

SECOND REGULAR SESSION

# HOUSE BILL NO. 1810

95TH GENERAL ASSEMBLY

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INTRODUCED BY REPRESENTATIVE SANDER.

3170L.01I

D. ADAM CRUMBLISS, Chief Clerk

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## AN ACT

To amend chapter 376, RSMo, by adding thereto one new section relating to health insurance coverage for habilitative services.

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*Be it enacted by the General Assembly of the state of Missouri, as follows:*

Section A. Chapter 376, RSMo, is amended by adding thereto one new section, to be known as section 376.1195, to read as follows:

**376.1195. 1. Each health carrier or health benefit plan that offers or issues health benefit plans which are delivered, issued for delivery, continued, or renewed in this state on or after January 1, 2011, shall provide coverage for habilitative services for children less than eighteen years of age with a neurologic, congenital, genetic, or early acquired disorder, including all such prenatal, perinatal, and postnatal disorders, when all of the following conditions are met:**

**(1) A licensed physician has diagnosed the child's neurologic, congenital, genetic, or early acquired disorder;**

**(2) The treatment is administered by a licensed speech-language pathologist, licensed occupational therapist, or licensed physical therapist upon the referral of a licensed physician;**

**(3) The initial or continued treatment is medically necessary, as determined by the appropriate licensed health care professional, and is therapeutic and not experimental or investigational.**

**2. For the purposes of this section, the following terms shall mean:**

**(1) "Congenital or genetic disorder", includes but is not limited to hereditary disorders;**

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

18           (2) "Early acquired disorder", a disorder resulting from illness, trauma, injury, or  
19 some other event or condition occurring prior to such child developing functional life skills  
20 such as, but not limited to, walking, talking, or self-help skills;

21           (3) "Habilitative services", occupational therapy, physical therapy, and speech  
22 therapy prescribed by the insured's treating physician to enhance the ability of a child to  
23 function with a neurologic, congenital, genetic, or early acquired disorder;

24           (4) "Health carrier", the same meaning as such term is defined in section 376.1350;

25           (5) "Health benefit plan", the same meaning as such term is defined in section  
26 376.1350;

27           (6) "Neurologic, congenital, genetic, and early acquired disorder", include but is  
28 not limited to autism or an autism spectrum disorder, cerebral palsy, Downs Syndrome,  
29 and other disorders resulting from early childhood illness, trauma, or injury;

30           (7) "Neurologic disorder", any disorder affecting a child's nervous system.

31           3. A health carrier or health benefit plan subject to the provisions of this section  
32 shall not be required to provide reimbursement for habilitative services that are solely  
33 educational in nature or otherwise paid under state or federal law for purely educational  
34 services. Nothing in this subsection shall be construed as exempting a health carrier,  
35 health benefit plan, or similar third party from an otherwise valid obligation to provide or  
36 to pay for services provided to a child with a disability.

37           4. Health carriers and health benefit plans subject to the provisions of this section  
38 shall provide notice annually to its insureds and enrollees about the coverage required  
39 under this section.

40           5. A determination by a health carrier or health benefit plan subject to the  
41 provisions of this section denying a request for habilitative services or denying payment  
42 for habilitative services on the grounds that a condition or disease is not a neurologic,  
43 congenital, genetic, or early acquired disorder is considered an adverse determination  
44 under section 376.1350.

45           6. The coverage required by this section shall not be subject to any greater  
46 deductibles, co-payments, or coinsurance than services provided by the health benefit plan  
47 for physical illness.

48           7. The provisions of this section shall not apply to a supplemental insurance policy,  
49 including a life care contract, accident-only policy, specified disease policy, hospital policy  
50 providing a fixed daily benefit only, Medicare supplement policy, long-term care policy,  
51 short-term major medical policies of six months' or less duration, or any other  
52 supplemental policy as determined by the director of the department of insurance,  
53 financial institutions and professional registration.