

UPMC HEALTH PLAN
AUTISM SPECTRUM DISORDER COVERAGE RIDER

The following benefits shall be modified, as set forth below. If you are not sure if a service is covered, call UPMC Health Plan Member Services to inquire if that service is covered under your benefit plan. In the event that the terms of your Certificate of Coverage conflict with this Rider, the terms of this Rider shall control.

- A. The Certificate of Coverage to which this Rider is attached is amended by the addition of the following benefit listed in the Covered Services section in your Certificate of Coverage shall read as follows:

Autism Spectrum Disorder

1. Your benefit plan covers all eligible members under the age of twenty-one (21) for the diagnostic assessment and treatment of Autism Spectrum Disorder. The following services, when Medically Necessary for the assessment/treatment of Autism Spectrum Disorder, are covered:

- Prescription Drug Coverage (Those FDA approved specifically for treatment of Autism) and associated drug level testing
- Services of a psychiatrist and/or psychologist
- Applied behavioral analysis; and
- Rehabilitative care and therapeutic care

Coverage under this section shall be subject to copayment, deductible and coinsurance provisions and any other general exclusions or limitations of your Certificate of Coverage to the extent as other medical services covered by your Certificate of Coverage.

2. Treatment of Autism Spectrum Disorder pursuant to this Rider must be:

- Identified in a Treatment Plan.
- Prescribed, ordered or provided by a licensed physician, licensed physician assistant, licensed psychologist, licensed clinical social worker or certified registered nurse practitioner, licensed speech pathologist.
- Provided by an Autism Service Provider or a person, entity or group that works under the direction of an Autism Service Provider.

3. The following definitions apply to this Rider:

- **Autism Service Provider** –applies to any of the following:
 - A person, entity, or group providing treatment of ASDs and is licensed or certified as such in the Commonwealth of Pennsylvania (PA).
 - Any person, entity, or group currently providing treatment of ASDs that is enrolled in the Medical Assistance Program before the implementation of Pennsylvania Act 62.
 - A behavioral specialist in PA providing treatment of ASD – until one year after regulations are issued or July 2011 – whichever is later.
- **Autism Spectrum Disorder** – As defined by the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM).
- **Treatment Plan** – a plan for the treatment of Autism Spectrum Disorder developed by a licensed physician or licensed psychologist pursuant to a comprehensive evaluation or reevaluation performed in a manner consistent with the most recent clinical report or recommendations of the American Academy of Pediatrics.

B. The following exclusions in the Exclusions section of your Certificate of Coverage are amended as follows:

Behavioral Health Services

- Sub-Paragraph B is amended to read: Inpatient or outpatient related to intellectual disabilities (intellectual development disorder), or pervasive developmental disorder which extends beyond traditional medical management.
- Sub-Paragraph U is amended to read: Intensive care management services, resource coordination activity, respite services, and summer camp programs are not covered services.

Intellectual Disability (Intellectual Development Disorder), is amended to read: Inpatient or outpatient treatment related to intellectual disabilities (intellectual development disorder, or pervasive developmental disorder which extends beyond traditional medical management.

Upon denial or partial denial by an insurer of a claim for diagnostic assessment of Autism Spectrum Disorder or a claim for treatment of Autism Spectrum Disorder, a Covered Person or an authorized representative shall be entitled to an expedited internal review process as set forth in this Certificate, followed by an expedited independent external review process established and administered by the Insurance Department.

You or an authorized representative may appeal to a court of competent jurisdiction an order of an expedited independent external review disapproving a denial or partial denial. Pending a ruling of such court, we shall pay for those services, if any, that have been authorized or ordered until such ruling.