome 21.

89 (d) "Direct patient access" means the ability of an insured  
90 to obtain services from an in-network provider without a  
91 referral or other authorization before receiving services.

92 (e)~~(e)~~ "Eligible individual" means an individual under 18  
93 years of age or an individual 18 years of age or older who is in  
94 high school and who has been diagnosed as having a developmental  
95 disability at 8 years of age or younger.

96 (f)~~(d)~~ "Health insurance plan" means a group health  
97 insurance policy or group health benefit plan offered by an  
98 insurer which includes the state group insurance program  
99 provided under s. 110.123. The term does not include a ~~any~~  
100 health insurance plan offered in the individual market, a ~~any~~  
101 health insurance plan that is individually underwritten, or a  
102 ~~any~~ health insurance plan provided to a small employer.

103 (g)~~(e)~~ "Insurer" means an insurer providing health  
104 insurance coverage, which is licensed to engage in the business  
105 of insurance in this state and is subject to insurance  
106 regulation.

107 (3) A health insurance plan must ~~issued or renewed on or~~  
108 ~~after April 1, 2009, shall~~ provide coverage to an eligible  
109 individual for:

110 (a) Direct patient access to one appropriate specialist, as  
111 defined in s. 381.986, for a minimum of three visits per policy  
112 year for the screening for, evaluation of, or diagnosis of  
113 autism spectrum disorder or other developmental disability.

114 (b)~~(a)~~ Well-baby and well-child screening for diagnosing  
115 the presence of autism spectrum disorder.

116 (c)~~(b)~~ Treatment of autism spectrum disorder or other

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117 developmental disability through speech therapy, occupational  
118 therapy, physical therapy, and applied behavior analysis.  
119 Applied behavior analysis services shall be provided by an  
120 individual certified pursuant to s. 393.17 or an individual  
121 licensed under chapter 490 or chapter 491.

122 (4) The coverage required pursuant to subsection (3) is  
123 subject to the following requirements:

124 (a) Coverage shall be limited to treatment that is  
125 prescribed by the insured's treating physician in accordance  
126 with a treatment plan.

127 (b) Coverage for the services described in subsection (3)  
128 shall be limited to \$36,000 annually and may not exceed \$200,000  
129 in total lifetime benefits.

130 (c) Coverage may not be denied on the basis that provided  
131 services are habilitative in nature.

132 (d) Coverage may be subject to other general exclusions and  
133 limitations of the insurer's policy or plan, including, but not  
134 limited to, coordination of benefits, participating provider  
135 requirements, restrictions on services provided by family or  
136 household members, and utilization review of health care  
137 services, including the review of medical necessity, case  
138 management, and other managed care provisions.

139 (5) The coverage required pursuant to subsection (3) may  
140 not be subject to dollar limits, deductibles, or coinsurance  
141 provisions that are less favorable to an insured than the dollar  
142 limits, deductibles, or coinsurance provisions that apply to  
143 physical illnesses that are generally covered under the health  
144 insurance plan, except as otherwise provided in subsection (4).

145 (6) An insurer may not deny or refuse to issue coverage for

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146 medically necessary services, refuse to contract with, or refuse  
147 to renew or reissue or otherwise terminate or restrict coverage  
148 for an individual because the individual is diagnosed as having  
149 a developmental disability.

150 (7) The treatment plan required pursuant to subsection (4)  
151 shall include all elements necessary for the health insurance  
152 plan to appropriately pay claims. These elements include, but  
153 are not limited to, a diagnosis, the proposed treatment by type,  
154 the frequency and duration of treatment, the anticipated  
155 outcomes stated as goals, the frequency with which the treatment  
156 plan will be updated, and the signature of the treating  
157 physician.

158 (8) Beginning January 1, 2011, the maximum benefit under  
159 paragraph (4) (b) shall be adjusted annually on January 1 of each  
160 calendar year to reflect any change from the previous year in  
161 the medical component of the then current Consumer Price Index  
162 for all urban consumers, published by the Bureau of Labor  
163 Statistics of the United States Department of Labor.

