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Senators consider requiring insurance cos. to cover autism

by Bob Bennett

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The role health insurers should be playing in paying for the treatment of autism spectrum disorders was taken up Oct. 23 at a joint hearing of three Senate committees.

Sen. Neil Breslin, D-Bethlehem, put the joint hearing together to explore whether insurers should be mandated to pay for the screening, diagnosis and treatment of autism spectrum disorders, which New York, unlike some other states, does not currently require.

Breslin said he was alarmed by the increase in the number of children identified with autism — about one in 100 are diagnosed with the disease each year, making it more prevalent than AIDS, cancer and diabetes combined.

The three Senate committees — Insurance, Health and Mental Health and Developmental Disabilities — heard testimony from seven different panels.

Those panels — consisting of concerned parents, autism awareness groups, health officials and state insurance officials — discussed current gaps in coverage for those with autism as well as two bills in the Senate that attempt to address those gaps.

The bills — S.2366/A.6001, sponsored by Sen. Charles Fuschillo, R-Merrick, and Assemblyman Harvey Weisenberg, D-Long Beach, and S.6123/A.6888, sponsored by Sen. Shirley Huntley, D-Jamaica, and Assemblyman David Koon, D-Perinton — both aim to mandate coverage but differ in two ways. The Fuschillo/Weisenberg proposal would extend coverage to those 21 and younger and includes a spending cap of \$36,000 per child; the Huntley/Koon plan has neither of those restrictions.

While most of those testifying at the hearing were in support of the bill that does not include the cap, many expressed concern about the added cost during a tough economic period in which spending on health care is already being cut.

But Michael P. Smith, a parent of an 8-year-old autistic child and the chairman of the Foundation for Autism Information and Research, said much of the medical expense is often pushed off onto the taxpayer already.

That's because, Smith said, most of the expense for his son's treatment is paid for by Medicaid.

"I can't tell you how many times I try to pay for it with this card," Smith said, holding out his private insurance card, "But it gets pushed off onto this one," he said gesturing with the Medicaid card.

He said the medical expenses are most often paid for by Medicaid because his private insurance provider will not cover speech therapy and many other treatments for the disease that are not purely physical.

Following the hearing, Kate Powers, counsel to the Senate Insurance Committee, said the committee did

not come to any conclusions as of yet, the hearing was a "gathering of diverse perspectives. We went in with an open mind ... but we're going to have to go through all of the testimony."