SUMMARY—Revises provisions relating to autism. (BDR 38-106)

FISCAL NOTE: Effect on Local Government: May have Fiscal Impact. Effect on the State: Yes.

AN ACT relating to autism; revising requirements governing the statewide standard for measuring outcomes and assessing and evaluating certain persons with autism spectrum disorders; revising requirements governing early intervention services for persons with autism spectrum disorders; requiring an insurer to accept as dispositive certain diagnoses of persons with autism spectrum disorders for purposes related to required coverage for the diagnosis and treatment of such disorders; requiring insurers to cover such diagnosis and treatment provided by any provider of health care acting within his or her scope of practice; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law requires the Aging and Disability Services Division of the Department of Health and Human Services to prescribe by regulation a statewide standard for measuring outcomes and assessing and evaluating persons with autism spectrum disorders through the age of 21 years who receive services through the State or a local government or an agency thereof. Existing law requires those regulations to designate a protocol based upon accepted best practices guidelines which includes at least one standardized assessment instrument that requires direct observation by the





professional conducting the assessment for determining whether a person is a person with autism spectrum disorder. Existing law requires such direct observation to include an evaluation to measure behaviors of the person which are consistent with autism spectrum disorder, cognitive functioning, language functioning and adaptive functioning. (NRS 427A.872) Section 3 of this bill removes the requirements that the statewide standard include a specific protocol, a standardized assessment instrument and an evaluation to measure behaviors which are consistent with autism spectrum disorder. Instead, section 3 requires the statewide standard to require direct observation and an assessment to determine whether a person is a person with autism spectrum disorder. Section 3 authorizes any provider of health care acting within his or her scope of practice to conduct such direct observation and assessment. Section 4 of this bill makes similar revisions relating to early intervention services provided by the Division for children with autism spectrum disorders. Specifically, section 4: (1) replaces references to an evaluation of a child who may have autism spectrum disorder by the Division with references to an assessment of such a child; and (2) authorizes any provider of health care acting within his or her scope of practice to conduct such an assessment. Section 1 of this bill defines the term "provider of health care" for those purposes, and section 2 of this bill prescribes the applicability of that definition.

Existing law requires the Division to ensure that employees and contractors of the Division who provide early intervention services to children with autism spectrum disorders possess the knowledge and skills necessary to serve children with autism spectrum disorders, including the screening of a child for autism spectrum disorder at certain age levels and frequency. (NRS





427A.878) **Section 4** specifies that such persons must possess the knowledge and skills necessary to conduct early and periodic developmental screening of a child for that purpose.

Existing law requires certain plans of health insurance, including insurance for public employees and Medicaid managed care plans, to cover screening for and diagnosis of autism spectrum disorders and for treatment of autism spectrum disorders to persons under the age of 18 years or, if enrolled in high school, until the person reaches the age of 22 years. In order for coverage of such treatment to be required, existing law requires: (1) the diagnosis to be rendered by a licensed physician or psychologist; (2) the treatment to be included in a treatment plan developed by a licensed physician or psychologist; and (3) the treatment to be provided by or under the supervision of a licensed physician, psychologist or behavior analyst. (NRS 287.0276, 287.04335, 689A.0435, 689B.0335, 689C.1655, 695C.050, 695C.1717, 695G.1645) Sections 5-10 of this bill remove requirements that, in order for such coverage to be required, the diagnosis must be rendered by specific providers of health care and the treatment plan must be developed and carried out by specific providers of health care. Instead, sections 5-10 require certain plans of health insurance to cover such diagnosis and treatment if the diagnosis, development of a treatment plan and treatment are performed by any provider of health care acting within his or her scope of practice. Sections 5-10 also require an insurer to accept as dispositive for the purposes of such coverage any diagnosis of an autism spectrum disorder that is rendered in accordance with the statewide standard prescribed pursuant to section 3.





THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. Chapter 427A of NRS is hereby amended by adding thereto a new section to read as follows:

"Provider of health care" has the meaning ascribed to it in NRS 629.031.

Sec. 2. NRS 427A.871 is hereby amended to read as follows:

427A.871 As used in NRS 427A.871 to 427A.8803, inclusive, *and section 1 of this act*, unless the context otherwise requires, the words and terms defined in NRS 427A.8713 and 427A.8715 *and section 1 of this act* have the meanings ascribed to them in those sections.

Sec. 3. NRS 427A.872 is hereby amended to read as follows:

427A.872 1. The Division, in cooperation and guidance with the Department of Education, representatives of the school districts in this State and the Commission, shall prescribe by regulation a statewide standard for measuring outcomes and assessing [and evaluating] persons with autism spectrum disorders through the age of 21 years who receive services through the State or a local government or an agency thereof. The regulations must [designate a protocol based upon accepted] align with best practices guidelines [which includes at least one standardized assessment instrument that requires] and require direct observation by [the professional] a provider of health care conducting [the] an assessment for determining whether a person is a person with autism spectrum disorder . [, which] The statewide standard must be used by personnel employed by the State or a local government or an agency thereof who provide assessments, interventions and





diagnoses of persons with autism spectrum disorders through the age of 21 years and by the persons with whom the State or a local government or an agency thereof contracts to provide assessments, interventions and diagnoses of persons with autism spectrum disorders through the age of 21 years. [The protocol must require that the direct observation conducted by a professional pursuant to this subsection include, without limitation, an evaluation to measure behaviors of the person which are consistent with autism spectrum disorder, cognitive functioning, language functioning and adaptive functioning.]

