

HB 1919, Senate committee printing, as follows:

(1) Insert a new SECTION of the bill, appropriately numbered, to read as follows:

SECTION \_\_\_\_\_. The heading to Subchapter A, Chapter 1355, Insurance Code, is amended to read as follows:

SUBCHAPTER A. GROUP HEALTH BENEFIT PLAN COVERAGE  
FOR CERTAIN SERIOUS MENTAL ILLNESSES AND OTHER DISORDERS

(2) Insert a new SECTION of the bill, appropriately numbered, to read as follows:

SECTION \_\_\_\_\_. Section 1355.001, Insurance Code, is amended by amending Subdivision (1) and by adding Subdivisions (3) and (4) to read as follows:

(1) "Serious mental illness" means the following psychiatric illnesses as defined by the American Psychiatric Association in the Diagnostic and Statistical Manual (DSM):

- (A) bipolar disorders (hypomanic, manic, depressive, and mixed);
- (B) depression in childhood and adolescence;
- (C) major depressive disorders (single episode or recurrent);
- (D) obsessive-compulsive disorders;
- (E) paranoid and other psychotic disorders;
- (F) ~~[pervasive developmental disorders;~~
- ~~[(G)]~~ schizo-affective disorders (bipolar or depressive); and
- (G) [(H)] schizophrenia.

(3) "Autism spectrum disorder" means a neurobiological disorder that includes autism, Asperger's syndrome, or Pervasive Developmental Disorder--Not Otherwise Specified.

(4) "Neurobiological disorder" means an illness of the nervous system caused by genetic, metabolic, or other biological factors.

(3) Insert a new SECTION of the bill, appropriately numbered, to read as follows:

SECTION \_\_\_\_\_. Subchapter A, Chapter 1355, Insurance Code, is amended by adding Section 1355.015 to read as follows:

Sec. 1355.015. REQUIRED COVERAGE FOR CERTAIN CHILDREN. (a)

At a minimum, a health benefit plan must provide coverage as provided by this section to an enrollee older than two years of age and younger than six years of age who is diagnosed with autism spectrum disorder. If an enrollee who is being treated for autism spectrum disorder becomes six years of age or older and continues to need treatment, this subsection does not preclude coverage of treatment and services described by Subsection (b).

(b) The health benefit plan must provide coverage under this section to the enrollee for all generally recognized services prescribed in relation to autism spectrum disorder by the enrollee's primary care physician in the treatment plan recommended by that physician. An individual providing treatment prescribed under this subsection must be a health care practitioner:

(1) who is licensed, certified, or registered by an appropriate agency of this state;

(2) whose professional credential is recognized and accepted by an appropriate agency of the United States; or

(3) who is certified as a provider under the TRICARE military health system.

(c) For purposes of Subsection (b), "generally recognized services" may include services such as:

(1) evaluation and assessment services;

(2) applied behavior analysis;

(3) behavior training and behavior management;

(4) speech therapy;

(5) occupational therapy;

(6) physical therapy; or

(7) medications or nutritional supplements used to address symptoms of autism spectrum disorder.

(d) Coverage under Subsection (b) may be subject to annual deductibles, copayments, and coinsurance that are consistent with annual deductibles, copayments, and coinsurance required for other coverage under the health benefit plan.

(e) Notwithstanding any other law, this section does not apply to a standard health benefit plan provided under Chapter 1507.

(4) Renumber the SECTIONS of the bill accordingly.