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Government of the District of Columbia



Department of Insurance, Securities and Banking

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Testimony of  
**Philip Barlow**  
Associate Commissioner  
Insurance Bureau

*B18-528, Health Insurance Coverage for Children  
with Autism Act of 2009*

Committee on Public Services and Consumer Affairs  
Muriel Bowser, Chairperson  
Council of the District of Columbia

March 24, 2010

John A. Wilson Building  
1350 Pennsylvania Avenue, NW  
Washington, DC 20004  
2:00 PM

**Good Afternoon Chairperson Bowser, Members of the Committee on Public Services and Consumer Affairs, and Committee Staff. I am Philip Barlow, Associate Commissioner for Insurance of the Department of Insurance, Securities and Banking (“Department” or “DISB”). I am here to day on behalf of Commissioner Gennet Purcell. Thank you for providing the Department with the opportunity to present testimony today on Bill 18-528, the Health Insurance Coverage for Children with Autism Act of 2009.**

**The Department is responsible for regulating the activities of most of the financial services companies doing business in the District of Columbia, including insurance companies, health maintenance organizations, and hospital and medical service corporations that provide health benefit plans to District residents. For health benefit plans, our regulatory oversight includes reviewing and approving the policy forms used in the District of Columbia. The Department ensures the policy forms used in the District of Columbia comply with all of the requirements in the District of Columbia Official Code, including complying with all of the health benefit mandates such as the one contained in the legislation under consideration at this hearing.**

**Bill 18-528 would require insurance coverage for the diagnosis of autism spectrum disorders and the evidence-based medically necessary treatment of autism spectrum disorders for individuals under age 21. The Department supports a requirement for coverage of autism spectrum disorders. However, we would like to point out that adding this coverage to health benefit plans may increase the cost of the plan and the Department would look at any increase in premiums that result from the addition of this coverage separately and apart from evaluating the magnitude of a premium rate increase.**

**The Department does have some specific comments about the legislation as follows:**

- **The definitions of “health benefit plan” and “health insurer” are similar to, but not identical to definitions already in the DC Official Code. The Department has reviewed and summarized the various similar definitions and suggests the Council use one consistent definition in this and future legislation.**
  
- **The definition of “Treatment of autism spectrum disorders” requires coverage for speech generating devices “prescribed by a licensed physician”. The Department understands that speech generating devices are generally not obtained by prescription and may be provided by a psychologist or therapist in addition to a physician. Thus, the definition should be expanded to include these other health care providers.**
  
- **The definition of “habilitative and rehabilitative care” and Section 3(c)(1) identify by name three specific treatments for autism spectrum disorders. The Department has a concern that as autism is a field currently undergoing much research on treatments, specifying treatments in legislation by name rather than criteria may require regular changes to the legislation as advancements in treatment are made, particularly should treatments that are determined to be outdated in the medical community still require insurance coverage in the District of Columbia. The Department suggests defining the treatments by criteria and authorizing the**

**Department promulgate rules to further define “habilitative and rehabilitative care”**

- **There is legislation also being discussed today that increases the age for required coverage for dependents to 25. The Department is not in a position to determine whether the treatment age should be consistent with that legislation, but thought we would raise that as a consideration.**

**This concludes my testimony. Thank you again for the opportunity to present the Department’s views and I will be happy to answer any questions.**