S T A T E O F N E W Y O R K

2366--A

2009-2010 Regular Sessions

I N S E N A T E

February 19, 2009

Introduced by Sens. FUSCHILLO, C. JOHNSON, ADAMS, ADDABBO, ALESI, BONACIC, DeFRANCISCO, DIAZ, DILAN, FARLEY, FLANAGAN, FOLEY, GOLDEN, GRIFFO, HANNON, HASSELL-THOMPSON, HUNTLEY, O. JOHNSON, KLEIN, KRUGER, LANZA, LARKIN, LAVALLE, LIBOUS, LITTLE, MARCELLINO, MAZIARZ, McDONALD, MONSERRATE, MONTGOMERY, MORAHAN, NOZZOLIO, ONORATO, OPPENHEIMER, PADAVAN, PARKER, PERKINS, RANZENHOFER, ROBACH, SALAND, SAMPSON, SCHNEIDERMAN, SERRANO, SKELOS, SQUADRON, STACHOWSKI, STAVISKY, STEWART-COUSINS, VALESKY, VOLKER, WINNER, YOUNG -- read twice and ordered printed, and when printed to be committed to the Committee on Insurance -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee

AN ACT to amend the insurance law, in relation to autism spectrum disorders

THE PEOPLE OF THE STATE OF NEW YORK, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. Paragraph 25 of subsection (i) of section 3216 of the insurance law, as added by chapter 557 of the laws of 2006, is amended to read as follows:

(25) Every policy which provides coverage for hospital, surgical, or medical care coverage shall not exclude coverage for diagnosis and treatment of medical conditions otherwise covered by the policy solely because the treatment is provided to diagnose or treat autism spectrum disorder. IN INDIVIDUALS TWENTY-ONE YEARS OF AGE OR LESS, THERE SHALL BE NO LIMITS ON THE NUMBER OF VISITS AN INDIVIDUAL MAY MAKE TO AN AUTISM PROVIDER. COVERAGE UNDER THIS SUBSECTION MAY BE SUBJECT TO COPAYMENT, DEDUCTIBLE AND COINSURANCE PROVISIONS OF A HEALTH INSURANCE POLICY TO THE EXTENT THAT OTHER MEDICAL SERVICE COVERED BY THE HEALTH INSURANCE POLICY ARE SUBJECT TO SUCH PROVISIONS. THIS SUBSECTION SHALL NOT BE CONSTRUED AS LIMITING THE BENEFITS THAT ARE AVAILABLE TO AN INDIVIDUAL UNDER A HEALTH INSURANCE POLICY. COVERAGE FOR APPLIED BEHAVIOR ANALYSIS THERAPY MAY BE SUBJECT TO A MAXIMUM BENEFIT OF THIRTY-SIX THOUSAND

EXPLANATION--Matter in ITALICS (underscored) is new; matter in brackets [ ] is old law to be omitted.

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DOLLARS. AFTER DECEMBER THIRTY-FIRST, TWO THOUSAND ELEVEN, THE SUPERINTENDENT SHALL, ON AN ANNUAL BASIS, ADJUST THE MAXIMUM BENEFIT FOR INFLATION USING THE MEDICAL CARE COMPONENT OF THE UNITED STATES DEPARTMENT OF LABOR CONSUMER PRICE INDEX FOR ALL URBAN CONSUMERS. THE SUPERINTENDENT SHALL SUBMIT THE ADJUSTED MAXIMUM BENEFIT FOR PUBLICATION ANNUALLY NO LATER THAN APRIL FIRST OF EACH CALENDAR YEAR, AND SUCH PUBLISHED ADJUSTED MAXIMUM BENEFIT SHALL BE APPLICABLE IN THE FOLLOWING CALENDAR YEAR TO HEALTH INSURANCE POLICIES SUBJECT TO THIS SECTION. PAYMENTS MADE BY AN INSURER ON BEHALF OF A COVERED INDIVIDUAL FOR ANY CARE, TREATMENT, INTERVENTION, SERVICE OR ITEM UNRELATED TO APPLIED BEHAVIOR ANALYSIS SHALL NOT BE APPLIED TOWARDS ANY MAXIMUM BENEFIT ESTABLISHED PURSUANT TO THIS PARAGRAPH. EXCEPT FOR INPATIENT SERVICES, IF AN INDIVIDUAL IS RECEIVING TREATMENT FOR AUTISM SPECTRUM DISORDERS, AN INSURER SHALL HAVE THE RIGHT TO REQUEST A REVIEW OF SUCH TREATMENT NOT MORE THAN ONCE EVERY TWELVE MONTHS UNLESS SUCH INSURER AND THE INDIVIDUAL'S LICENSED PHYSICIAN OR LICENSED PSYCHOLOGIST AGREE THAT A MORE FREQUENT REVIEW IS NECESSARY. THE COST OF OBTAINING ANY REVIEW SHALL BE BORNE BY THE INSURER.

