

Proponents Response to Health Plan Concerns on SB09-244 (4/27/09)

Senate Bill 09-244 requires private health insurance plans in Colorado to cover treatment of autism. Early treatment of autism reduces the life time cost of care by two-thirds. It will reduce costs in both the state education and Medicaid systems. There are approximately 600 children with autism who are eligible for Medicaid waivers but are on wait lists. SB 244 will immediately serve those children with State of Colorado private health insurance. It also immeasurably improves the quality of life for people with autism and their families.

There has been much debate surrounding SB 244 due to the costs and difficulties associated with treating people with autism. Proponents of the bill have addressed some of the health plans' concerns below:

Concern: Coverage for treatment of autism is unprecedented.

Proponent Response: TRICARE (military families) provides an ABA (Applied Behavioral Analysis) Autism Treatment benefit. Currently, 10 states have passed autism insurance reform, 24 states have introduced legislation, 3 states have pending legislation, and 7 states have legislation under development. President Obama cites autism as our nation's number one medical concern.

Concern: SB244 would treat autism as a special class with preferential treatment above and beyond any other condition covered by health insurance.

Proponent Response: Autism is the only serious medical condition not currently covered. Far more expensive conditions include treatment for cancer, surgeries, and stroke.

Concern: Providers of autism treatments would not have to be licensed or certified or have any required training.

Proponent Response: Autism services providers are appropriately qualified health care professionals, including licensed physicians, licensed psychologists, Occupational, Speech and Physical Therapists, and Board Certified Behavior Analysts.

Concern: A separate benefit maximum is established.

Proponent Response: The benefit maximum is at the request of the health benefit plans. Other health conditions do not have predictable benefit maximums, such as cancer, stroke or heart attack. The benefits for those conditions are only limited by the health plan maximum. A cap helps only the health benefit plans.

Concern: There is no allowance for medical review of the treatment plan. **Proponent Response:** Upon request of the carrier, all medical records and treatment plans must be furnished to the carrier. The carrier has the right to request a review of the treatment plan every 6 months, the cost of which is borne by the autism services provider.

Concern: The appeals process and external review are bypassed. **Proponent Response:** This issue is not addressed in SB 244 as written.

Concern: Preliminary estimates indicate that SB 244 would increase premiums about \$10 per month per individual.

Proponent Response: The independent Mandates Commission report states that Colorado Division of Insurance Actuaries found that an increase would not exceed .54% per member per month which can be restated as a \$4.12 PMPM increase and annualized to a total \$49.41 increase in premium. The reduced caps render that figure at .49% which reduces the monthly cost to \$3.83, annualized to \$44.76. The Mandates Commission also reviewed the fiscal note prepared by Legislative Council staff on SB 244 as introduced in which the Department of Health Care Policy and Financing actuary estimated the per member per month increase for the Children's Basic Health Plan to be \$2.93 PMPM, or \$35.16 per member annually, which would be reduced by the cap reduction as well.

Concern: SB 244 does not limit coverage to evidence-based treatments. **Proponent Response:** SB 244 states treatment shall be medically necessary, appropriate, effective or efficient. All covered treatments are listed; the language for treatment is approved by the American Academy of Pediatrics.

Concern: SB 244 goes beyond diagnosis and treatment guidelines. ABA is a controversial treatment.

Proponent Response: SB 244 does not go beyond diagnosis and treatment guidelines. ABA is not a controversial treatment – it is has been researched for more than 40 years and is the recommended treatment by the Surgeon General of the U.S., the National Research Council and is the treatment provided by TRICARE, the federal insurance for military families.

Concern: Existing law states that if a health plan covers autism, it must be covered as any other physical condition.

Proponent Response: Existing law is not a mandate for coverage, so health benefit plans exclude autism as a covered diagnosis and provide zero benefits. If the health plans were providing benefits for treatment of autism, SB 244 would not be needed, but they don't pay for any treatments, including OT, PT or Speech benefits in many policies stating that autism doesn't qualify for those benefits either.