



OFFICE OF INSURANCE REGULATION

KEVIN M. McCARTY
COMMISSIONER

February 16, 2009

The Honorable Charlie Crist
Governor, State of Florida
The Capitol, PL 05
Tallahassee, Florida 32399

Dear Governor Crist:

Pursuant to the requirements of 624.916(6), Florida Statutes, the Office of Insurance Regulation (Office) convened a Developmental Disabilities Compact Workgroup (DDCW) to consider the adoption of a compact that would provide coverage through medical policies and plans to persons with developmental disabilities. This report summarizes the activities of this legislatively-created Workgroup.

Creation

In line with the provisions of the Window of Opportunity Act, the Office appointed members of the DDCW to represent the private insurance market as well as solicit the appointments from the Office of the Governor, President of the Senate, and Speaker of the House. Throughout the process, no appointee resigned his or her seat, although on occasion there were stand-ins for a particular appointee. Here is the roster of individuals and affiliations who were present as appointed members or representing appointed members at DDCW deliberations:

Mary Beth Senkewicz, Office of Insurance Regulation, Tallahassee, Chair
James Bracher, Florida Association of Health Plans, Tallahassee
William Delaney, Psychcare, LLC, Miami
Elizabeth Emken, Autism Speaks, Washington, D.C.
Jay Faber, CorpHealth/Humana, Fort Worth, Texas
Sen. Andy Gardiner, Orlando
Randy Kammer/Dr. Tricia Nguyen, Blue Cross and Blue Shield of Florida, Jacksonville
John Matthews, United Health Group, Tallahassee
Mary Pat Moore, Executive Office of the Governor, Tallahassee
Douglas Nemecek, CIGNA Healthcare, Eden Prairie, Minnesota
Kimberley Palmer, AvMed, Inc. Gainesville
Colette Riehl, APS Healthcare, Tallahassee
Michelle Robleto, State Group Insurance, DMS, Tallahassee
Jack Scott, Florida Atlantic University Center for Autism, Palm Beach Garden

...

KEVIN M. McCARTY • COMMISSIONER
200 EAST GAINES STREET • TALLAHASSEE, FLORIDA 32399-0305 • (850) 413-5914 • FAX (850) 488-3334
WEBSITE: WWW.FLOR.COM • EMAIL: KEVIN.MCCARTY@FLDFS.COM

Affirmative Action / Equal Opportunity Employer

FINANCIAL SERVICES
COMMISSION

CHARLIE CRIST
GOVERNOR

ALEX SINK
CHIEF FINANCIAL OFFICER

BILL McCOLLUM
ATTORNEY GENERAL

CHARLES BRONSON
COMMISSIONER OF
AGRICULTURE

The Window of Opportunity Act also created a Developmental Disability Compact Advisory Workgroup to act as a forum to comment on the activities of the main Workgroup. Presuming this group was to represent a broad constituency affected by the activities of the DDCW, the Office requested and received numerous expressions of interest to participate from ordinary citizens whose families were impacted by developmental disabilities, as well as groups representing these families, and made the following appointments:

Jeanne Boggs, Tallahassee
Robin Bokilo, Melbourne
Angel Bostick, Gainesville
Steve Coleman, Agency for Persons with Disabilities, Tallahassee
Susan Corse-Adams, Down Syndrome Association of Jacksonville
Christine Ebeltoft-Bancalari, Down Syndrome Association of Central Florida
Mark Epstein, Dan Marino Center, Miami Children's Hospital
Sen. Steven Geller, Hallandale
Lauri Goldman, Office of Insurance Consumer Advocate, Tallahassee
Robert Hopp, Lynn Haven
Jeffrey Leach, Down Syndrome Association of Jacksonville
J. David Moore, Florida Health Partners, Tampa
Jennifer Morgan-Byrd, National Autism Association of Florida, Tallahassee
Michael Smith, Florida Psychological Association, Safety Harbor
Alisa Snow, Alliance for Pediatric Therapies, Tallahassee
Patricia Young, Pensacola

Deliberations

The Window of Opportunity Act required the first gathering of the DDCW to convene in August 2008 and this meeting (as were all subsequent meetings) was noticed in the Florida Administrative Weekly, as well as posted on a special website created to inform the public concerning the Workgroup's proceedings. Email alerts were also regularly sent to all interested parties expressing interest in receiving such notices. Five monthly meetings were scheduled, with all meetings taking place in Tallahassee at locales suitable for public attendance in Tallahassee. Live streaming video and audio of the meetings were made available whenever possible via the Office's website and appropriate links were provided after meetings for the public to watch or listen to an archive of the proceedings.