2. The statewide standard prescribed pursuant to subsection 1 must authorize a provider of health care to directly observe a person and complete an assessment to determine whether the person is a person with autism spectrum disorder so long as conducting such observation and completing such an assessment are within the scope of practice of the provider of health care.

3. The [protocol designated] *statewide standard prescribed* pursuant to subsection 1 must be used upon intake of a person suspected of having autism spectrum disorder or at any later time if a person is suspected of having autism spectrum disorder after intake. The results of an assessment must be provided to the parent or legal guardian of the person, if applicable.

[3.] 4. The Division shall prescribe the form and content of reports relating to persons with autism spectrum disorders through the age of 21 years that must be reported to the Division pursuant to NRS 388.451 and 615.205. Except as otherwise provided in NRS 388.451, the Division shall ensure that the information is reported in a manner which:





(a) Allows the Division to document the services provided to and monitor the progress of each person with autism spectrum disorder through the age of 21 years who receives services from the State or an agency thereof; and

(b) Ensures that information reported for each person who receives services which identifies the person is kept confidential, consistent with the Family Educational Rights and Privacy Act of 1974, 20 U.S.C. § 1232g, and any other applicable state and federal privacy laws.

[4.] 5. The Division shall prepare annually a summary of the reports submitted pursuant to NRS 388.451 and 615.205 and make the summary publicly available. The Division shall ensure that information contained in the summary does not identify a person who received services.

Sec. 4. NRS 427A.878 is hereby amended to read as follows:

427A.878 1. The Division shall ensure that the personnel employed by the Division who provide early intervention services to children with autism spectrum disorders and the persons with whom the Division contracts to provide early intervention services to children with autism spectrum disorders possess the knowledge and skills necessary to serve children with autism spectrum disorders, including, without limitation:

(a) [The] *Early and periodic developmental* screening of a child for autism spectrum disorder at the age levels and frequency recommended by the American Academy of Pediatrics, or its successor organization;

(b) The procedure for **[evaluating]** *assessing* children who demonstrate behaviors that are consistent with autism spectrum disorders, which procedure must require the use of the statewide





standard for measuring outcomes and assessing [and evaluating] persons with autism spectrum disorders through the age of 21 years prescribed pursuant to NRS 427A.872;

(c) The procedure for enrolling a child in early intervention services upon determining that the child has autism spectrum disorder;

(d) Methods of providing support to children with autism spectrum disorders and their families; and

(e) The procedure for developing an individualized family service plan in accordance with Part C of the Individuals with Disabilities Education Act, 20 U.S.C. §§ 1431 et seq., or other appropriate plan for the child.

2. The Division shall ensure that the personnel employed by the Division to provide early intervention services to children with autism spectrum disorders and the persons with whom the Division contracts to provide early intervention services to children with autism spectrum disorders:

(a) Possess the knowledge and understanding of the scientific research and support for the methods and approaches for serving children with autism spectrum disorders and the ability to recognize the difference between an approach or method that is scientifically validated and one that is not;

(b) Possess the knowledge to accurately describe to parents and guardians the research supporting the methods and approaches, including, without limitation, the knowledge necessary to provide an explanation that a method or approach is experimental if it is not supported by scientific evidence;





(c) Immediately notify a parent or legal guardian if a child is identified as being at risk for a diagnosis of autism spectrum disorder and refer the parent or legal guardian to the appropriate professionals for further evaluation and simultaneously refer the parent or legal guardian to any appropriate early intervention services and strategies; and

(d) Provide the parent or legal guardian with information on evidence-based treatments and interventions that may assist the child in the child's development and advancement.

3. The Division shall ensure that the personnel employed by the Division who provide early intervention screenings to children and the persons with whom the Division contracts to provide early intervention screenings to children perform screenings of children for autism spectrum disorders at the age levels and frequency recommended by the American Academy of Pediatrics, or its successor organization.

4. The Division shall ensure that:

(a) For a child who may have autism spectrum disorder, the personnel employed by the Division who provide early intervention screenings to children and the persons with whom the Division contracts to provide early intervention screenings to children use the [protocol designated] statewide standard prescribed pursuant to NRS 427A.872 for determining whether a child has autism spectrum disorder.

(b) An initial [evaluation] *assessment* of the cognitive, communicative, social, emotional and behavioral condition and adaptive skill level of a child with autism spectrum disorder is conducted *by a provider of health care acting within his or her scope of practice* to determine the baseline of the child.





(c) A subsequent [evaluation] assessment is conducted by a provider of health care acting within his or her scope of practice upon the child's conclusion of the early intervention services to determine the progress made by the child from the time of his or her initial screening.

