

ONE HUNDRED THIRD LEGISLATURE - SECOND SESSION - 2014
COMMITTEE STATEMENT
LB505

Hearing Date: Tuesday February 26, 2013
Committee On: Banking, Commerce and Insurance
Introducer: Coash
One Liner: Provide requirement for insurance coverage of autism spectrum disorders

Roll Call Vote - Final Committee Action:
Advanced to General File with amendment(s)

Vote Results:

Aye:	6	Senators Campbell, Carlson, Christensen, Garrett, Howard, Schumacher
Nay:	1	Senator Gloor
Absent:		
Present Not Voting:	1	Senator Pirsch

Proponents:

Senator Colby Coash
Michael Wasmer
Cynthia Ellis
Torri Smith Tejral
Colleen Jankovich
Cathy Martinez
Robert Woodruff
Courtney VanDeVelde
Sandra Lundeen
Kari Kensinger

Representing:

Introducer
Autism Speaks
Self
Self
Self
Autism Family Network
Self
Voices for Children of NE
Self
NE Recreation and Parks Association

Opponents:

Representing:

Neutral:

Deb Esser

Representing:

Coverntry Healthcare, Blue Cross Blue Shield of NE,
United Healthcare

Summary of purpose and/or changes:

LB505 (Coash) would enact a new section to provide that individual and group sickness and accident insurance policies, certificates, and subscriber contracts; hospital, medical, or surgical expense-incurred policies; and self-funded employee benefit plans to the extent not preempted by federal law shall provide coverage for the screening, diagnosis, and treatment of an autism spectrum disorder in an individual under twenty-one years of age.

The bill would provide that, as of January 1, 2014, to the extent it requires benefits that exceed the essential health benefits required under the federal Patient Protection and Affordable Care Act, the specific benefits that exceed the required essential health benefits shall not be required of a qualified health plan offered in this state through an exchange.

The bill would provide that the required coverage shall not be subject to any limits on the number of visits for treatment,

and that such coverage shall not be subject to dollar limits, deductibles, copayments, or coinsurance provisions that are less favorable than the equivalent provisions applicable to a general physical illness.

The bill would provide that the required coverage shall be subject to a maximum benefit of seventy thousand dollars per year for the first three years of treatment and twenty thousand dollars per year for each year of treatment thereafter until twenty-one years of age.

The bill would provide that, on or after January 1, 2015, the Director of Insurance shall annually adjust the maximum benefit for inflation by using the medical care component of the Consumer Price Index for All Urban Consumers.

The bill would provide that the Director of Insurance shall grant a small employer (at least two but not more than 50 employees) a waiver from the provisions of this bill if the small employer demonstrates by actual claims experience that compliance with this bill has increased premium costs over a year by two and one-half percent or greater.

Explanation of amendments:

The committee amendments (AM2094) would become the bill.

The committee amendments would clarify that the bill would not apply to qualified health plans in the individual and small group markets sold through and outside the Exchange that are required to include essential health benefits under the federal Patient Protection and Affordable Care Act.

The committee amendments would provide that coverage for behavioral health treatment shall be subject to a maximum benefit of "twenty-five hours per week until the insured reaches twenty-one years of age" rather than "seventy thousand dollars per year for the first three years of treatment and twenty thousand dollars per year for each year of treatment thereafter until the insured reaches twenty-one years of age" subject to an annual inflation adjustment.

The committee amendments would provide that an insurer shall have the right to request a review of an individual's treatment every six months rather than every twelve months.

The committee amendments would omit provisions that would require the Director of Insurance to grant waivers from the requirements of the bill to small employers that demonstrate that compliance has increased premium costs by two and one-half percent or greater in a year.

Mike Gloor, Chairperson