

28 **31A-22-642**, Utah Code Annotated 1953

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30 *Be it enacted by the Legislature of the state of Utah:*

31 Section 1. Section **31A-22-642** is enacted to read:

32 **31A-22-642. Insurance coverage for autism spectrum disorder.**

33 (1) As used in this section:

34 (a) "Applied behavior analysis" means the design, implementation, and evaluation of
 35 environmental modifications, using behavioral stimuli and consequences, to produce socially
 36 significant improvement in human behavior, including the use of direct observation,
 37 measurement, and functional analysis of the relationship between environment and behavior.

38 (b) "Autism spectrum disorder" means any of the pervasive developmental disorders or
 39 autism spectrum disorders as defined by ~~§~~→ [the most recent] an accepted ←~~§~~ edition of the
 39a Diagnostic and
 40 Statistical Manual of Mental Disorders (DSM).

41 (c) "Behavioral health treatment" means counseling and treatment programs, including
 42 applied behavior analysis, that are:

43 (i) necessary to develop, maintain, or restore, to the maximum extent practicable, the
 44 functioning of an individual; and

45 (ii) provided or supervised by a:

46 (A) board certified behavior analyst; or

47 (B) ~~§~~→ [licensed psychologist so long as the services performed are commensurate with the
 48 psychologist's formal university training and supervised experience] a person licensed under Title
 48a 58, Division of Occupational and Professional Licensing, whose scope of practice includes
 48b mental health services ←~~§~~ .

49 (d) "Diagnosis of autism spectrum disorder" means medically necessary assessments,
 50 evaluations, or tests to diagnose whether an individual has an autism spectrum disorder.

51 (e) "Pharmacy care" means medications prescribed by a licensed physician and any
 52 health-related services considered medically necessary to determine the need or effectiveness
 53 of the medications.

54 (f) "Psychiatric care" means direct or consultative services provided by a psychiatrist
 55 licensed in the state in which the psychiatrist practices.

56 (g) "Psychological care" means direct or consultative services provided by a
 57 psychologist licensed in the state in which the psychologist practices.

58 (h) "Therapeutic care" means services provided by licensed or certified speech

59 therapists, occupational therapists, or physical therapists.

60 (i) "Treatment for autism spectrum disorder":

61 (i) means evidence-based care and related equipment prescribed or ordered for an
62 individual diagnosed with an autism spectrum disorder by a licensed physician or a licensed
63 psychologist who determines the care to be medically necessary; and

64 (ii) includes:

65 (A) behavioral health treatment, provided or supervised by a person described in
66 Subsection (1)(c)(ii);

67 (B) pharmacy care;

68 (C) psychiatric care;

69 (D) psychological care; and

70 (E) therapeutic care.

71 (2) Notwithstanding the provisions of Section 31A-22-618.5, a health benefit plan
72 entered into or renewed on or after July 1, ~~§~~→ [2013] 2014 ←~~§~~, shall provide coverage for the
72a ~~§~~→ **diagnosis and** ←~~§~~ treatment of
73 autism spectrum disorder in accordance with the requirements of this section and the rules
74 made by the commissioner under this section.

75 (3) The commissioner may adopt rules in accordance with Title 63G, Chapter 3, Utah
76 Administrative Rulemaking Act, to set the minimum standards of coverage for the treatment of
77 autism spectrum disorder.

78 (4) Subject to Subsection (5), the rules described in Subsection (3) shall establish
79 durational limits, amount limits, deductibles, copayments, and coinsurance for the treatment of
80 autism spectrum disorder that are similar to, or identical to, the coverage provided for other
81 illnesses or diseases.

82 (5) (a) Subject to Subsection (6), coverage for behavioral health treatment for a person
83 with an autism spectrum disorder is subject to a maximum benefit of:

84 (i) \$36,000 annually for a child who is younger than nine years old; and

85 (ii) \$18,000 annually for a child who is at least nine years old, but younger than 18
86 years old.

87 (b) A health benefit plan providing treatment under Subsection (5)(a) shall include in
88 the plan's provider network both board certified behavior analysts and psychologists qualified
89 under Subsection (1)(c)(ii).