Sec. 5. NRS 287.0276 is hereby amended to read as follows:

287.0276 1. The governing body of any county, school district, municipal corporation, political subdivision, public corporation or other local governmental agency of the State of Nevada that provides health insurance through a plan of self-insurance must provide coverage for screening for and diagnosis of autism spectrum disorders and for treatment of autism spectrum disorders to persons covered by the plan of self-insurance under the age of 18 years or, if enrolled in high school, until the person reaches the age of 22 years. *For the purposes of such coverage, the governing body of a county, school district, municipal corporation, political subdivision, public corporation or other local governmental agency shall accept as dispositive any diagnosis of an autism spectrum disorder that is rendered in accordance with the statewide standard for measuring outcomes and assessing persons with autism spectrum disorders through the age of 21 years prescribed pursuant to NRS 427A.872.*

2. Coverage provided under this section is subject to:

(a) A maximum benefit of the actuarial equivalent of \$72,000 per year for applied behavior analysis treatment; and

(b) Copayment, deductible and coinsurance provisions and any other general exclusion or limitation of a plan of self-insurance to the same extent as other medical services or prescription drugs covered by the policy.





3. A governing body of any county, school district, municipal corporation, political subdivision, public corporation or other local governmental agency of the State of Nevada that provides health insurance through a plan of self-insurance which provides coverage for outpatient care shall not:

(a) Require an insured to pay a higher deductible, copayment or coinsurance or require a longer waiting period for coverage for outpatient care related to autism spectrum disorders than is required for other outpatient care covered by the plan of self-insurance; or

(b) Refuse to issue a plan of self-insurance or cancel a plan of self-insurance solely because the person applying for or covered by the plan of self-insurance uses or may use in the future any of the services listed in subsection 1.

4. Except as otherwise provided in subsections 1 and 2, a governing body of any county, school district, municipal corporation, political subdivision, public corporation or other local governmental agency of the State of Nevada that provides health insurance through a plan of self-insurance shall not limit the number of visits an insured may make to any person, entity or group for treatment of autism spectrum disorders.

5. Treatment of autism spectrum disorders must be identified in a treatment plan and may include medically necessary habilitative or rehabilitative care, prescription care, psychiatric care, psychological care, behavioral therapy or therapeutic care that is:

(a) Prescribed for a person diagnosed with an autism spectrum disorder by a [licensed physician or licensed psychologist;] provider of health care acting within his or her scope of practice; and





(b) Provided for a person diagnosed with an autism spectrum disorder by a [licensed physician, licensed behavior analyst or other provider that is supervised by the licensed physician, psychologist or behavior analyst.] provider of health care acting within his or her scope of practice.

 \rightarrow A governing body of any county, school district, municipal corporation, political subdivision, public corporation or other local governmental agency of the State of Nevada that provides health insurance through a plan of self-insurance may request a copy of and review a treatment plan created pursuant to this subsection.

6. A plan of self-insurance subject to the provisions of this chapter that is delivered, issued for delivery or renewed on or after [July] January 1, [2011,] 2026, has the legal effect of including the coverage required by subsection 1, and any provision of the plan of self-insurance or the renewal which is in conflict with subsection 1 or 2 is void.

7. Nothing in this section shall be construed as requiring a governing body of any county, school district, municipal corporation, political subdivision, public corporation or other local governmental agency of the State of Nevada that provides health insurance through a plan of self-insurance to provide reimbursement to a school for services delivered through school services.

8. As used in this section:

(a) "Applied behavior analysis" means the design, implementation and evaluation of environmental modifications using behavioral stimuli and consequences to produce socially significant improvement in human behavior, including, without limitation, the use of direct





observation, measurement and functional analysis of the relations between environment and behavior.

(b) "Autism spectrum disorder" has the meaning ascribed to it in NRS 427A.875.

(c) "Behavioral therapy" means any interactive therapy derived from evidence-based research, including, without limitation, discrete trial training, early intensive behavioral intervention, intensive intervention programs, pivotal response training and verbal behavior provided by a licensed psychologist, licensed behavior analyst, licensed assistant behavior analyst or registered behavior technician.

(d) "Evidence-based research" means research that applies rigorous, systematic and objective procedures to obtain valid knowledge relevant to autism spectrum disorders.

(e) "Habilitative or rehabilitative care" means counseling, guidance and professional services and treatment programs, including, without limitation, applied behavior analysis, that are necessary to develop, maintain and restore, to the maximum extent practicable, the functioning of a person.

(f) "Licensed assistant behavior analyst" has the meaning ascribed to the term "assistant behavior analyst" in NRS 641D.020.

(g) "Licensed behavior analyst" has the meaning ascribed to the term "behavior analyst" in NRS 641D.030.

(h) "Prescription care" means medications prescribed by a licensed physician and any healthrelated services deemed medically necessary to determine the need or effectiveness of the medications.





(i) "Provider of health care" has the meaning ascribed to it in NRS 629.031.

(*j*) "Psychiatric care" means direct or consultative services provided by a psychiatrist licensed in the state in which the psychiatrist practices.

[(j)] (k) "Psychological care" means direct or consultative services provided by a psychologist licensed in the state in which the psychologist practices.

[(k)] (*l*) "Registered behavior technician" has the meaning ascribed to it in NRS 641D.090.

[(1)] (*m*) "Screening for autism spectrum disorders" means all medically appropriate assessments, evaluations or tests to diagnose whether a person has an autism spectrum disorder.

[(m)] (n) "Therapeutic care" means services provided by licensed or certified speech-language pathologists, occupational therapists and physical therapists.

[(n)] (o) "Treatment plan" means a plan to treat an autism spectrum disorder that is [prescribed] *developed* by a [licensed physician or licensed psychologist and may be developed pursuant to a comprehensive evaluation in coordination with a licensed behavior analyst.] provider of health care acting within his or her scope of practice after he or she has assessed the person for whom the treatment plan is developed.