Unfortunately, the first meeting of the DDCW did not take place as scheduled. The serious threat of Tropical Storm Fay to the Florida Panhandle disrupted travel plans and created unsafe conditions in late August, necessitating the postponement of the first meeting until the next scheduled meeting in September.

Both the DDCW and the Consumer Advisory Workgroup were formally convened and introduced at the September meeting. The agenda provided lengthy testimony from governmental administrators, researchers, academics, therapists, and the public on the matter of the latest science regarding treatment of developmental disabilities and gaps in public services and private coverage for affected families caring for such individuals. There was healthy debate among the Workgroup concerning the implications of this testimony, as well as abundant comment by the Consumer Advisory Workgroup.

The Honorable Charlie Crist
February 16, 2009
Page 3

Subsequent scheduled meetings were designed to focus the DDCW on its main task, the consideration of a compact that would cover persons with developmental disabilities.

At the October meeting, members were presented with information concerning coverage that persons with developmental disabilities were receiving from many large corporate self-insured plans, as well as some governmental plans, such as Tri-Care, which covers the nation's military families. Estimated costs to provide such coverage were discussed as well.

More information was also provided concerning behavior analysis, which was among the therapies the legislature included coverage for in the "Steven A. Geller Autism Act" which mandated services to persons with autism spectrum disorders. Behavior analysis represents an emerging therapy, along with more traditional physical, speech, and occupational therapies, desired by families with children affected by other developmental disabilities.

At the conclusion of the October meeting, requests for concrete compact proposals were solicited by the Chair for debate at the November meeting. However, in the interim between meetings, seeing no proposals forthcoming, the Chair cancelled the November meeting, pushed back the December meeting by one week, and once again challenged members to develop proposals.

At the December meeting, a compact proposal did emerge, was debated, amended, and passed by the Workgroup. Essentially, the compact adopted by the Workgroup requires insurance or HMO signatories to provide the same benefits to persons with developmental disabilities (as defined in the "Window of Opportunity Act") as were provided by the legislature to persons with autism in the "Steven A. Geller Autism Act." The compact is attached. (Attachment One)

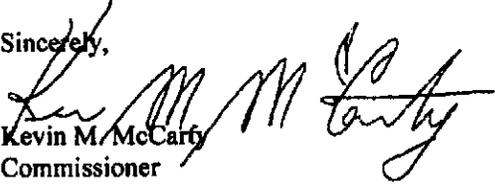
Aftermath

The Office is currently surveying the insurers and HMOs subject to the "Steven A. Geller Autism Act" provisions to determine which, if any, have decided to become signatories to the compact adopted by the Developmental Disabilities Compact Workgroup authorized by the Window of Opportunity Act. If an insurer or HMO chooses not to be a signatory, it is subject to the requirements of the "Steven A. Geller Autism Act" provisions starting April 1, 2009 for all coverage issued or renewed after that date.

However, should any insurer or HMO choose to sign the compact and extend coverage to persons with developmental disabilities, such coverage would begin for medical plans issued or renewed after January 1, 2010.

If you would like any further information on this issue, please do not hesitate to contact me or Deputy Commissioner Mary Beth Senkewicz at 850-413-5104 or MaryBeth.Senkewicz@flor.com.

Sincerely,


Kevin M. McCarty
Commissioner

Attachment



OFFICE OF INSURANCE REGULATION

KEVIN M. MCCARTY
COMMISSIONER

February 16, 2009

The Honorable Jeff Atwater
The Florida Senate
The Capitol, Suite 409
404 South Monroe Street
Tallahassee, FL 32399

Dear President Atwater:

Pursuant to the requirements of 624.916(6), Florida Statutes, the Office of Insurance Regulation (Office) convened a Developmental Disabilities Compact Workgroup (DDCW) to consider the adoption of a compact that would provide coverage through medical policies and plans to persons with developmental disabilities. This report summarizes the activities of this legislatively-created Workgroup.