(A) For purposes of this section[,]:

(I) "autism spectrum disorder" means a neurobiological condition that includes [autism, Asperger syndrome, Rett's syndrome, or] AUTISTIC DISORDER, ASPERGER'S DISORDER, RETT'S DISORDER, RETT'S DISORDER, CHILDHOOD DISINTEGRATIVE DISORDER, AND ANY pervasive developmental disorder NOT OTHERWISE SPECIFIED.

(II) "APPLIED BEHAVIOR ANALYSIS" MEANS THE DESIGN, IMPLEMENTATION, AND EVALUATION OF ENVIRONMENTAL MODIFICATIONS, USING BEHAVIORAL STIMULI AND CONSEQUENCES, TO PRODUCE SOCIALLY SIGNIFICANT IMPROVEMENT IN HUMAN BEHAVIOR, INCLUDING THE USE OF DIRECT OBSERVATION, MEASUREMENT, AND FUNCTIONAL ANALYSIS OF THE RELATIONSHIP BETWEEN ENVIRONMENT AND BEHAVIOR.

(III) "AUTISM SERVICES PROVIDER" MEANS ANY PERSON, ENTITY, OR GROUP THAT PROVIDES TREATMENT OF AUTISM SPECTRUM DISORDERS.

(IV) "DIAGNOSIS OF AUTISM SPECTRUM DISORDERS" MEANS MEDICALLY NECESSARY ASSESSMENT, EVALUATIONS, OR TESTS TO DIAGNOSE WHETHER AN INDIVIDUAL HAS ONE OF THE AUTISM SPECTRUM DISORDERS.

(V) "EVIDENCE-BASED RESEARCH" MEANS RESEARCH THAT APPLIES RIGOROUS, SYSTEMATIC, AND OBJECTIVE PROCEDURES TO OBTAIN VALID KNOWLEDGE RELEVANT TO AUTISM SPECTRUM DISORDERS.

(VI) "HABILITATIVE OR REHABILITATIVE CARE" MEANS PROFESSIONAL, COUNSELING, AND GUIDANCE SERVICES AND TREATMENT PROGRAMS, INCLUDING APPLIED BEHAVIOR ANALYSIS, THAT ARE NECESSARY TO DEVELOP, MAINTAIN, AND RESTORE, TO THE MAXIMUM EXTENT PRACTICABLE, THE FUNCTIONING OF AN INDIVIDUAL.

(VII) "MEDICALLY NECESSARY" MEANS ANY CARE, TREATMENT, INTERVENTION, SERVICE, OR ITEM THAT IS PRESCRIBED, PROVIDED, OR ORDERED BY A LICENSED PHYSICIAN OR A LICENSED PSYCHOLOGIST IN ACCORDANCE WITH ACCEPTED STANDARDS OF PRACTICE AND THAT WILL, OR IS REASONABLY EXPECTED TO, DO ANY OF THE FOLLOWING:

(1) PREVENT THE ONSET OF AN ILLNESS, CONDITION, INJURY, OR DISABILITY;