Sec. 6. NRS 689A.0435 is hereby amended to read as follows:

689A.0435 1. A health benefit plan must provide an option of coverage for screening for and diagnosis of autism spectrum disorders and for treatment of autism spectrum disorders for persons covered by the policy under the age of 18 years or, if enrolled in high school, until the person reaches the age of 22 years. *For the purposes of such coverage, an insurer shall accept as dispositive any diagnosis of an autism spectrum disorder that is rendered in accordance with*





the statewide standard for measuring outcomes and assessing persons with autism spectrum disorders through the age of 21 years prescribed pursuant to NRS 427A.872.

2. Optional coverage provided pursuant to this section must be subject to:

(a) A maximum benefit of not less than the actuarial equivalent of \$72,000 per year for applied behavior analysis treatment; and

(b) Copayment, deductible and coinsurance provisions and any other general exclusions or limitations of a policy of health insurance to the same extent as other medical services or prescription drugs covered by the policy.

3. A health benefit plan that offers or issues a policy of health insurance which provides coverage for outpatient care shall not:

(a) Require an insured to pay a higher deductible, copayment or coinsurance or require a longer waiting period for optional coverage for outpatient care related to autism spectrum disorders than is required for other outpatient care covered by the policy; or

(b) Refuse to issue a policy of health insurance or cancel a policy of health insurance solely because the person applying for or covered by the policy uses or may use in the future any of the services listed in subsection 1.

4. Except as otherwise provided in subsections 1 and 2, an insurer who offers optional coverage pursuant to subsection 1 shall not limit the number of visits an insured may make to any person, entity or group for treatment of autism spectrum disorders.





5. Treatment of autism spectrum disorders must be identified in a treatment plan and may include medically necessary habilitative or rehabilitative care, prescription care, psychiatric care, psychological care, behavioral therapy or therapeutic care that is:

(a) Prescribed for a person diagnosed with an autism spectrum disorder by a [licensed physician or licensed psychologist;] provider of health care acting within his or her scope of practice; and

(b) Provided for a person diagnosed with an autism spectrum disorder by a [licensed physician, licensed psychologist, licensed behavior analyst or other provider that is supervised by the licensed physician, psychologist or behavior analyst.] provider of health care acting within his or her scope of practice.

 \rightarrow An insurer may request a copy of and review a treatment plan created pursuant to this subsection.

6. Nothing in this section shall be construed as requiring an insurer to provide reimbursement to a school for services delivered through school services.

7. As used in this section:

(a) "Applied behavior analysis" means the design, implementation and evaluation of environmental modifications using behavioral stimuli and consequences to produce socially significant improvement in human behavior, including, without limitation, the use of direct observation, measurement and functional analysis of the relations between environment and behavior.

(b) "Autism spectrum disorder" has the meaning ascribed to it in NRS 427A.875.



(c) "Behavioral therapy" means any interactive therapy derived from evidence-based research, including, without limitation, discrete trial training, early intensive behavioral intervention, intensive intervention programs, pivotal response training and verbal behavior provided by a licensed psychologist, licensed behavior analyst, licensed assistant behavior analyst or registered behavior technician.

(d) "Evidence-based research" means research that applies rigorous, systematic and objective procedures to obtain valid knowledge relevant to autism spectrum disorders.

(e) "Habilitative or rehabilitative care" means counseling, guidance and professional services and treatment programs, including, without limitation, applied behavior analysis, that are necessary to develop, maintain and restore, to the maximum extent practicable, the functioning of a person.

(f) "Licensed assistant behavior analyst" has the meaning ascribed to the term "assistant behavior analyst" in NRS 641D.020.

(g) "Licensed behavior analyst" has the meaning ascribed to the term "behavior analyst" in NRS 641D.030.

(h) "Prescription care" means medications prescribed by a licensed physician and any healthrelated services deemed medically necessary to determine the need or effectiveness of the medications.

(i) "Provider of health care" has the meaning ascribed to it in NRS 629.031.

(*j*) "Psychiatric care" means direct or consultative services provided by a psychiatrist licensed in the state in which the psychiatrist practices.





[(j)] (k) "Psychological care" means direct or consultative services provided by a psychologist licensed in the state in which the psychologist practices.

[(k)] (l) "Registered behavior technician" has the meaning ascribed to it in NRS 641D.100.

[(1)] (*m*) "Screening for autism spectrum disorders" means medically necessary assessments, evaluations or tests to screen and diagnose whether a person has an autism spectrum disorder.

[(m)] (n) "Therapeutic care" means services provided by licensed or certified speech-language pathologists, occupational therapists and physical therapists.

[(n)] (o) "Treatment plan" means a plan to treat an autism spectrum disorder that is [prescribed] *developed* by a [licensed physician or licensed psychologist and may be developed pursuant to a comprehensive evaluation in coordination with a licensed behavior analyst.] provider of health care acting within his or her scope of practice after he or she has assessed the person for whom the treatment plan is developed.

