

PREVAILED	Roll Call No. _____
FAILED	Ayes _____
WITHDRAWN	Noes _____
RULED OUT OF ORDER	

HOUSE MOTION _____

MR. SPEAKER:

I move that Engrossed Senate Bill 267 be amended to read as follows:

- 1 Page 1, between lines 16 and 17, begin a new paragraph and insert:
- 2 "SECTION 2. IC 5-10-8-7.1 IS AMENDED TO READ AS
- 3 FOLLOWS [EFFECTIVE JULY 1, 2013]: Sec. 7.1. (a) As used in this
- 4 section, "covered individual" means an individual who is:
- 5 (1) covered under a self-insurance program established under
- 6 section 7(b) of this chapter to provide group health coverage; or
- 7 (2) entitled to health services under a contract with a prepaid
- 8 health care delivery plan that is entered into or renewed under
- 9 section 7(c) of this chapter.
- 10 (b) As used in this section, ~~"pervasive developmental~~ **"autism**
- 11 **spectrum** disorder" means a neurological condition, including
- 12 Asperger's syndrome and autism, as defined in the most recent edition
- 13 of the Diagnostic and Statistical Manual of Mental Disorders of the
- 14 American Psychiatric Association.
- 15 (c) A self-insurance program established under section 7(b) of this
- 16 chapter to provide health care coverage must provide a covered
- 17 individual with coverage for the treatment of a ~~pervasive~~
- 18 ~~developmental~~ **an autism spectrum** disorder. Coverage provided
- 19 under this section is limited to treatment that is prescribed by the
- 20 covered individual's treating physician in accordance with a treatment
- 21 plan. A self-insurance program may not deny or refuse to issue
- 22 coverage on, refuse to contract with, or refuse to renew, refuse to
- 23 reissue, or otherwise terminate or restrict coverage on, an individual
- 24 under an insurance policy or health plan solely because the individual

1 is diagnosed with a ~~pervasive developmental~~ **an autism spectrum**
2 disorder.

3 (d) A contract with a prepaid health care delivery plan that is
4 entered into or renewed under section 7(c) of this chapter must provide
5 a covered individual with services for the treatment of a ~~pervasive~~
6 ~~developmental an autism spectrum~~ disorder. Services provided under
7 this section are limited to treatment that is prescribed by the covered
8 individual's treating physician in accordance with a treatment plan. A
9 prepaid health care delivery plan may not deny or refuse to provide
10 services to, or refuse to renew, refuse to reissue, or otherwise terminate
11 or restrict services to, an individual solely because the individual is
12 diagnosed with a ~~pervasive developmental an autism spectrum~~
13 disorder.

14 (e) The coverage required by subsection (c) and services required
15 by subsection (d) may not be subject to dollar limits, deductibles,
16 copayments, or coinsurance provisions that are less favorable to a
17 covered individual than the dollar limits, deductibles, copayments, or
18 coinsurance provisions that apply to physical illness generally under
19 the self-insurance program or contract with a prepaid health care
20 delivery plan.

21 SECTION 3. IC 12-7-2-19, AS AMENDED BY P.L.99-2007,
22 SECTION 41, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
23 JULY 1, 2013]: Sec. 19. (a) "Autism", for purposes of IC 12-11-8, has
24 the meaning set forth in IC 12-11-8-1.

25 (b) "Autism", for purposes of IC 12-11-1.1-6 and IC 12-28-4-13,
26 refers to the characteristics of a neurological disorder that is described
27 in the **most recent edition of the** Diagnostic and Statistical Manual of
28 Mental Disorders ~~Fourth Edition, Washington, of the American~~
29 Psychiatric Association. ~~1994, pages 70 and 71.~~

30 Page 6, between lines 26 and 27, begin a new paragraph and insert:
31 "SECTION 18. IC 16-38-4-1 IS AMENDED TO READ AS
32 FOLLOWS [EFFECTIVE JULY 1, 2013]: Sec. 1. As used in this
33 chapter, "birth problems" means one (1) or more of the following
34 conditions:

- 35 (1) A structural deformation.
36 (2) A developmental malformation.
37 (3) A genetic, inherited, or biochemical disease.
38 (4) A condition of a chronic nature, including central nervous
39 system hemorrhage or infection of the central nervous system,
40 that may result in a need for long term health care.
41 (5) ~~A pervasive developmental~~ **An autism spectrum** disorder that
42 is recognized in a child before the child becomes five (5) years of
43 age.
44 (6) A fetal alcohol spectrum disorder that is recognized before a
45 child becomes five (5) years of age.
46 (7) Any other severe disability that is:

- 1 (A) designated in a rule adopted by the state department; and
 2 (B) recognized in a child after birth and before the child
 3 becomes three (3) years of age.
- 4 SECTION 19. IC 16-38-4-8, AS AMENDED BY P.L.93-2006,
 5 SECTION 14, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 6 JULY 1, 2013]: Sec. 8. (a) The state department shall establish a birth
 7 problems registry for the purpose of recording all cases of birth
 8 problems that occur in Indiana residents and compiling necessary and
 9 appropriate information concerning those cases, as determined by the
 10 state department, in order to:
- 11 (1) conduct epidemiologic and environmental studies and to apply
 12 appropriate preventive and control measures;
- 13 (2) inform the parents of children with birth problems:
- 14 (A) at the time of discharge from the hospital; or
 15 (B) if a birth problem is diagnosed during a physician or
 16 hospital visit that occurs before the child is:
- 17 (i) except as provided in item (ii), three (3) years of age at
 18 the time of diagnosis; or
 19 (ii) five (5) years of age at the time of diagnosis if the
 20 disorder is a ~~pervasive developmental~~ **an autism spectrum**
 21 disorder or a fetal alcohol spectrum disorder;
- 22 about physicians, care facilities, and appropriate community
 23 resources, including local step ahead agencies and the infants and
 24 toddlers with disabilities program (IC 12-12.7-2); or
- 25 (3) inform citizens regarding programs designed to prevent or
 26 reduce birth problems.
- 27 (b) The state department shall record in the birth problems registry:
- 28 (1) all data concerning birth problems of children that are
 29 provided from the certificate of live birth; and
 30 (2) any additional information that may be provided by an
 31 individual or entity described in section 7(a)(2) of this chapter
 32 concerning a birth problem that is:
- 33 (A) designated in a rule adopted by the state department; and
 34 (B) recognized:
- 35 (i) after the child is discharged from the hospital as a
 36 newborn;
- 37 (ii) before the child is five (5) years of age if the child is
 38 diagnosed with a ~~pervasive developmental~~ **an autism**
 39 **spectrum** disorder or a fetal alcohol spectrum disorder; and
 40 (iii) before the child is three (3) years of age for any
 41 diagnosis not specified in item (ii).
- 42 (c) The state department shall:
- 43 (1) provide a physician and a local health department with
 44 necessary forms for reporting under this chapter; and
 45 (2) report in an electronic format under IC 5-14-6 to the
 46 legislative council any birth problem trends that are identified

