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**THE AUTISM HEALTHCARE PROTECTION ACT**  
**H.F. 1071 (Rep. Norton) S.F. 1020 (Se. Higgins)**

**Summary:** This legislation requires private insurance to provide coverage for evidence-based medically necessary care of autism. It saves the state \$1.6 million dollars annually by shifting costs from Medical Assistance back to private insurance where it belongs.

Individuals who have autism are all different – and they need different options for treatment and therapy. This legislation expands those options by requiring private insurance coverage for all medically necessary generally accepted practices – not just one type of therapy or treatment.

The Centers for Disease Control estimates that 1 in every 100 children is diagnosed with autism spectrum disorder. Fortunately, there is effective treatment for autism that helps the vast majority of children improve -- according to The American Academy of Pediatrics and the U.S. Surgeon General.

**This legislation:**

- Ends the discrimination against individuals who have autism
- Requires coverage for the diagnosis, evaluation, assessment, and medically necessary care of autism spectrum disorders
- saves the state more than \$1.6 million medicaid dollars annually
- helps families who are paying private insurance premiums
- forces health insurance companies to comply with existing mental health parity laws

**Families struggling with autism need help obtaining coverage for medically necessary care.** Families who can afford expensive lawyers are routinely able to advocate and win coverage from the insurance plans that exclude intensive early intervention behavior because it is evidence-based and medically necessary. Other families are forced to turn to MCHA or MA/TEFRA.

**Everyone who pays private insurance premiums deserves to have coverage for medically necessary care.** Private insurance companies should not be allowed to discriminate against children who have autism.

## **FAQs about the Autism Healthcare Protection Act**

### **Q: What does this legislation require?**

**A:** That private insurance cover evidence-based medically necessary care of autism, including without limitation, diagnosis, evaluation, assessment, behavioral health treatments, applied behavior analysis, intensive early intervention behavior therapy (IEIBT), neurodevelopmental and behavioral health treatments, instruction, and management; speech therapy, occupational therapy, physical therapy and prescription medications.

### **Q: Why is ABA singled out?**

**A:** Most state-regulated insurance plans **specifically exclude** all intensive behavior therapy, including “Lovaas Therapy.” Families are forced to hire attorneys and launch expensive appeals to force these insurance plans to cover IEIBT, which is evidence-based and medically necessary. If the law requires coverage of IEIBT then families will not have to keep fighting their insurance companies. Unless the legislation specifically includes IEIBT, it may still be difficult to obtain this type of coverage.

### **Q: Who currently covers intensive early intervention behavior therapy?**

**A:** It is now impossible for a family to go to the private market place and get a policy that includes coverage for IEIBT. Families are forced to enroll their child in MA and pay parental fees or enroll their child in MCHA and pay a second premium.

### **Q: Does MA cover IEIBT?**

**A:** Yes -- by covering something called “skills training” as a component of something called CTSS. Children enrolled in MA are entitled to CTSS services, which includes “individual skills training” and “family skills training.” Children receive IEIBT, which DHS pays for as components of CTSS called “individual skills training” and “family skills training.”

### **Q: How would this legislation save the state money?**

**A:** This legislation saves the state money by shifting direct costs from MA/TEFRA back to private insurance. The state will save \$1.6 million dollars annually through savings to MA.

### **Q: Does SEGIP cover IEIBT?**

**A:** Yes. The benefit set clearly covers these intensive early behavior intervention therapies on a “case by case basis.” In Practice, however, only one of the three plan administrators will actually approve coverage for IEIBT. (SEGIP is the State Employee Group Insurance Plan.)

### **Q: How would this legislation help the public schools save more than \$2 billion?**

**A:** A study done in Texas showed that early intensive behavior intervention for children who have autism would save the state \$208,000 in public education through age 18 – per pupil. The overall savings is \$2.09 billion.

### **Q: Will insurance premiums go up?**

**A:** No. Keep in mind that the largest issuer of state-regulated policies is already providing the coverage required by this law – Blue Cross Blue Shield of Minnesota. The fact that Blue Cross Blue Shield can provide coverage of medically necessary care for autism and still dominate the market proves that premiums will not go up.

### **Q: Will small businesses, unions and taxpayers be hurt or helped?**

**A:** Small businesses, union members and all taxpayers will actually benefit from this legislation. Ending insurance discrimination against autism will save millions in tax dollars NOW because insurance companies will not be able to shift the cost to the state.

### **Q: Will low-income children on MA be hurt by this legislation?**

**A:** No. The Act requires that state health plan coverage stay the same. Children enrolled in Medical Assistance will continue to have coverage for IEIBT. The Act also requires a study to reveal any disparities that exist among the state health plans, SEGIP and private plans.