Sec. 7. NRS 689B.0335 is hereby amended to read as follows:

689B.0335 1. A health benefit plan must provide coverage for screening for and diagnosis of autism spectrum disorders and for treatment of autism spectrum disorders to persons covered by the policy of group health insurance under the age of 18 years or, if enrolled in high school, until the person reaches the age of 22 years. *For the purposes of such coverage, an insurer shall accept as dispositive any diagnosis of an autism spectrum disorder that is rendered in accordance with the statewide standard for measuring outcomes and assessing persons with autism spectrum disorders through the age of 21 years prescribed pursuant to NRS 427A.872.*

2. Coverage provided under this section is subject to:





(a) A maximum benefit of the actuarial equivalent of \$72,000 per year for applied behavior analysis treatment; and

(b) Copayment, deductible and coinsurance provisions and any other general exclusion or limitation of a policy of group health insurance to the same extent as other medical services or prescription drugs covered by the policy.

3. A health benefit plan that offers or issues a policy of group health insurance which provides coverage for outpatient care shall not:

(a) Require an insured to pay a higher deductible, copayment or coinsurance or require a longer waiting period for coverage for outpatient care related to autism spectrum disorders than is required for other outpatient care covered by the policy; or

(b) Refuse to issue a policy of group health insurance or cancel a policy of group health insurance solely because the person applying for or covered by the policy uses or may use in the future any of the services listed in subsection 1.

4. Except as otherwise provided in subsections 1 and 2, an insurer shall not limit the number of visits an insured may make to any person, entity or group for treatment of autism spectrum disorders.

5. Treatment of autism spectrum disorders must be identified in a treatment plan and may include medically necessary habilitative or rehabilitative care, prescription care, psychiatric care, psychological care, behavioral therapy or therapeutic care that is:





(a) Prescribed for a person diagnosed with an autism spectrum disorder by a [licensed physician or licensed psychologist;] provider of health care acting within his or her scope of practice; and

(b) Provided for a person diagnosed with an autism spectrum disorder by a [licensed physician, licensed behavior analyst or other provider that is supervised by the licensed physician, psychologist or behavior analyst.] provider of health care acting within his or her scope of practice.

 \rightarrow An insurer may request a copy of and review a treatment plan created pursuant to this subsection.

6. A policy subject to the provisions of this chapter that is delivered, issued for delivery or renewed on or after January 1, [2011,] 2026, has the legal effect of including the coverage required by subsection 1, and any provision of the policy or the renewal which is in conflict with subsection 1 or 2 is void.

7. Nothing in this section shall be construed as requiring an insurer to provide reimbursement to a school for services delivered through school services.

8. As used in this section:

(a) "Applied behavior analysis" means the design, implementation and evaluation of environmental modifications using behavioral stimuli and consequences to produce socially significant improvement in human behavior, including, without limitation, the use of direct observation, measurement and functional analysis of the relations between environment and behavior.





(b) "Autism spectrum disorder" has the meaning ascribed to it in NRS 427A.875.

(c) "Behavioral therapy" means any interactive therapy derived from evidence-based research, including, without limitation, discrete trial training, early intensive behavioral intervention, intensive intervention programs, pivotal response training and verbal behavior provided by a licensed psychologist, licensed behavior analyst, licensed assistant behavior analyst or registered behavior technician.

(d) "Evidence-based research" means research that applies rigorous, systematic and objective procedures to obtain valid knowledge relevant to autism spectrum disorders.

(e) "Habilitative or rehabilitative care" means counseling, guidance and professional services and treatment programs, including, without limitation, applied behavior analysis, that are necessary to develop, maintain and restore, to the maximum extent practicable, the functioning of a person.

(f) "Licensed assistant behavior analyst" has the meaning ascribed to the term "assistant behavior analyst" in NRS 641D.020.

(g) "Licensed behavior analyst" has the meaning ascribed to the term "behavior analyst" in NRS 641D.030.

(h) "Prescription care" means medications prescribed by a licensed physician and any healthrelated services deemed medically necessary to determine the need or effectiveness of the medications.

(i) "Provider of health care" has the meaning ascribed to it in NRS 629.031.





(*j*) "Psychiatric care" means direct or consultative services provided by a psychiatrist licensed in the state in which the psychiatrist practices.

[(j)] (k) "Psychological care" means direct or consultative services provided by a psychologist licensed in the state in which the psychologist practices.

[(k)] (l) "Registered behavior technician" has the meaning ascribed to it in NRS 641D.100.

[(1)] (*m*) "Screening for autism spectrum disorders" means medically necessary assessments, evaluations or tests to screen and diagnose whether a person has an autism spectrum disorder.

[(m)] (n) "Therapeutic care" means services provided by licensed or certified speech-language pathologists, occupational therapists and physical therapists.

[(n)] (o) "Treatment plan" means a plan to treat an autism spectrum disorder that is [prescribed] developed by a [licensed physician or licensed psychologist and may be developed pursuant to a comprehensive evaluation in coordination with a licensed behavior analyst.] provider of health care acting within his or her scope of practice after he or she has assessed the person for whom the treatment plan is developed.

Sec. 8. NRS 689C.1655 is hereby amended to read as follows:

689C.1655 1. A health benefit plan must provide coverage for screening for and diagnosis of autism spectrum disorders and for treatment of autism spectrum disorders to persons covered by the health benefit plan under the age of 18 years or, if enrolled in high school, until the person reaches the age of 22 years. *For the purposes of such coverage, a carrier shall accept as dispositive any diagnosis of an autism spectrum disorder that is rendered in accordance with*





the statewide standard for measuring outcomes and assessing persons with autism spectrum disorders through the age of 21 years prescribed pursuant to NRS 427A.872.