1 through the data collected under this chapter.
2 SECTION 20. IC 27-8-14.2-3 IS AMENDED TO READ AS
3 FOLLOWS [EFFECTIVE JULY 1, 2013]: Sec. 3. As used in this
4 chapter, "~~pervasive developmental~~ **"autism spectrum** disorder" means
5 a neurological condition, including Asperger's syndrome and autism,
6 as defined in the most recent edition of the Diagnostic and Statistical
7 Manual of Mental Disorders of the American Psychiatric Association.
8 SECTION 21. IC 27-8-14.2-4 IS AMENDED TO READ AS
9 FOLLOWS [EFFECTIVE JULY 1, 2013]: Sec. 4. (a) An accident and
10 sickness insurance policy that is issued on a group basis must provide
11 coverage for the treatment of a ~~pervasive developmental~~ **an autism**
12 **spectrum** disorder of an insured. Coverage provided under this section
13 is limited to treatment that is prescribed by the insured's treating
14 physician in accordance with a treatment plan. An insurer may not deny
15 or refuse to issue coverage on, refuse to contract with, or refuse to
16 renew, refuse to reissue, or otherwise terminate or restrict coverage on
17 an individual under an insurance policy solely because the individual
18 is diagnosed with a ~~pervasive developmental~~ **an autism spectrum**
19 disorder.
20 (b) The coverage required under this section may not be subject to
21 dollar limits, deductibles, or coinsurance provisions that are less
22 favorable to an insured than the dollar limits, deductibles, or
23 coinsurance provisions that apply to physical illness generally under
24 the accident and sickness insurance policy.
25 SECTION 22. IC 27-8-14.2-5 IS AMENDED TO READ AS
26 FOLLOWS [EFFECTIVE JULY 1, 2013]: Sec. 5. (a) An insurer that
27 issues an accident and sickness insurance policy on an individual basis
28 must offer to provide coverage for the treatment of a ~~pervasive~~
29 ~~developmental~~ **an autism spectrum** disorder of an insured. Coverage
30 provided under this section is limited to treatment that is prescribed by
31 the insured's treating physician in accordance with a treatment plan. An
32 insurer may not deny or refuse to issue coverage on, refuse to contract
33 with, or refuse to renew, refuse to reissue, or otherwise terminate or
34 restrict coverage on an individual under an insurance policy solely
35 because the individual is diagnosed with a ~~pervasive developmental~~ **an**
36 **autism spectrum** disorder.
37 (b) The coverage that must be offered under this section may not be
38 subject to dollar limits, deductibles, or coinsurance provisions that are
39 less favorable to an insured than the dollar limits, deductibles, or
40 coinsurance provisions that apply to physical illness generally under
41 the accident and sickness insurance policy.
42 SECTION 23. IC 27-13-7-14.7 IS AMENDED TO READ AS
43 FOLLOWS [EFFECTIVE JULY 1, 2013]: Sec. 14.7. (a) As used in this
44 section, "~~pervasive developmental~~ **"autism spectrum** disorder" means
45 a neurological condition, including Asperger's syndrome and autism,
46 as defined in the most recent edition of the Diagnostic and Statistical

- 1 Manual of Mental Disorders of the American Psychiatric Association.
2 (b) A group contract with a health maintenance organization that
3 provides basic health care services must provide services for the
4 treatment of a ~~pervasive developmental~~ **an autism spectrum** disorder
5 of an enrollee. Services provided to an enrollee under this subsection
6 are limited to services that are prescribed by the enrollee's treating
7 physician in accordance with a treatment plan. A health maintenance
8 organization may not deny or refuse to provide services to, or refuse to
9 renew, refuse to reissue, or otherwise terminate or restrict coverage
10 under a group contract to services to an individual solely because the
11 individual is diagnosed with a ~~pervasive developmental~~ **an autism**
12 **spectrum** disorder.
- 13 (c) The services required under subsection (b) may not be subject
14 to dollar limits, deductibles, copayments, or coinsurance provisions
15 that are less favorable to an enrollee than the dollar limits, deductibles,
16 copayments, or coinsurance provisions that apply to physical illness
17 generally under the contract with the health maintenance organization.
- 18 (d) A health maintenance organization that enters into an individual
19 contract that provides basic health care services must offer to provide
20 services for the treatment of a ~~pervasive developmental~~ **an autism**
21 **spectrum** disorder of an enrollee. Services provided to an enrollee
22 under this subsection are limited to services that are prescribed by the
23 enrollee's treating physician in accordance with a treatment plan. A
24 health maintenance organization may not deny or refuse to provide
25 services to, or refuse to renew, refuse to reissue, or otherwise terminate
26 or restrict coverage under an individual contract to services to an
27 individual solely because the individual is diagnosed with a ~~pervasive~~
28 ~~developmental~~ **an autism spectrum** disorder.
- 29 (e) The services that must be offered under subsection (d) may not
30 be subject to dollar limits, deductibles, copayments, or coinsurance
31 provisions that are less favorable to an enrollee than the dollar limits,
32 deductibles, copayments, or coinsurance provisions that apply to
33 physical illness generally under the contract with the health
34 maintenance organization."
35 Renumber all SECTIONS consecutively.
(Reference is to ESB 267 as printed March 15, 2013.)

Representative Clere