Creation

In line with the provisions of the Window of Opportunity Act, the Office appointed members of the DDCW to represent the private insurance market as well as solicit the appointments from the Office of the Governor, President of the Senate, and Speaker of the House. Throughout the process, no appointee resigned his or her seat, although on occasion there were stand-ins for a particular appointee. Here is the roster of individuals and affiliations who were present as appointed members or representing appointed members at DDCW deliberations:

Mary Beth Senkewicz, Office of Insurance Regulation, Tallahassee, Chair
James Bracher, Florida Association of Health Plans, Tallahassee
William Delaney, Psychcare, LLC, Miami
Elizabeth Emken, Autism Speaks, Washington, D.C.
Jay Faber, CorpHealth/Humana, Fort Worth, Texas
Sen. Andy Gardiner, Orlando
Randy Kammer/Dr. Tricia Nguyen, Blue Cross and Blue Shield of Florida, Jacksonville
John Matthews, United Health Group, Tallahassee
Mary Pat Moore, Executive Office of the Governor, Tallahassee
Douglas Nemecek, CIGNA Healthcare, Eden Prairie, Minnesota
Kimberley Palmer, AvMed, Inc. Gainesville
Colette Riehl, APS Healthcare, Tallahassee
Michelle Robleto, State Group Insurance, DMS, Tallahassee
Jack Scott, Florida Atlantic University Center for Autism, Palm Beach Garden

...

KEVIN M. MCCARTY • COMMISSIONER
200 EAST GAINES STREET • TALLAHASSEE, FLORIDA 32399-0305 • (850) 413-5914 • FAX (850) 488-3334
WEBSITE: WWW.FLOR.COM • EMAIL: KEVIN.MCCARTY@FLDFS.COM

Affirmative Action / Equal Opportunity Employer

FINANCIAL SERVICES
COMMISSION

CHARLIE CRIST
GOVERNOR

ALEX SINK
CHIEF FINANCIAL OFFICER

BILL McCOLLUM
ATTORNEY GENERAL

CHARLES BRONSON
COMMISSIONER OF
AGRICULTURE

The Honorable Jeff Atwater
February 16, 2009
Page 2

The Window of Opportunity Act also created a Developmental Disability Compact Advisory Workgroup to act as a forum to comment on the activities of the main Workgroup. Presuming this group was to represent a broad constituency affected by the activities of the DDCW, the Office requested and received numerous expressions of interest to participate from ordinary citizens whose families were impacted by developmental disabilities, as well as groups representing these families, and made the following appointments:

Jeanne Boggs, Tallahassee
Robin Bokilo, Melbourne
Angel Bostick, Gainesville
Steve Coleman, Agency for Persons with Disabilities, Tallahassee
Susan Corse-Adams, Down Syndrome Association of Jacksonville
Christine Ebeltoft-Bancalari, Down Syndrome Association of Central Florida
Mark Epstein, Dan Marino Center, Miami Children's Hospital
Sen. Steven Geller, Hallandale
Lauri Goldman, Office of Insurance Consumer Advocate, Tallahassee
Robert Hopp, Lynn Haven
Jeffrey Leach, Down Syndrome Association of Jacksonville
J. David Moore, Florida Health Partners, Tampa
Jennifer Morgan-Byrd, National Autism Association of Florida, Tallahassee
Michael Smith, Florida Psychological Association, Safety Harbor
Alisa Snow, Alliance for Pediatric Therapies, Tallahassee
Patricia Young, Pensacola

Deliberations

The Window of Opportunity Act required the first gathering of the DDCW to convene in August 2008 and this meeting (as were all subsequent meetings) was noticed in the Florida Administrative Weekly, as well as posted on a special website created to inform the public concerning the Workgroup's proceedings. Email alerts were also regularly sent to all interested parties expressing interest in receiving such notices. Five monthly meetings were scheduled, with all meetings taking place in Tallahassee at locales suitable for public attendance in Tallahassee. Live streaming video and audio of the meetings were made available whenever possible via the Office's website and appropriate links were provided after meetings for the public to watch or listen to an archive of the proceedings.