2. Coverage provided under this section is subject to:

(a) A maximum benefit of the actuarial equivalent of \$72,000 per year for applied behavior analysis treatment; and

(b) Copayment, deductible and coinsurance provisions and any other general exclusion or limitation of a health benefit plan to the same extent as other medical services or prescription drugs covered by the plan.

3. A health benefit plan that offers or issues a policy of group health insurance which provides coverage for outpatient care shall not:

(a) Require an insured to pay a higher deductible, copayment or coinsurance or require a longer waiting period for coverage for outpatient care related to autism spectrum disorders than is required for other outpatient care covered by the plan; or

(b) Refuse to issue a health benefit plan or cancel a health benefit plan solely because the person applying for or covered by the plan uses or may use in the future any of the services listed in subsection 1.

4. Except as otherwise provided in subsections 1 and 2, a carrier shall not limit the number of visits an insured may make to any person, entity or group for treatment of autism spectrum disorders.





5. Treatment of autism spectrum disorders must be identified in a treatment plan and may include medically necessary habilitative or rehabilitative care, prescription care, psychiatric care, psychological care, behavioral therapy or therapeutic care that is:

(a) Prescribed for a person diagnosed with an autism spectrum disorder by a [licensed physician or licensed psychologist;] provider of health care acting within his or her scope of practice; and

(b) Provided for a person diagnosed with an autism spectrum disorder by a [licensed physician, licensed psychologist, licensed behavior analyst or other provider that is supervised by the licensed physician, psychologist or behavior analyst.] provider of health care acting within his or her scope of practice.

→ A carrier may request a copy of and review a treatment plan created pursuant to this subsection.

6. A health benefit plan subject to the provisions of this chapter that is delivered, issued for delivery or renewed on or after January 1, [2011,] 2026, has the legal effect of including the coverage required by subsection 1, and any provision of the plan or the renewal which is in conflict with subsection 1 or 2 is void.

7. Nothing in this section shall be construed as requiring a carrier to provide reimbursement to a school for services delivered through school services.

8. As used in this section:

(a) "Applied behavior analysis" means the design, implementation and evaluation of environmental modifications using behavioral stimuli and consequences to produce socially significant improvement in human behavior, including, without limitation, the use of direct





observation, measurement and functional analysis of the relations between environment and behavior.

(b) "Autism spectrum disorder" has the meaning ascribed to it in NRS 427A.875.

(c) "Behavioral therapy" means any interactive therapy derived from evidence-based research, including, without limitation, discrete trial training, early intensive behavioral intervention, intensive intervention programs, pivotal response training and verbal behavior provided by a licensed psychologist, licensed behavior analyst, licensed assistant behavior analyst or registered behavior technician.

(d) "Evidence-based research" means research that applies rigorous, systematic and objective procedures to obtain valid knowledge relevant to autism spectrum disorders.

(e) "Habilitative or rehabilitative care" means counseling, guidance and professional services and treatment programs, including, without limitation, applied behavior analysis, that are necessary to develop, maintain and restore, to the maximum extent practicable, the functioning of a person.

(f) "Licensed assistant behavior analyst" has the meaning ascribed to the term "assistant behavior analyst" in NRS 641D.020.

(g) "Licensed behavior analyst" has the meaning ascribed to the term "behavior analyst" in NRS 641D.030.

(h) "Prescription care" means medications prescribed by a licensed physician and any healthrelated services deemed medically necessary to determine the need or effectiveness of the medications.





(i) "Provider of health care" has the meaning ascribed to it in NRS 629.031.

(*j*) "Psychiatric care" means direct or consultative services provided by a psychiatrist licensed in the state in which the psychiatrist practices.

[(j)] (k) "Psychological care" means direct or consultative services provided by a psychologist licensed in the state in which the psychologist practices.

[(k)] (l) "Registered behavior technician" has the meaning ascribed to it in NRS 641D.100.

[(1)] (*m*) "Screening for autism spectrum disorders" means medically necessary assessments, evaluations or tests to screen and diagnose whether a person has an autism spectrum disorder.

[(m)] (n) "Therapeutic care" means services provided by licensed or certified speech-language pathologists, occupational therapists and physical therapists.

[(n)] (o) "Treatment plan" means a plan to treat an autism spectrum disorder that is [prescribed] developed by a [licensed physician or licensed psychologist and may be developed pursuant to a comprehensive evaluation in coordination with a licensed behavior analyst.] provider of health care acting within his or her scope of practice after he or she has assessed the person for whom the treatment plan is developed.

Sec. 9. NRS 695C.1717 is hereby amended to read as follows:

695C.1717 1. A health care plan issued by a health maintenance organization must provide coverage for screening for and diagnosis of autism spectrum disorders and for treatment of autism spectrum disorders to persons covered by the health care plan under the age of 18 years or, if enrolled in high school, until the person reaches the age of 22 years. *For the purposes of such coverage, a health maintenance organization shall accept as dispositive any diagnosis of an*





autism spectrum disorder that is rendered in accordance with the statewide standard for measuring outcomes and assessing persons with autism spectrum disorders through the age of 21 years prescribed pursuant to NRS 427A.872.

