



New York S 7000B
An Act to Amend the Insurance Law
and the Public Health Law, in Relation
to Coverage for the Screening,
Diagnosis and Treatment of Autism
Spectrum Disorder
Sponsored by Senators Breslin, Duane,
Huntley, Fuschillo, C-Johnson,
Moraham, McDonald

Frequently Asked Questions:

What treatments will be covered under S 7000B?

S 7000B will require New York-based health plans to cover the screening, diagnosis and evidence-based treatment of autism spectrum disorders. Current practices by the DOH as well as OMRDD in New York indicate this will include applied behavior analysis, speech therapy, occupational therapy and physical therapy.

Why are only evidence-based treatments covered?

Generally speaking, legislators are not willing to require insurance companies to pay for therapies that are not evidence-based. The whole premise of the autism insurance reform movement is that we are simply asking for equal treatment, not special treatment. If we ask to have a different standard applied to our coverage, we are unlikely to get bills passed.

Are there any dollar and age imitations on S 7000B?

S 7000B contains no age or dollar caps.

Why is a panel including representatives from the Division of Health, the Office of Mental Health and the Office of Mental Retardation and Developmental Disabilities (OMRDD) referenced in S 7000B?

It is important for health plans to provide coverage for all treatment and therapy options as soon they become evidenced-based. Ultimately, these agencies will work to determine what emerging treatments should be covered in the future. Clinical guidelines for any disease or disorder are generally published every 5-10 years. The existence of such a panel will minimize the wait period for new treatments to be covered.

How will S 7000B affect the benefits received under IDEA?

S 7000B will not affect any benefits received under IDEA. The bill contains protective language regarding IFSP's, IEP's and ISP's.

Why is Autism Speaks supporting S 7000B rather than previously filed bills?

In October 2009, the Senate Insurance Committee held hearings and heard testimony from local and national autism advocacy representatives related to four previously introduced autism insurance reform bills, including:

S.385 (Morahan) - introduced on January 7, 2009
S.1175 (Huntley) – introduced on January 27, 2009
S.2366 (Fuschillo) – introduced on February 9, 2009
S.6123 (Huntley) - introduced on August 10, 2009

After the hearing, Senator Neil Breslin, chair of the Committee, reached out to stakeholders in order to draft one comprehensive piece of legislation. Joining him in this effort was the Chair of the Senate Health Committee, Senator Tom Duane.

S 7000B was introduced on March 5, 2010, by Senator Neil Breslin, chair of the Senate Insurance Committee. Currently, S 7000B has 48 Senate sponsors, including all of the sponsors of the previously filed bills. While the other four bills technically remain on the bill docket, none of them will be moving forward through the Senate.

Why was S 7000A amended?

After dialogue with various stakeholders over the last few weeks, the bill sponsors agreed to amend the legislation to clarify the required coverage of evidence based-treatments with regulations to be developed no later than one year after enactment of the legislation. Amendments were also made that would protect the counties from potential negative cost-shifting and also to further protect educational and early intervention services.

If passed, when will S 7000B go into effect?

The part of S.7000B that requires the agency panel to develop regulations goes into effect immediately. Mandatory coverage goes into effect once the regulations are developed (which can be no later than 12 months from enactment of the law) and applies to policies as they renew during the year.