(2) REDUCE OR AMELIORATE THE PHYSICAL, MENTAL, OR DEVELOPMENTAL EFFECTS OF AN ILLNESS, CONDITION, INJURY, OR DISABILITY; OR

(3) ASSIST TO ACHIEVE OR MAINTAIN MAXIMUM FUNCTIONAL CAPACITY IN PERFORMING DAILY ACTIVITIES, TAKING INTO ACCOUNT BOTH THE FUNCTIONAL CAPACITY OF THE INDIVIDUAL AND THE FUNCTIONAL CAPACITIES THAT ARE APPROPRIATE FOR INDIVIDUALS OF THE SAME AGE.

(VIII) "PHARMACY CARE" MEANS MEDICATIONS PRESCRIBED BY A LICENSED PHYSICIAN AND ANY HEALTH-RELATED SERVICES DEEMED MEDICALLY NECESSARY TO DETERMINE THE NEED OR EFFECTIVENESS OF THE MEDICATIONS.

(IX) "PSYCHIATRIC CARE" MEANS DIRECT OR CONSULTATIVE SERVICES PROVIDED BY A PSYCHIATRIST LICENSED IN THE STATE IN WHICH THE PSYCHIATRIST PRACTICES.

(X) "PSYCHOLOGICAL CARE" MEANS DIRECT OR CONSULTATIVE SERVICES PROVIDED BY A PSYCHOLOGIST LICENSED IN THE STATE IN WHICH THE PSYCHOLOGIST PRACTICES.

(XI) "THERAPEUTIC CARE" MEANS SERVICES PROVIDED BY LICENSED OR CERTIFIED SPEECH THERAPISTS, OCCUPATIONAL THERAPISTS, OR PHYSICAL THERAPISTS.

(XII) "TREATMENT FOR AUTISM SPECTRUM DISORDERS" WILL INCLUDE THE FOLLOWING CARE PRESCRIBED, PROVIDED, OR ORDERED FOR AN INDIVIDUAL DIAGNOSED WITH ONE OF THE AUTISM SPECTRUM DISORDERS BY A LICENSED PHYSICIAN OR A LICENSED PSYCHOLOGIST WHO DETERMINES THE CARE TO BE MEDICALLY NECESSARY:

(1) HABILITATIVE OR REHABILITATIVE CARE;

(2) PHARMACY CARE;

(3) PSYCHIATRIC CARE;

(4) PSYCHOLOGICAL CARE;

(5) THERAPEUTIC CARE; AND

(6) ANY CARE FOR INDIVIDUALS WITH AUTISM SPECTRUM DISORDERS THAT IS DETERMINED BY THE STATE HEALTH DEPARTMENT, BASED UPON ITS REVIEW OF BEST PRACTICES OR EVIDENCE-BASED RESEARCH, TO BE MEDICALLY NECESSARY AND THAT IS PUBLISHED IN THE REGISTER FOR RULEMAKING BY STATE AGENCIES. ANY SUCH CARE, TREATMENT, INTERVENTION, SERVICE, OR ITEM THAT WAS NOT PREVIOUSLY COVERED WILL BE INCLUDED IN ANY HEALTH INSURANCE POLICY DELIVERED, EXECUTED, ISSUED, AMENDED, ADJUSTED, OR RENEWED ON OR AFTER SIXTY DAYS FOLLOWING THE DATE OF ITS PUBLICATION IN THE STATE REGISTER.

(B) THIS PARAGRAPH SHALL NOT BE CONSTRUED TO AFFECT ANY OBLIGATION TO PROVIDE SERVICES TO AN INDIVIDUAL UNDER AN INDIVIDUALIZED FAMILY SERVICE PLAN, AN INDIVIDUALIZED EDUCATION PROGRAM OR AN INDIVIDUALIZED SERVICE PLAN.