Unfortunately, the first meeting of the DDCW did not take place as scheduled. The serious threat of Tropical Storm Fay to the Florida Panhandle disrupted travel plans and created unsafe conditions in late August, necessitating the postponement of the first meeting until the next scheduled meeting in September.

Both the DDCW and the Consumer Advisory Workgroup were formally convened and introduced at the September meeting. The agenda provided lengthy testimony from governmental administrators, researchers, academics, therapists, and the public on the matter of the latest science regarding treatment of developmental disabilities and gaps in public services and private coverage for affected families caring for such individuals. There was healthy debate among the Workgroup concerning the implications of this testimony, as well as abundant comment by the Consumer Advisory Workgroup.

The Honorable Jeff Atwater
February 16, 2009
Page 3

Subsequent scheduled meetings were designed to focus the DDCW on its main task, the consideration of a compact that would cover persons with developmental disabilities.

At the October meeting, members were presented with information concerning coverage that persons with developmental disabilities were receiving from many large corporate self-insured plans, as well as some governmental plans, such as Tri-Care, which covers the nation's military families. Estimated costs to provide such coverage were discussed as well.

More information was also provided concerning behavior analysis, which was among the therapies the legislature included coverage for in the "Steven A. Geller Autism Act" which mandated services to persons with autism spectrum disorders. Behavior analysis represents an emerging therapy, along with more traditional physical, speech, and occupational therapies, desired by families with children affected by other developmental disabilities.

At the conclusion of the October meeting, requests for concrete compact proposals were solicited by the Chair for debate at the November meeting. However, in the interim between meetings, seeing no proposals forthcoming, the Chair cancelled the November meeting, pushed back the December meeting by one week, and once again challenged members to develop proposals.

At the December meeting, a compact proposal did emerge, was debated, amended, and passed by the Workgroup. Essentially, the compact adopted by the Workgroup requires insurance or HMO signatories to provide the same benefits to persons with developmental disabilities (as defined in the "Window of Opportunity Act") as were provided by the legislature to persons with autism in the "Steven A. Geller Autism Act." The compact is attached. (Attachment One)

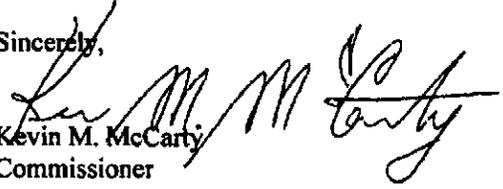
Aftermath

The Office is currently surveying the insurers and HMOs subject to the "Steven A. Geller Autism Act" provisions to determine which, if any, have decided to become signatories to the compact adopted by the Developmental Disabilities Compact Workgroup authorized by the Window of Opportunity Act. If an insurer or HMO chooses not to be a signatory, it is subject to the requirements of the "Steven A. Geller Autism Act" provisions starting April 1, 2009 for all coverage issued or renewed after that date.

However, should any insurer or HMO choose to sign the compact and extend coverage to persons with developmental disabilities, such coverage would begin for medical plans issued or renewed after January 1, 2010.

If you would like any further information on this issue, please do not hesitate to contact me or Deputy Commissioner Mary Beth Senkewicz at 850-413-5104 or MaryBeth.Senkewicz@flor.com.

Sincerely,


Kevin M. McCarty
Commissioner

Attachment



OFFICE OF INSURANCE REGULATION

KEVIN M. MCCARTY
COMMISSIONER

February 16, 2009

The Honorable Larry Cretul
Florida House of Representatives
418 The Capitol
402 South Monroe Street
Tallahassee, FL 32399

Dear Speaker pro tempore Cretul:

Pursuant to the requirements of 624.916(6), Florida Statutes, the Office of Insurance Regulation (Office) convened a Developmental Disabilities Compact Workgroup (DDCW) to consider the adoption of a compact that would provide coverage through medical policies and plans to persons with developmental disabilities. This report summarizes the activities of this legislatively-created Workgroup.

