



Horizon Blue Cross Blue Shield of New Jersey

*Making Healthcare Work*SM

Legislative Bulletin

Pursuant to P.L. 2009, Chapter 15, insured health benefit plans, with the exception of Hospital only plans, and the State Health Benefits Program are required to provide coverage for certain therapies for the treatment of autism and other developmental disabilities.

These requirements are applicable to the State Health Benefits Program and all insured contracts issued or renewed on or after February 9, 2010. Self-insured groups may elect to include these benefits at their next renewal.

Requirements for Autism and Developmental Disabilities

Summary of the requirements:

- Coverage for expenses incurred in screening and diagnosing autism or another developmental disability;
- Coverage for expenses incurred for medically necessary physical therapy, occupational therapy and speech therapy services for the treatment of autism or another developmental disability and;
- Coverage for expenses incurred for medically necessary behavioral interventions based on the principles of applied behavioral analysis (ABA) and related structured behavioral programs for treatment of autism in individuals under 21 years old; and
- Coverage for the “Family Cost Share” expense incurred for certain health care services obtained through the New Jersey Early Intervention System (NJEIS). Eligible expenses are those associated with physical therapy, occupational therapy, speech therapy and behavioral interventions based on ABA or related structured behavior services when provided to a child diagnosed with autism or other developmental disability.

Please note, this bulletin is a summary only and is not intended as legal advice. For further information about the mandate and how it applies to you, please contact your legal counsel.

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3 Penn Plaza East
Newark, NJ 07105-2200