S 2. Paragraph 17 of subsection (l) of section 3221 of the insurance law, as added by chapter 557 of the laws of 2006, is amended to read as follows:

(17) A group or blanket accident or health insurance policy or issuing a group or blanket policy for delivery in this state which provides coverage for hospital, surgical, or medical care coverage shall not exclude coverage for diagnosis and treatment of medical conditions otherwise covered by the policy because the treatment is provided to diagnose or treat autism spectrum disorder. IN INDIVIDUALS TWENTY-ONE YEARS OF AGE OR LESS, THERE SHALL BE NO LIMITS ON THE NUMBER OF VISITS AN INDIVIDUAL MAY MAKE TO AN AUTISM PROVIDER. COVERAGE UNDER THIS SUBSECTION MAY BE SUBJECT TO COPAYMENT, DEDUCTIBLE AND COINSURANCE PROVISIONS OF A HEALTH INSURANCE POLICY TO THE EXTENT THAT OTHER MEDICAL SERVICE COVERED BY THE HEALTH INSURANCE POLICY ARE SUBJECT TO SUCH PROVISIONS. THIS SUBSECTION SHALL NOT BE CONSTRUED AS LIMITING THE BENEFITS THAT ARE AVAILABLE TO AN INDIVIDUAL UNDER A HEALTH INSURANCE POLICY. COVERAGE SHALL BE SUBJECT TO A MAXIMUM BENEFIT OF THIRTY-SIX THOUSAND DOLLARS. AFTER DECEMBER THIRTY-FIRST, TWO THOUSAND ELEVEN, THE SUPERINTENDENT SHALL, ON AN ANNUAL BASIS, ADJUST THE MAXIMUM BENEFIT FOR INFLATION USING THE MEDICAL CARE COMPONENT OF THE UNITED STATES DEPARTMENT OF LABOR CONSUMER PRICE INDEX FOR ALL URBAN CONSUMERS. THE SUPERINTENDENT SHALL SUBMIT THE ADJUSTED MAXIMUM BENEFIT FOR PUBLICATION ANNUALLY NO LATER THAN APRIL FIRST OF EACH CALENDAR YEAR, AND SUCH

PUBLISHED ADJUSTED MAXIMUM BENEFIT SHALL BE APPLICABLE IN THE FOLLOWING CALENDAR YEAR TO HEALTH INSURANCE POLICIES SUBJECT TO THIS SECTION. PAYMENTS MADE BY AN INSURER ON BEHALF OF A COVERED INDIVIDUAL FOR ANY CARE, TREATMENT, INTERVENTION, SERVICE OR ITEM UNRELATED TO APPLIED BEHAVIOR ANALYSIS SHALL NOT BE APPLIED TOWARDS ANY MAXIMUM BENEFIT ESTABLISHED PURSUANT TO THIS PARAGRAPH. EXCEPT FOR INPATIENT SERVICES, IF AN INDIVIDUAL IS RECEIVING TREATMENT FOR AUTISM SPECTRUM DISORDERS, AN INSURER SHALL HAVE THE RIGHT TO REQUEST A REVIEW OF SUCH TREATMENT NOT MORE THAN ONCE EVERY TWELVE MONTHS UNLESS SUCH INSURER AND THE INDIVIDUAL'S LICENSED PHYSICIAN OR LICENSED PSYCHOLOGIST AGREE THAT A MORE FREQUENT REVIEW IS NECESSARY. THE COST OF OBTAINING ANY REVIEW SHALL BE BORNE BY THE INSURER.

(A) For purposes of this section[,]:

(I) "autism spectrum disorder" means a neurobiological condition that includes [autism, Asperger syndrome, Rett's syndrome, or] AUTISTIC DISORDER, ASPERGER'S DISORDER, RETT'S DISORDER, CHILDHOOD DISINTEGRATIVE DISORDER, AND ANY pervasive developmental disorder NOT OTHERWISE SPECIFIED.