Creation

In line with the provisions of the Window of Opportunity Act, the Office appointed members of the DDCW to represent the private insurance market as well as solicit the appointments from the Office of the Governor, President of the Senate, and Speaker of the House. Throughout the process, no appointee resigned his or her seat, although on occasion there were stand-ins for a particular appointee. Here is the roster of individuals and affiliations who were present as appointed members or representing appointed members at DDCW deliberations:

Mary Beth Senkewicz, Office of Insurance Regulation, Tallahassee, Chair
James Bracher, Florida Association of Health Plans, Tallahassee
William Delaney, Psychcare, LLC, Miami
Elizabeth Emken, Autism Speaks, Washington, D.C.
Jay Faber, CorpHealth/Humana, Fort Worth, Texas
Sen. Andy Gardiner, Orlando
Randy Kammer/Dr. Tricia Nguyen, Blue Cross and Blue Shield of Florida, Jacksonville
John Matthews, United Health Group, Tallahassee
Mary Pat Moore, Executive Office of the Governor, Tallahassee
Douglas Nemecek, CIGNA Healthcare, Eden Prairie, Minnesota
Kimberley Palmer, AvMed, Inc. Gainesville
Colette Riehl, APS Healthcare, Tallahassee
Michelle Robleto, State Group Insurance, DMS, Tallahassee
Jack Scott, Florida Atlantic University Center for Autism, Palm Beach Garden

FINANCIAL SERVICES
COMMISSION

CHARLIE CRIST
GOVERNOR

ALEX SINK
CHIEF FINANCIAL OFFICER

BILL McCOLLUM
ATTORNEY GENERAL

CHARLES BRONSON
COMMISSIONER OF
AGRICULTURE

...
KEVIN M. MCCARTY • COMMISSIONER
200 EAST GAINES STREET • TALLAHASSEE, FLORIDA 32399-0305 • (850) 413-5914 • FAX (850) 488-3334
WEBSITE: WWW.FLOIR.COM • EMAIL: KEVIN.MCCARTY@FLDFS.COM

Affirmative Action / Equal Opportunity Employer

The Window of Opportunity Act also created a Developmental Disability Compact Advisory Workgroup to act as a forum to comment on the activities of the main Workgroup. Presuming this group was to represent a broad constituency affected by the activities of the DDCW, the Office requested and received numerous expressions of interest to participate from ordinary citizens whose families were impacted by developmental disabilities, as well as groups representing these families, and made the following appointments:

Jeanne Boggs, Tallahassee
Robin Bokilo, Melbourne
Angel Bostick, Gainesville
Steve Coleman, Agency for Persons with Disabilities, Tallahassee
Susan Corse-Adams, Down Syndrome Association of Jacksonville
Christine Ebeltoft-Bancalari, Down Syndrome Association of Central Florida
Mark Epstein, Dan Marino Center, Miami Children's Hospital
Sen. Steven Geller, Hallandale
Lauri Goldman, Office of Insurance Consumer Advocate, Tallahassee
Robert Hopp, Lynn Haven
Jeffrey Leach, Down Syndrome Association of Jacksonville
J. David Moore, Florida Health Partners, Tampa
Jennifer Morgan-Byrd, National Autism Association of Florida, Tallahassee
Michael Smith, Florida Psychological Association, Safety Harbor
Alisa Snow, Alliance for Pediatric Therapies, Tallahassee
Patricia Young, Pensacola

Deliberations

The Window of Opportunity Act required the first gathering of the DDCW to convene in August 2008 and this meeting (as were all subsequent meetings) was noticed in the Florida Administrative Weekly, as well as posted on a special website created to inform the public concerning the Workgroup's proceedings. Email alerts were also regularly sent to all interested parties expressing interest in receiving such notices. Five monthly meetings were scheduled, with all meetings taking place in Tallahassee at locales suitable for public attendance in Tallahassee. Live streaming video and audio of the meetings were made available whenever possible via the Office's website and appropriate links were provided after meetings for the public to watch or listen to an archive of the proceedings.

Unfortunately, the first meeting of the DDCW did not take place as scheduled. The serious threat of Tropical Storm Fay to the Florida Panhandle disrupted travel plans and created unsafe conditions in late August, necessitating the postponement of the first meeting until the next scheduled meeting in September.

