



**INFORMATIONAL MEMORANDUM
OIR-09-03M
ISSUED
JULY 9, 2009**

Florida Office of Insurance Regulation
Kevin M. McCarty, Commissioner

**ALL LIFE AND HEALTH INSURERS AND HMOs
AUTISM SPECTRUM DISORDER**

The purpose of this memorandum is to notify and remind Florida Life and Health insurers and HMOs of the requirements of Sections 627.6686 and 641.31098, Florida Statutes, regarding mandated coverage for individuals with autism spectrum disorder.

Effective April 1, 2009, a large group health insurance policy or group health benefit plan offered by an insurer or HMO which includes the state group insurance program, must provide coverage to an eligible individual for autism spectrum disorder. This provision applies to policies or plans issued or renewed on or after April 1, 2009, pursuant to Sections 627.6686 and 641.31098, Florida Statutes, which is cited as the "Steven A. Geller Autism Coverage Act."

An insurer is exempt if the insurer is a signatory of the Developmental Disabilities Compact no later than April 1, 2009 as established under Section 624.916, Florida Statutes.

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.

Mandated:

- Coverage: for autism spectrum disorder (autistic disorder, Asperger's syndrome, and pervasive developmental disorder not otherwise specified);
- Services: speech therapy, occupational therapy, physical therapy, and applied behavior analysis;
- Services to be provided by: an individual certified pursuant to s. 393.17 or an individual licensed under chapter 490 or chapter 491;
- Subject to: general exclusions and limitations of the plan, such as participating provider requirements, case management, coordination of benefits, etc.

Limitations:

- To treatment prescribed by insured's treating physician in accordance with a treatment plan;
- \$36,000 annually and \$200,000 lifetime (to be adjusted annually by medical component of the consumer Price Index).

Insurers and HMO's should carefully review the provisions of Sections 627.6686 and 641.31098, Florida Statutes to assure they are in compliance with all provisions thereof.

If you have questions regarding the filing of revised contract forms, please contact Gary Edenfield, Senior Management Analyst Supervisor, Life and Health Product Review, Florida Office of Insurance Regulation, at gary.edenfield@flor.com or (850) 413-5134.