(II) "APPLIED BEHAVIOR ANALYSIS" MEANS THE DESIGN, IMPLEMENTATION, AND EVALUATION OF ENVIRONMENTAL MODIFICATIONS, USING BEHAVIORAL STIMULI AND CONSEQUENCES, TO PRODUCE SOCIALLY SIGNIFICANT IMPROVEMENT IN HUMAN BEHAVIOR, INCLUDING THE USE OF DIRECT OBSERVATION, MEASUREMENT, AND FUNCTIONAL ANALYSIS OF THE RELATIONSHIP BETWEEN ENVIRONMENT AND BEHAVIOR.

(III) "AUTISM SERVICES PROVIDER" MEANS ANY PERSON, ENTITY, OR GROUP THAT PROVIDES TREATMENT OF AUTISM SPECTRUM DISORDERS.

(IV) "DIAGNOSIS OF AUTISM SPECTRUM DISORDERS" MEANS MEDICALLY NECESSARY ASSESSMENT, EVALUATIONS, OR TESTS TO DIAGNOSE WHETHER AN INDIVIDUAL HAS ONE OF THE AUTISM SPECTRUM DISORDERS.

(V) "EVIDENCE-BASED RESEARCH" MEANS RESEARCH THAT APPLIES RIGOROUS, SYSTEMATIC, AND OBJECTIVE PROCEDURES TO OBTAIN VALID KNOWLEDGE RELEVANT TO AUTISM SPECTRUM DISORDERS.

(VI) "HABILITATIVE OR REHABILITATIVE CARE" MEANS PROFESSIONAL, COUNSELING, AND GUIDANCE SERVICES AND TREATMENT PROGRAMS, INCLUDING APPLIED BEHAVIOR ANALYSIS, THAT ARE NECESSARY TO DEVELOP, MAINTAIN, AND RESTORE, TO THE MAXIMUM EXTENT PRACTICABLE, THE FUNCTIONING OF AN INDIVIDUAL.

(VII) "MEDICALLY NECESSARY" MEANS ANY CARE, TREATMENT, INTERVENTION, SERVICE, OR ITEM THAT IS PRESCRIBED, PROVIDED, OR ORDERED BY A LICENSED PHYSICIAN OR A LICENSED PSYCHOLOGIST IN ACCORDANCE WITH ACCEPTED STANDARDS OF PRACTICE AND THAT WILL, OR IS REASONABLY EXPECTED TO, DO ANY OF THE FOLLOWING:

(1) PREVENT THE ONSET OF AN ILLNESS, CONDITION, INJURY, OR DISABILITY;

(2) REDUCE OR AMELIORATE THE PHYSICAL, MENTAL, OR DEVELOPMENTAL EFFECTS OF AN ILLNESS, CONDITION, INJURY, OR DISABILITY; OR

(3) ASSIST TO ACHIEVE OR MAINTAIN MAXIMUM FUNCTIONAL CAPACITY IN PERFORMING DAILY ACTIVITIES, TAKING INTO ACCOUNT BOTH THE FUNCTIONAL CAPACITY OF THE INDIVIDUAL AND THE FUNCTIONAL CAPACITIES THAT ARE APPROPRIATE FOR INDIVIDUALS OF THE SAME AGE.

(VIII) "PHARMACY CARE" MEANS MEDICATIONS PRESCRIBED BY A LICENSED PHYSICIAN AND ANY HEALTH-RELATED SERVICES DEEMED MEDICALLY NECESSARY TO DETERMINE THE NEED OR EFFECTIVENESS OF THE MEDICATIONS.

(IX) "PSYCHIATRIC CARE" MEANS DIRECT OR CONSULTATIVE SERVICES PROVIDED BY A PSYCHIATRIST LICENSED IN THE STATE IN WHICH THE PSYCHIATRIST PRACTICES.

(X) "PSYCHOLOGICAL CARE" MEANS DIRECT OR CONSULTATIVE SERVICES PROVIDED BY A PSYCHOLOGIST LICENSED IN THE STATE IN WHICH THE PSYCHOLOGIST PRACTICES.

(XI) "THERAPEUTIC CARE" MEANS SERVICES PROVIDED BY LICENSED OR CERTIFIED SPEECH THERAPISTS, OCCUPATIONAL THERAPISTS, OR PHYSICAL THERAPISTS.