Both the DDCW and the Consumer Advisory Workgroup were formally convened and introduced at the September meeting. The agenda provided lengthy testimony from governmental administrators, researchers, academics, therapists, and the public on the matter of the latest science regarding treatment of developmental disabilities and gaps in public services and private coverage for affected families caring for such individuals. There was healthy debate among the Workgroup concerning the implications of this testimony, as well as abundant comment by the Consumer Advisory Workgroup.

The Honorable Larry Cretul
February 16, 2009
Page 3

Subsequent scheduled meetings were designed to focus the DDCW on its main task, the consideration of a compact that would cover persons with developmental disabilities.

At the October meeting, members were presented with information concerning coverage that persons with developmental disabilities were receiving from many large corporate self-insured plans, as well as some governmental plans, such as Tri-Care, which covers the nation's military families. Estimated costs to provide such coverage were discussed as well.

More information was also provided concerning behavior analysis, which was among the therapies the legislature included coverage for in the "Steven A. Geller Autism Act" which mandated services to persons with autism spectrum disorders. Behavior analysis represents an emerging therapy, along with more traditional physical, speech, and occupational therapies, desired by families with children affected by other developmental disabilities.

At the conclusion of the October meeting, requests for concrete compact proposals were solicited by the Chair for debate at the November meeting. However, in the interim between meetings, seeing no proposals forthcoming, the Chair cancelled the November meeting, pushed back the December meeting by one week, and once again challenged members to develop proposals.

At the December meeting, a compact proposal did emerge, was debated, amended, and passed by the Workgroup. Essentially, the compact adopted by the Workgroup requires insurance or HMO signatories to provide the same benefits to persons with developmental disabilities (as defined in the "Window of Opportunity Act") as were provided by the legislature to persons with autism in the "Steven A. Geller Autism Act." The compact is attached. (Attachment One)

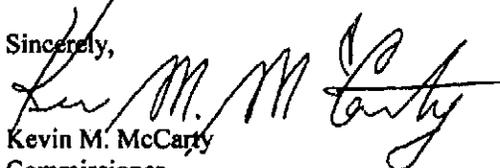
Aftermath

The Office is currently surveying the insurers and HMOs subject to the "Steven A. Geller Autism Act" provisions to determine which, if any, have decided to become signatories to the compact adopted by the Developmental Disabilities Compact Workgroup authorized by the Window of Opportunity Act. If an insurer or HMO chooses not to be a signatory, it is subject to the requirements of the "Steven A. Geller Autism Act" provisions starting April 1, 2009 for all coverage issued or renewed after that date.

However, should any insurer or HMO choose to sign the compact and extend coverage to persons with developmental disabilities, such coverage would begin for medical plans issued or renewed after January 1, 2010.

If you would like any further information on this issue, please do not hesitate to contact me or Deputy Commissioner Mary Beth Senkewicz at 850-413-5104 or MaryBeth.Senkewicz@flor.com.

Sincerely,


Kevin M. McCarty
Commissioner

Attachment

Developmental Disabilities Compact

as adopted by
The Developmental Disabilities Compact Workgroup
December 17, 2008

The contracting participants solemnly agree that:

Article I. Purpose

The purpose of this Compact is to create a binding agreement among the participants relating to insurance and access to services for persons with developmental disabilities, pursuant to the "Window of Opportunity Act," section 624.916, Florida Statutes.

The participants to this compact find that providing medical coverage and services to persons with developmental disabilities can be improved through cooperative efforts between providers of health care benefits, providers of medical services, government regulators, and affected individuals for the benefit of patients, their families, and society as a whole. It is the purpose of this compact and of the signing parties to initiate or supplement coverage for behavior analysis, speech therapy, physical therapy, and occupational therapy services for persons with developmental disabilities when such services are determined to be medically necessary.

Article II. Definitions

As used in this compact:

- (a) "Applied behavior analysis" means the design, implementation, and evaluation of environmental modifications, using behavioral stimuli and consequences, to produce socially significant improvement in human behavior, including, but not limited to, the use of direct observation, measurement, and functional analysis of the relations between environment and behavior.
- (b) "Developmental disabilities" includes:
 - 1. The term as defined in s. 393.063;
 - 2. Down syndrome, a genetic disorder caused by the presence of extra chromosomal material on chromosome 21, which may include Trisomy 21, Mosaicism, Robertsonian Translocation, and other duplications of a portion of chromosome 21; and
 - 3. Autism spectrum disorder, as defined in s. 627.6686.
- (c) "Eligible individual" means an individual under 18 years of age or an individual 18 years of age or older who is in high school who has been diagnosed as having a developmental disability at 8 years of age or younger.