2. Coverage provided under this section is subject to:

(a) A maximum benefit of the actuarial equivalent of \$72,000 per year for applied behavior analysis treatment; and

(b) Copayment, deductible and coinsurance provisions and any other general exclusion or limitation of a health care plan to the same extent as other medical services or prescription drugs covered by the plan.

3. A health care plan issued by a health maintenance organization that provides coverage for outpatient care shall not:

(a) Require an enrollee to pay a higher deductible, copayment or coinsurance or require a longer waiting period for coverage for outpatient care related to autism spectrum disorders than is required for other outpatient care covered by the plan; or

(b) Refuse to issue a health care plan or cancel a health care plan solely because the person applying for or covered by the plan uses or may use in the future any of the services listed in subsection 1.

4. Except as otherwise provided in subsections 1 and 2, a health maintenance organization shall not limit the number of visits an enrollee may make to any person, entity or group for treatment of autism spectrum disorders.





5. Treatment of autism spectrum disorders must be identified in a treatment plan and may include medically necessary habilitative or rehabilitative care, prescription care, psychiatric care, psychological care, behavioral therapy or therapeutic care that is:

(a) Prescribed for a person diagnosed with an autism spectrum disorder by a [licensed physician or licensed psychologist;] provider of health care acting within his or her scope of practice; and

(b) Provided for a person diagnosed with an autism spectrum disorder by a [licensed physician, licensed behavior analyst or other provider that is supervised by the licensed physician, psychologist or behavior analyst.] provider of health care acting within his or her scope of practice.

 \rightarrow A health maintenance organization may request a copy of and review a treatment plan created pursuant to this subsection.

6. Evidence of coverage subject to the provisions of this chapter that is delivered, issued for delivery or renewed on or after January 1, [2011,] 2026, has the legal effect of including the coverage required by subsection 1, and any provision of the evidence of coverage or the renewal which is in conflict with subsection 1 or 2 is void.

7. Nothing in this section shall be construed as requiring a health maintenance organization to provide reimbursement to a school for services delivered through school services.

8. As used in this section:

(a) "Applied behavior analysis" means the design, implementation and evaluation of environmental modifications using behavioral stimuli and consequences to produce socially





significant improvement in human behavior, including, without limitation, the use of direct observation, measurement and functional analysis of the relations between environment and behavior.

(b) "Autism spectrum disorder" has the meaning ascribed to it in NRS 427A.875.

(c) "Behavioral therapy" means any interactive therapy derived from evidence-based research, including, without limitation, discrete trial training, early intensive behavioral intervention, intensive intervention programs, pivotal response training and verbal behavior provided by a licensed psychologist, licensed behavior analyst, licensed assistant behavior analyst or registered behavior technician.

(d) "Evidence-based research" means research that applies rigorous, systematic and objective procedures to obtain valid knowledge relevant to autism spectrum disorders.

(e) "Habilitative or rehabilitative care" means counseling, guidance and professional services and treatment programs, including, without limitation, applied behavior analysis, that are necessary to develop, maintain and restore, to the maximum extent practicable, the functioning of a person.

(f) "Licensed assistant behavior analyst" has the meaning ascribed to the term "assistant behavior analyst" in NRS 641D.020.

(g) "Licensed behavior analyst" has the meaning ascribed to the term "behavior analyst" in NRS 641D.030.





(h) "Prescription care" means medications prescribed by a licensed physician and any healthrelated services deemed medically necessary to determine the need or effectiveness of the medications.

(i) "Provider of health care" has the meaning ascribed to it in NRS 629.031.

(*j*) "Psychiatric care" means direct or consultative services provided by a psychiatrist licensed in the state in which the psychiatrist practices.

[(j)] (k) "Psychological care" means direct or consultative services provided by a psychologist licensed in the state in which the psychologist practices.

[(k)] (l) "Registered behavior technician" has the meaning ascribed to it in NRS 641D.100.

[(1)] (*m*) "Screening for autism spectrum disorders" means medically necessary assessments, evaluations or tests to screen and diagnose whether a person has an autism spectrum disorder.

[(m)] (n) "Therapeutic care" means services provided by licensed or certified speech-language pathologists, occupational therapists and physical therapists.

[(n)] (o) "Treatment plan" means a plan to treat an autism spectrum disorder that is [prescribed] developed by a [licensed physician or licensed psychologist and may be developed pursuant to a comprehensive evaluation in coordination with a licensed behavior analyst.] provider of health care acting within his or her scope of practice after he or she has assessed the person for whom the treatment plan is developed.

Sec. 10. NRS 695G.1645 is hereby amended to read as follows:

695G.1645 1. A health care plan issued by a managed care organization for group coverage must provide coverage for screening for and diagnosis of autism spectrum disorders and for



treatment of autism spectrum disorders to persons covered by the health care plan under the age of 18 years or, if enrolled in high school, until the person reaches the age of 22 years. For the purposes of such coverage, a managed care organization shall accept as dispositive any diagnosis of an autism spectrum disorder that is rendered in accordance with the statewide standard for measuring outcomes and assessing persons with autism spectrum disorders through the age of 21 years prescribed pursuant to NRS 427A.872.