(XII) "TREATMENT FOR AUTISM SPECTRUM DISORDERS" WILL INCLUDE THE FOLLOWING CARE PRESCRIBED, PROVIDED, OR ORDERED FOR AN INDIVIDUAL DIAGNOSED WITH ONE OF THE AUTISM SPECTRUM DISORDERS BY A LICENSED PHYSICIAN OR A LICENSED PSYCHOLOGIST WHO DETERMINES THE CARE TO BE MEDICALLY NECESSARY:

(1) HABILITATIVE OR REHABILITATIVE CARE;

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(4) PSYCHOLOGICAL CARE;

(5) THERAPEUTIC CARE; AND

(6) ANY CARE FOR INDIVIDUALS WITH AUTISM SPECTRUM DISORDERS THAT IS DETERMINED BY THE STATE HEALTH DEPARTMENT, BASED UPON ITS REVIEW OF BEST PRACTICES OR EVIDENCE-BASED RESEARCH, TO BE MEDICALLY NECESSARY AND THAT IS PUBLISHED IN THE GAZETTE FOR RULEMAKING BY STATE AGENCIES. ANY SUCH CARE, TREATMENT, INTERVENTION, SERVICE, OR ITEM THAT WAS NOT PREVIOUSLY COVERED WILL BE INCLUDED IN ANY HEALTH INSURANCE POLICY DELIVERED, EXECUTED, ISSUED, AMENDED, ADJUSTED, OR RENEWED ON OR AFTER SIXTY DAYS FOLLOWING THE DATE OF ITS PUBLICATION IN THE STATE REGISTER.

(B) THIS PARAGRAPH SHALL NOT BE CONSTRUED TO AFFECT ANY OBLIGATION TO PROVIDE SERVICES TO AN INDIVIDUAL UNDER AN INDIVIDUALIZED FAMILY SERVICE PLAN, AN INDIVIDUALIZED EDUCATION PROGRAM OR AN INDIVIDUALIZED SERVICE PLAN.

S 3. Subsection (ee) of section 4303 of the insurance law, as added by chapter 557 of the laws of 2006, is amended to read as follows:

(ee) A medical expense indemnity corporation, a hospital service corporation or a health service corporation which provides coverage for hospital, surgical, or medical care coverage shall not exclude coverage for diagnosis and treatment of medical conditions otherwise covered by the policy solely because the treatment is provided to diagnose or treat autism spectrum disorder. IN INDIVIDUALS TWENTY-ONE YEARS OF AGE OR LESS, THERE SHALL BE NO LIMITS ON THE NUMBER OF VISITS AN INDIVIDUAL MAY MAKE TO AN AUTISM PROVIDER. COVERAGE UNDER THIS SUBSECTION MAY BE SUBJECT TO COPAYMENT, DEDUCTIBLE AND COINSURANCE PROVISIONS OF A HEALTH INSURANCE POLICY TO THE EXTENT THAT OTHER MEDICAL SERVICES COVERED BY THE HEALTH INSURANCE POLICY ARE SUBJECT TO SUCH PROVISIONS. THIS SUBSECTION SHALL NOT BE CONSTRUED AS LIMITING THE BENEFITS THAT ARE AVAILABLE TO AN INDIVIDUAL UNDER A HEALTH INSURANCE POLICY. COVERAGE SHALL BE SUBJECT TO A MAXIMUM BENEFIT OF THIRTY-SIX THOUSAND DOLLARS. AFTER DECEMBER THIRTY-FIRST, TWO THOUSAND ELEVEN, THE SUPERINTENDENT SHALL, ON AN ANNUAL BASIS, ADJUST THE MAXIMUM BENEFIT FOR INFLATION USING THE MEDICAL CARE COMPONENT OF THE UNITED STATES DEPARTMENT OF LABOR CONSUMER PRICE INDEX FOR ALL URBAN CONSUMERS. THE SUPERINTENDENT SHALL SUBMIT THE ADJUSTED MAXIMUM BENEFIT FOR PUBLICATION ANNUALLY NO LATER THAN APRIL FIRST OF EACH CALENDAR YEAR, AND SUCH PUBLISHED ADJUSTED MAXIMUM BENEFIT SHALL BE APPLICABLE IN THE FOLLOWING CALENDAR YEAR TO HEALTH INSURANCE POLICIES SUBJECT TO THIS SUBSECTION. PAYMENTS MADE BY AN INSURER ON BEHALF OF A COVERED INDIVIDUAL FOR ANY CARE, TREATMENT, INTERVENTION, SERVICE OR ITEM UNRELATED TO APPLIED BEHAVIOR ANALYSIS SHALL NOT BE APPLIED TOWARDS ANY MAXIMUM BENEFIT ESTABLISHED PURSUANT TO THIS SECTION. EXCEPT FOR INPATIENT SERVICES, IF AN INDIVIDUAL IS RECEIVING TREATMENT FOR AUTISM SPECTRUM DISORDERS, AN INSURER

