



STATES INCREASE INSURANCE MANDATES FOR AUTISM SERVICES

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On November 1st, Governor Cuomo signed a bill into law that joined New York with 33 other states and the District of Columbia that have laws related to autism and insurance coverage. The NY law takes effect November 1, 2012, for insurance policies issued or renewed after that date. While the new law will require insurers to treat autism on par with other mental health disorders, there is a \$45,000 annual cap on the coverage. Anything beyond that cap would not be covered but would be paid out-of-pocket by the patient. Most of those 34 states, including NY, specifically require (mandate) that insurers cover at least some autism-related services. The others are Arizona, Arkansas, Colorado, Connecticut, Florida, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Massachusetts, Missouri, Montana, Nevada, New Hampshire, New Jersey, New Mexico, Pennsylvania, South Carolina, Texas, Vermont, Virginia, West Virginia and Wisconsin. Other states' laws may require limited coverage for autism-related services under existing mental health coverage or other laws less strict than mandates.

Insurers in the past commonly excluded autism spectrum disorders from coverage because they characterized autism as a type of "developmental disorder," all of which were precluded from coverage. One rationale for the non-coverage was that there was insufficient evidence that treatment resulted in improvement, which was a criterion for coverage. After the Mental Health Parity Act (MHPA) was signed into federal law on September 26, 1996, states began to pass bills that mandated equal treatment of services for all types of mental health disorders, including those relating to autism, on par with similar services covered for medical disorders. Coverage for screenings to detect autism is a common thread in autism-related bills.

What do these bills mean for art therapists? Once a state bill like these expands coverage for autism-related services, art therapists can expand their important services to more people. Those who could benefit from services can afford to become art therapists' clients because their out-of-pocket expenses are substantially lowered through insurance coverage. In addition, each of those clients can require a wide range of services throughout their lives.

Autism-related therapies, such as applied behavior analysis can cost more than \$50,000 per year for one person. In a 2006 study, Harvard School of Public Health estimated a \$ 3.2 million cost for lifetime care of an individual with autism and \$35 billion as the annual cost of care for all individuals with autism. The Centers for Disease Control and Prevention (CDC) estimates that one in 110 children (up to 730,000 people between ages 0 to 21 have an autism spectrum disorder (ASD). Early intervention treatment programs are important. Treatment options may include behavioral and educational interventions, complementary and alternative medicine, dietary changes or medications to manage or relieve the symptoms of autism. According to the Council for Affordable Health Insurance, a state autism mandate increases the cost of health insurance for subscribers in that state by about 1 percent.

For children, there is controversy over how responsibility for autism-related services should be allocated between IDEA-funding, Medicaid funding and private insurance coverage. Concerns continue, as the federal government develops the essential benefits packages for Qualified Health Plans (QHPs) that will soon be offered through state exchanges, under the authority of the recent Patient Protection and Affordable Care Act of 2010. Art therapists with an interest in serving people with autism spectrum disorder can discover the status of legislation on autism-related services in their state and follow developments of state QHPs.

For More Information: Insurance Coverage for Autism May 2011, The National Conference of State Legislatures