2. A health care plan issued by a managed care organization for individual coverage must provide an option for coverage for screening for and diagnosis of autism spectrum disorders and for treatment of autism spectrum disorders to persons covered by the health care plan under the age of 18 years or, if enrolled in high school, until the person reaches the age of 22 years. *For the purposes of that coverage, the managed care organization shall accept as dispositive any diagnosis of an autism spectrum disorder that is rendered in accordance with the statewide standard for measuring outcomes and assessing persons with autism spectrum disorders through the age of 21 years prescribed pursuant to NRS 427A.872.*

3. Coverage provided under this section is subject to:

(a) A maximum benefit of the actuarial equivalent of \$72,000 per year for applied behavior analysis treatment; and

(b) Copayment, deductible and coinsurance provisions and any other general exclusion or limitation of a health care plan to the same extent as other medical services or prescription drugs covered by the plan.





4. A managed care organization that offers or issues a health care plan which provides coverage for outpatient care shall not:

(a) Require an insured to pay a higher deductible, copayment or coinsurance or require a longer waiting period for coverage for outpatient care related to autism spectrum disorders than is required for other outpatient care covered by the plan; or

(b) Refuse to issue a health care plan or cancel a health care plan solely because the person applying for or covered by the plan uses or may use in the future any of the services listed in subsection 1.

5. Except as otherwise provided in subsections 1, 2 and 3, a managed care organization shall not limit the number of visits an insured may make to any person, entity or group for treatment of autism spectrum disorders.

6. Treatment of autism spectrum disorders must be identified in a treatment plan and may include medically necessary habilitative or rehabilitative care, prescription care, psychiatric care, psychological care, behavioral therapy or therapeutic care that is:

(a) Prescribed for a person diagnosed with an autism spectrum disorder by a [licensed physician or licensed psychologist;] provider of health care acting within his or her scope of practice; and

(b) Provided for a person diagnosed with an autism spectrum disorder by [a licensed physician, licensed psychologist, licensed behavior analyst or other provider that is supervised by the licensed physician, psychologist or behavior analyst.] provider of health care acting within his or her scope of practice.





 \rightarrow A managed care organization may request a copy of and review a treatment plan created pursuant to this subsection.

7. An evidence of coverage subject to the provisions of this chapter that is delivered, issued for delivery or renewed on or after January 1, [2011,] 2026, has the legal effect of including the coverage required by subsection 1, and any provision of the evidence of coverage or the renewal which is in conflict with subsection 1 or 3 is void.

8. Nothing in this section shall be construed as requiring a managed care organization to provide reimbursement to a school for services delivered through school services.

9. As used in this section:

(a) "Applied behavior analysis" means the design, implementation and evaluation of environmental modifications using behavioral stimuli and consequences to produce socially significant improvement in human behavior, including, without limitation, the use of direct observation, measurement and functional analysis of the relations between environment and behavior.

(b) "Autism spectrum disorder" has the meaning ascribed to it in NRS 427A.875.

(c) "Behavioral therapy" means any interactive therapy derived from evidence-based research, including, without limitation, discrete trial training, early intensive behavioral intervention, intensive intervention programs, pivotal response training and verbal behavior provided by a licensed psychologist, licensed behavior analyst, licensed assistant behavior analyst or registered behavior technician.





(d) "Evidence-based research" means research that applies rigorous, systematic and objective procedures to obtain valid knowledge relevant to autism spectrum disorders.

(e) "Habilitative or rehabilitative care" means counseling, guidance and professional services and treatment programs, including, without limitation, applied behavior analysis, that are necessary to develop, maintain and restore, to the maximum extent practicable, the functioning of a person.

(f) "Licensed assistant behavior analyst" has the meaning ascribed to the term "assistant behavior analyst" in NRS 641D.020.

(g) "Licensed behavior analyst" has the meaning ascribed to the term "behavior analyst" in NRS 641D.030.

(h) "Prescription care" means medications prescribed by a licensed physician and any healthrelated services deemed medically necessary to determine the need or effectiveness of the medications.

(i) "Provider of health care" has the meaning ascribed to it in NRS 629.031.

(*j*) "Psychiatric care" means direct or consultative services provided by a psychiatrist licensed in the state in which the psychiatrist practices.

[(j)] (k) "Psychological care" means direct or consultative services provided by a psychologist licensed in the state in which the psychologist practices.

[(k)] (l) "Registered behavior technician" has the meaning ascribed to it in NRS 641D.100.

[(1)] (*m*) "Screening for autism spectrum disorders" means medically necessary assessments, evaluations or tests to screen and diagnose whether a person has an autism spectrum disorder.



[(m)] (n) "Therapeutic care" means services provided by licensed or certified speech-language pathologists, occupational therapists and physical therapists.

[(n)] (o) "Treatment plan" means a plan to treat an autism spectrum disorder that is [prescribed] developed by a [licensed physician or licensed psychologist and may be developed pursuant to a comprehensive evaluation in coordination with a licensed behavior analyst.] provider of health care acting within his or her scope of practice after he or she has assessed the person for whom the treatment plan is developed.

Sec. 11. The provisions of NRS 354.599 do not apply to any additional expenses of a local government that are related to the provisions of this act.

Sec. 12. 1. This section becomes effective upon passage and approval.

2. Sections 1 to 11, inclusive, of this act become effective:

(a) Upon passage and approval for the purpose of adopting any regulations and performing any other preparatory administrative tasks that are necessary to carry out the provisions of this act; and

(b) On January 1, 2026, for all other purposes.