SHALL HAVE THE RIGHT TO REQUEST A REVIEW OF SUCH TREATMENT NOT MORE THAN ONCE EVERY TWELVE MONTHS UNLESS SUCH INSURER AND THE INDIVIDUAL'S LICENSED PHYSICIAN OR LICENSED PSYCHOLOGIST AGREE THAT A MORE FREQUENT REVIEW IS NECESSARY. THE COST OF OBTAINING ANY REVIEW SHALL BE BORNE BY THE INSURER.

(A) For purposes of this section[,]:

(I) "autism spectrum disorder" means a neurobiological condition that includes [autism, Asperger syndrome, Rett's syndrome, or] AUTISTIC DISORDER, ASPERGER'S DISORDER, RETT'S DISORDER, CHILDHOOD DISINTEGRATIVE DISORDER, AND ANY pervasive developmental disorder.

(II) "APPLIED BEHAVIOR ANALYSIS" MEANS THE DESIGN, IMPLEMENTATION, AND EVALUATION OF ENVIRONMENTAL MODIFICATIONS, USING BEHAVIORAL STIMULI AND CONSEQUENCES, TO PRODUCE SOCIALLY SIGNIFICANT IMPROVEMENT IN HUMAN BEHAVIOR, INCLUDING THE USE OF DIRECT OBSERVATION, MEASUREMENT, AND FUNCTIONAL ANALYSIS OF THE RELATIONSHIP BETWEEN ENVIRONMENT AND BEHAVIOR.

(III) "AUTISM SERVICES PROVIDER" MEANS ANY PERSON, ENTITY, OR GROUP THAT PROVIDES TREATMENT OF AUTISM SPECTRUM DISORDERS.

(IV) "DIAGNOSIS OF AUTISM SPECTRUM DISORDERS" MEANS MEDICALLY NECESSARY ASSESSMENT, EVALUATIONS, OR TESTS TO DIAGNOSE WHETHER AN INDIVIDUAL HAS ONE OF THE AUTISM SPECTRUM DISORDERS.

(V) "EVIDENCE-BASED RESEARCH" MEANS RESEARCH THAT APPLIES RIGOROUS, SYSTEMATIC, AND OBJECTIVE PROCEDURES TO OBTAIN VALID KNOWLEDGE RELEVANT TO AUTISM SPECTRUM DISORDERS.

(VI) "HABILITATIVE OR REHABILITATIVE CARE" MEANS PROFESSIONAL, COUNSELING, AND GUIDANCE SERVICES AND TREATMENT PROGRAMS, INCLUDING APPLIED BEHAVIOR ANALYSIS, THAT ARE NECESSARY TO DEVELOP, MAINTAIN, AND RESTORE, TO THE MAXIMUM EXTENT PRACTICABLE, THE FUNCTIONING OF AN INDIVIDUAL.

