

SENATE CHAMBER

STATE OF OKLAHOMA
SENATE

DISPOSITION BY

FLOOR AMENDMENT

No. _____

(Date)

Mr./Madame President:

I move to amend Senate Bill No. 2119 as follows:

On Page 12, Line 11, after the words and figures "Section 3." and before the word "act" by striking the word "This" and inserting in lieu thereof "Sections 1 and 2 of this"; and

On Page 12, Line 11 1/2 by adding new Sections 4, 5 and 6 – and renumbering subsequent section – to read as follows:

SECTION 4. Section 5 of this act shall be known and may be cited as "Nick's Law."

SECTION 5. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 6060.4a of Title 36, unless there is created a duplication in numbering, reads as follows:

A. Any individual or group health benefit plan, including the State and Education Employees Group Health Insurance Plan, that is offered, issued, or renewed in this state on or after January 1, 2009, shall provide coverage for the screening, diagnosis, testing and treatment of an autistic spectrum disorder. Coverage provided under this section is limited to generally recognized services and treatments that are prescribed by the insured individual's treating physician in accordance with a treatment plan.

B. The coverage required under this section shall not be subject to dollar limits, visit limitations, deductibles or coinsurance provisions that are less favorable to an insured individual than the dollar limits, deductibles, or coinsurance provisions that apply to physical illness generally under the health benefit plan. Coverage of services may be subject to other general exclusions and limitations of the health benefit plan, including, but not limited to:

1. The coordination of benefits;
2. Participating provider requirements;
3. Services provided by family or household member restrictions;
4. Eligibility; and
5. Appeals processes.

C. The treatment plan required under subsection A shall include all elements necessary for the insurer to appropriately pay claims. These elements shall include, but not be limited to:

1. A diagnosis;
2. Proposed treatment or treatments by type, frequency and duration;
3. The anticipated outcomes stated as goals;
4. The frequency by which the treatment plan will be updated; and
5. The treating physician's signature.

The insurer shall have the right to request an updated treatment plan not more than once every six (6) months from the treating physician to review medical necessity, unless the insurer and the provider agree that a more frequent review is necessary due to emerging clinical circumstances.

D. A diagnosis of an autistic spectrum disorder by a licensed physician board certified therapist shall be required to be eligible for benefits and coverage under this section. The prescribing medical practitioner must be:

1. Licensed, certified or registered by an appropriate agency of the state of Oklahoma: or
2. One whose professional credential is recognized and accepted by an appropriate agency of the United States: or
3. One who is certified as a provider under the TRICARE military health system.

The benefits and coverage provided under this section shall be provided to any eligible person less than twenty-one (21) years of age.

E. The insurer shall provide coverage for all therapies, treatments, diagnoses and testing, medicines, special diets, and supplements prescribed by a licensed physician or board certified therapist, including but not limited to coverage for behavioral therapy.

F. Coverage for behavioral therapy shall be subject to a maximum benefit of Seventy-five-Thousand-Dollars (\$75,000.00) per year.

G. An insurer shall not deny or refuse to issue coverage on, refuse to contract with, refuse to renew, refuse to reissue, or otherwise terminate or restrict coverage on an individual under an insurance policy solely because the individual is diagnosed with an autistic spectrum disorder.

H. This act shall not apply to limited benefits policies, including, but not limited to:

1. Accident-only policies;
2. Specified disease policies;
3. Hospital indemnity policies;
4. Medicare supplement policies; or
5. Long-term care policies.

I. 1. For purposes of this section, “autistic spectrum disorder” means a neurological disorder that is marked by severe impairment in social interaction, communication, and imaginative play, with onset generally during the first three (3) years of life and is included in a group of disorders known as autism spectrum disorders;

2. “Autism spectrum disorder” means any of the pervasive developmental disorders as defined by the most recent edition of the Diagnostic and Statistical Manual of the Mental Disorders (DSM) including Autistic Disorder, Asperger’s Disorder, and Pervasive Developmental Disorder not otherwise specified (NOS), Rett Disorder, and Childhood Degenerative Disorder; and

3. “Neurobiological disorder” means an illness of the nervous system caused by genetic, metabolic, or other biological factors.

SECTION 6. Section 5 of this act shall become effective November 1, 2008.

Submitted by:

Senator Jay Paul Gumm