164 (9) This section may not be construed as limiting benefits  
165 and coverage otherwise available to an insured under a health  
166 insurance plan.

167 (10) The Office of Insurance Regulation may not enforce  
168 this section against an insurer that becomes ~~is~~ a signatory ~~no~~  
169 ~~later than April 1, 2009,~~ to the developmental disabilities  
170 compact established under s. 624.916 by July 1, 2010. The Office  
171 of Insurance Regulation shall enforce this section against an  
172 insurer that is a signatory to the compact established under s.  
173 624.916 if the insurer has not complied with the terms of the  
174 compact for all health insurance plans by April 1, 2010.

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175 However, any provisions of this section which are amended  
176 effective July 1, 2010, may not be enforced retroactively.

177 Section 3. Subsections (2) and (3) of section 641.31098,  
178 Florida Statutes, are amended to read:

179 641.31098 Coverage for individuals with developmental  
180 disabilities.—

181 (2) As used in this section, the term:

182 (a) "Applied behavior analysis" means the design,  
183 implementation, and evaluation of environmental modifications,  
184 using behavioral stimuli and consequences, to produce socially  
185 significant improvement in human behavior, including, but not  
186 limited to, the use of direct observation, measurement, and  
187 functional analysis of the relations between environment and  
188 behavior.

189 (b) "Autism spectrum disorder" means any of the following  
190 disorders as defined in the most recent edition of the  
191 Diagnostic and Statistical Manual of Mental Disorders of the  
192 American Psychiatric Association:

- 193 1. Autistic disorder.
- 194 2. Asperger's syndrome.
- 195 3. Pervasive developmental disorder not otherwise  
196 specified.

197 (c) "Developmental disability" means a disorder or syndrome  
198 attributable to cerebral palsy or Down syndrome, which manifests  
199 before the age of 18 years and constitutes a substantial  
200 handicap that can reasonably be expected to continue  
201 indefinitely. As used in this section:

- 202 1. "Cerebral palsy" has the same meaning as in s. 393.063.
- 203 2. "Down syndrome" means a disorder caused by the presence

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204 of an extra chromosome 21.

205 (d) "Direct patient access" means the ability of an insured  
206 to obtain services from an in-network provider without a  
207 referral or other authorization before receiving services.

208 (e)~~(e)~~ "Eligible individual" means an individual under 18  
209 years of age or an individual 18 years of age or older who is in  
210 high school and who has been diagnosed as having a developmental  
211 disability at 8 years of age or younger.

212 (f)~~(d)~~ "Health maintenance contract" means a group health  
213 maintenance contract offered by a health maintenance  
214 organization. The ~~This~~ term does not include a health  
215 maintenance contract offered in the individual market, a health  
216 maintenance contract that is individually underwritten, or a  
217 health maintenance contract provided to a small employer.

218 (3) A health maintenance contract must ~~issued or renewed on~~  
219 ~~or after April 1, 2009,~~ shall provide coverage to an eligible  
220 individual for:

221 (a) Direct patient access to one appropriate specialist, as  
222 defined in s. 381.986, for a minimum of three visits per policy  
223 year for the screening for, evaluation of, or diagnosis of  
224 autism spectrum disorder or other developmental disability.

225 (b)~~(a)~~ Well-baby and well-child screening for diagnosing  
226 the presence of autism spectrum disorder.

227 (c)~~(b)~~ Treatment of autism spectrum disorder or other  
228 developmental disability through speech therapy, occupational  
229 therapy, physical therapy, and applied behavior analysis  
230 services. Applied behavior analysis services shall be provided  
231 by an individual certified pursuant to s. 393.17 or an  
232 individual licensed under chapter 490 or chapter 491.



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233           Section 4. The Legislature finds that the provision of  
234 accessible and affordable quality health care permits all people  
235 to lead productive and meaningful lives, and, to this end, it  
236 further finds that this act fulfills an important state  
237 interest.

238           Section 5. This act shall take effect July 1, 2010, and  
239 applies to policies issued or renewed on or after that date.