(VII) "MEDICALLY NECESSARY" MEANS ANY CARE, TREATMENT, INTERVENTION, SERVICE, OR ITEM THAT IS PRESCRIBED, PROVIDED, OR ORDERED BY A LICENSED PHYSICIAN OR A LICENSED PSYCHOLOGIST IN ACCORDANCE WITH ACCEPTED STANDARDS OF PRACTICE AND THAT WILL, OR IS REASONABLY EXPECTED TO, DO ANY OF THE FOLLOWING:

(1) PREVENT THE ONSET OF AN ILLNESS, CONDITION, INJURY, OR DISABILITY;

(2) REDUCE OR AMELIORATE THE PHYSICAL, MENTAL, OR DEVELOPMENTAL EFFECTS OF AN ILLNESS, CONDITION, INJURY, OR DISABILITY; OR

(3) ASSIST TO ACHIEVE OR MAINTAIN MAXIMUM FUNCTIONAL CAPACITY IN PERFORMING DAILY ACTIVITIES, TAKING INTO ACCOUNT BOTH THE FUNCTIONAL CAPACITY OF THE INDIVIDUAL AND THE FUNCTIONAL CAPACITIES THAT ARE APPROPRIATE FOR INDIVIDUALS OF THE SAME AGE.

(VIII) "PHARMACY CARE" MEANS MEDICATIONS PRESCRIBED BY A LICENSED PHYSICIAN AND ANY HEALTH-RELATED SERVICES DEEMED MEDICALLY NECESSARY TO DETERMINE THE NEED OR EFFECTIVENESS OF THE MEDICATIONS.

(IX) "PSYCHIATRIC CARE" MEANS DIRECT OR CONSULTATIVE SERVICES PROVIDED BY A PSYCHIATRIST LICENSED IN THE STATE IN WHICH THE PSYCHIATRIST PRACTICES.

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(XII) "TREATMENT FOR AUTISM SPECTRUM DISORDERS" WILL INCLUDE THE FOLLOWING CARE PRESCRIBED, PROVIDED, OR ORDERED FOR AN INDIVIDUAL DIAGNOSED WITH ONE OF THE AUTISM SPECTRUM DISORDERS BY A LICENSED PHYSICIAN OR A LICENSED PSYCHOLOGIST WHO DETERMINES THE CARE TO BE MEDICALLY NECESSARY:

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(3) PSYCHIATRIC CARE;
(4) PSYCHOLOGICAL CARE;
(5) THERAPEUTIC CARE; AND
(6) ANY CARE FOR INDIVIDUALS WITH AUTISM SPECTRUM DISORDERS THAT IS DETERMINED BY THE STATE HEALTH DEPARTMENT, BASED UPON ITS REVIEW OF BEST PRACTICES OR EVIDENCE-BASED RESEARCH, TO BE MEDICALLY NECESSARY AND THAT IS PUBLISHED IN THE GAZETTE FOR RULEMAKING BY STATE AGENCIES. ANY SUCH CARE, TREATMENT, INTERVENTION, SERVICE, OR ITEM THAT WAS NOT PREVIOUSLY COVERED WILL BE INCLUDED IN ANY HEALTH INSURANCE POLICY DELIVERED, EXECUTED, ISSUED, AMENDED, ADJUSTED, OR RENEWED ON OR AFTER SIXTY DAYS FOLLOWING THE DATE OF ITS PUBLICATION IN THE STATE REGISTER.

(B) THIS SUBSECTION SHALL NOT BE CONSTRUED TO AFFECT ANY OBLIGATION TO PROVIDE SERVICES TO AN INDIVIDUAL UNDER AN INDIVIDUALIZED FAMILY SERVICE PLAN, AN INDIVIDUALIZED EDUCATION PROGRAM OR AN INDIVIDUALIZED SERVICE PLAN.

S 4. This act shall take effect on the first of January next succeeding the date on which it shall have become a law and shall apply to all policies and contracts issued, renewed, modified, altered or amended on or after the effective date; provided, however, that any rules and regulations necessary for the implementation of this act shall be promulgated on or before such effective date.