

# The Shifting Landscape of Funding and Laws in California for Autism Diagnosis and Therapies

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I have nothing to disclose.

# Objectives

provide a basic understanding of:

- Primary sources of funding for Autism treatment
- Applicable laws
- Types of “insurance”
- Legal coverage requirements
- Services from RCs and school districts
- Obvious and not so obvious reasons for early assessment
- Overlap of “medically necessary” and “educationally necessary”

# Primary sources of funding

- Regional Centers
- School Districts
- Health Care

# Laws imposing legal requirements:

- **Federal Mental Health Parity and Addiction Equity Act of 2008:** requires mental health to be treated same as medical/surgical conditions regarding co-payments, deductibles, & visit limits. Mental health limitations can be no more restrictive than substantially all medical/surgical benefits. Quantitative and non-quantitative treatment limitations. A broad scope of therapies required by regulations, including intermediate forms of treatment (e.g, **residential**, intensive outpatient). Through ACA mental health requirement, federal law extends to **nearly all plans**.
- **State Autism Mandates:** the mandates of many states require that people with ASD's get medically necessary treatment to "maximize function to the greatest extent practical." Impacts **fully funded plans only**.
- **EPSDT (Early Periodic Screening, Diagnosis & Treatment).** Special federal law for **children on Medicaid**, requires screening, assessment, & treatment for MANY conditions.
- ACA's other provisions – allows external medical reviews, no exclusions for pre-existing conditions, no maximum limits on payments & other consumer protections.

# Types of “insurance”

- Self-funded plans
  - Employer pays claims, common in large companies
  - ERISA; ACA; MHPAE act; not state mandates
  - Often exclude or limit autism/DD treatments
  - May need to get waiver through RC if denied BHT
- Fully-funded plans
  - Individual plans on/off ACA exchange
  - Small/medium employer plans
  - MHPAE act and state mandates
- Medi-cal
  - Not regulated by state mandates
  - BHT/Autism tx mandated through EPSDT law
  - Fee for service medi-cal different – may need to get waiver
- Other government plans
  - ABA, speech, ot required but treatments may be limited; need pre-approvals
- TRICARE
  - Offers ABA; in network providers; need pre-approvals
- CalPERS –
  - Offered plans varied, some self-funded

# Legal coverage requirements

- Comprehensive Diagnostic Evaluation (Mental Health/Developmental)
- Those w/ dx of autism - Behavior therapy (commercial & Medi-Cal) & other remediable conditions (Medi-Cal)
- Those w/ ASD - Speech, PT, & OT (as much as medically necessary)
- Assistive devices (up to 50% of costs for private plans)
- Those w/ MH conditions – Mental health therapy, full spectrum of care (Commercial: Inpatient, residential, partial hospital intensive outpatient, outpatient, & Wilderness). For Medi-Cal: Varies by county.
- Must be Medically Necessary

# Regional Centers

- Payors of last resort
- Required to use generic services
- Autism and mental health are medical conditions
- Most autism services through medi-cal HMOs
- Can provide medi-cal waivers if needed

# School Districts

- Must provide educational benefit appropriate to the child's circumstances
- Educated with non-disabled peers to the maximum extent appropriate to the needs of both
- Term to “maximize potential” a no-no!!!



# Early assessments

- Obvious reasons
  - Research proven outcomes!!!!
- Not so obvious reasons
  - Earliest first contact
  - Brochure better than just advice
  - Research based information before starting school

# overlap

- Medically Necessary
  - Treatment to alleviate the disability; improve quality of life; Habilitative services to maximize function to the greatest extent practicable
- Educationally necessary
  - Services to provide a Free Appropriate Public Education in the least restrictive environment

ADA “A public accommodation shall afford goods, services, facilities, privileges, advantages, and accommodations to an individual with a disability in the most integrated setting appropriate to the needs of the individual.” section 36.203

# Mental Health and Autism Insurance Project

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