- (d) "Health plan" means a group health insurance policy offered by an insurer or health benefit contract offered by a health maintenance organization and includes plans offered by the state group insurance program provided under s. 110.123. The term does not include any health insurance policy or health maintenance organization contract offered in the individual market, any policy or contract that is individually underwritten, or any policy or contract provided to a small employer.
- (e) "Insurer" means an insurer or health maintenance organization providing health insurance coverage or health benefits, which is licensed to engage in the business of insurance in this state and is subject to insurance regulation.
- (f) "Medically necessary" means a covered service that will, or is reasonably expected to accomplish one or more of the following:
 - 1. Arrive at a correct medical diagnosis.
 - 2. Prevent the onset of an illness, condition, injury, or disability.
 - 3. Reduce, correct, or ameliorate the physical, mental, developmental, or behavioral affects of an illness, condition, injury, or disability.
 - 4. Assist in the achievement or maintenance of sufficient functional capacity to perform age-appropriate or developmentally appropriate daily activities.
- (g) "Office" means the Florida Office of Insurance Regulation.

**Article III.
Covered Services**

- (a) Each signatory to this compact agrees to provide coverage for applied behavior analysis, speech therapy, physical therapy, and occupational therapy to persons with developmental disabilities when determined to be medically necessary. Each signatory insurer agrees to provide the level of coverage for behavior analysis and behavior assistant services, speech therapy, physical therapy, and occupational therapy to persons with developmental disabilities when determined to be medically necessary.
- (b) Individuals, enrolled in a health plan as defined herein, under 18 years of age or an individual 18 years of age or older who is in high school who has been diagnosed as having a developmental disability at 8 years of age or younger, are eligible for the coverage contemplated and agreed to by the signatories to this compact.
- (c) Coverage to an eligible individual pursuant to this compact shall include, at a minimum, well-baby and well-child screening for diagnosing the presence of a developmental disability, and the treatment of a developmental disability through speech therapy, occupational therapy, physical therapy, and applied behavior analysis. Applied behavior analysis services shall be provided by an individual certified pursuant to s. 393.17 or an individual licensed under chapter 490 or chapter 491.

- (d) Determinations of covered services required shall be made on the basis of health information provided by the individual and individual's family, the primary care physician, consultants with appropriate specialty training, as well as other providers that may have evaluated the individual's condition. Such determinations must consider:
 - 1. The functional capacity of the person and capacities appropriate for persons of the same age or developmental level.
 - 2. Available research findings, health care practice guidelines, and standards issued by professionally recognized organizations or government agencies.
- (e) Services must be delivered in a setting appropriate to the specific health needs of the individual.
- (f) Coverage shall be limited to treatment that is prescribed by the insured's treating physician in accordance with a treatment plan. Coverage for the services described in section (a) above shall be limited to \$36,000 annually and may not exceed \$200,000 in total lifetime benefits.
- (g) A signatory insurer agrees not to deny coverage on the basis that provided services are habilitative in nature.
- (h) Coverage pursuant to this compact may be subject to other general exclusions and limitations of the insurer's policy or contract, including, but not limited to, coordination of benefits, participating provider requirements, restrictions on services provided by family or household members, and utilization review of health care services, including the review of medical necessity, case management, and other managed care provisions.
- (i) The coverage offered pursuant to this compact may not be subject to dollar limits, deductibles, or coinsurance provisions that are less favorable to an insured than the dollar limits, deductibles, or coinsurance provisions that apply to physical illnesses that are generally covered under the health plan, except as otherwise provided in section (f) above.
- (j) A signatory insurer may not deny or refuse to issue coverage for medically necessary services, refuse to contract with, or refuse to renew or reissue or otherwise terminate or restrict coverage for an individual because the individual is diagnosed as having a developmental disability.
- (k) The treatment plan required pursuant to section (f) above shall include all elements necessary for the health plan to appropriately pay claims. These elements include, but are not limited to, a diagnosis, the proposed treatment by type, the frequency and duration of treatment, the anticipated outcomes stated as goals, the frequency with which the treatment plan will be updated, and the signature of the treating physician.
- (l) Beginning January 1, 2011, the maximum benefit under paragraph (f) above shall be adjusted annually on January 1 of each calendar year to reflect any change from the previous year in the medical component of the then current Consumer Price Index for all urban consumers, published by the Bureau of Labor Statistics of the United States Department of Labor.
- (m) Nothing in this compact may be construed as limiting benefits and coverage otherwise available to an insured under a health policy or contract.

Article IV.
Notice to Policyholders

Within 15 days of execution of this compact by a signatory representing an insurer, such insurer agrees to provide written notice to its policyholders identifying the amount, scope, and conditions under which coverage is provided for behavior analysis and behavior assistant services as defined in section 409.815(2)(g) Florida Statutes, and speech therapy, physical therapy, and occupational therapy when medically necessary due to the presence of a developmental disability. A copy of such notice to policyholders shall be filed with the Office for informational purposes only.

Article V.
Penalties

- (a) Penalties for documented cases of denial of claims for medically necessary services due to the presence of a developmental disability shall be considered willful violations of the Florida Insurance Code, punishable by fine which may not exceed \$40,000 for each such violation. In no event shall such fine exceed an aggregate amount of \$200,000, arising out of the same action. Other fines and penalties, including suspension or revocation of an insurer's certificate of authority, may apply as allowed by the Florida Insurance Code and applicable rules.
- (b) In addition, as often as it deems necessary, pursuant to section 624.3161, Florida Statutes, the Office shall examine an insurer for the purpose of ascertaining compliance with the applicable provisions of chapters 440, 624, 626, 627, and 635. Further, in accordance with section 624.3161, Florida Statutes, findings of a market conduct examination that an insurer has exhibited a pattern or practice of willful violations related to claims-handling which caused harm to policyholders, as prohibited by section 626.9541(1)(i), Florida Statutes is deemed an unfair trade practice and the Office may order an insurer pursuant to chapter 120 to file its claims-handling practices and procedures related to that line of insurance with the Office for review and inspection, to be held by the Office for the following 36-month period. Such claims-handling practices and procedures are public records and are not trade secrets or otherwise exempt from the provisions of section 119.07(1), Florida Statutes.

Article VI.
Compact Administrator

Each signatory shall appoint a "compact administrator" who, on behalf of the signatory, shall act as general coordinator of activities under the compact and who shall receive copies of all reports, correspondence and other documents relating to the compact. The compact administrator or his duly designated representative shall be the official with whom other signatories shall deal in any matter relating to the compact. The compact administrator shall submit to the Office no later than December 31, a detailed description of the coverage and services provided pursuant to this compact; the treated prevalence rates occurring pursuant to this compact; and a report of all claims denied with regard to services for developmental disabilities along with the basis for such denial.

Article VII.
Effective Date and Amendment

This compact shall be binding upon any signatory and shall enter into full force and effect as to any signatory upon execution by the signing party. The terms and conditions of the compact may be amended by operation of law or by consent of the majority of signatories existing at the time of the proposed amendment and by Office.

Article VIII.
Withdrawal

A signatory insurer may withdraw from this compact by providing notice in writing to the Office and to all other signatories to the compact. Such withdrawal shall take effect for policies issued or renewed one year after notice thereof has been communicated officially to the Office. The signatory insurer agrees to provide written notice of withdrawal from this compact to all of its policyholders within 30 days of providing notice of its planned withdrawal to the Office. A signatory insurer that withdraws from this compact is subject to the terms of the "Steven A. Geller Autism Coverage Act."

Article IX.
Severability and Construction

The provisions of this compact shall be severable, and if any phrase, clause, sentence or provision is deemed unenforceable, the remaining provisions of the compact shall be enforceable. This compact shall be liberally construed so as to effectuate the purposes thereof.

Article X.

Nothing in this compact shall be construed to abridge, diminish or in any way impair the rights, duties and responsibilities of any individual enrolled in a health plan or HMO. Nothing in this compact shall be construed as providing an individual with an entitlement to health care services.