

Latest Guide to Autism Insurance Coverage



ABA Billing by State

The Center for Disease Control and Prevention (CDC) estimates that one in 54 children has autism spectrum disorder (ASD). Severe autism is frequently debilitating both in social settings and for work efficiency. Unfortunately, no cure for autism exists.

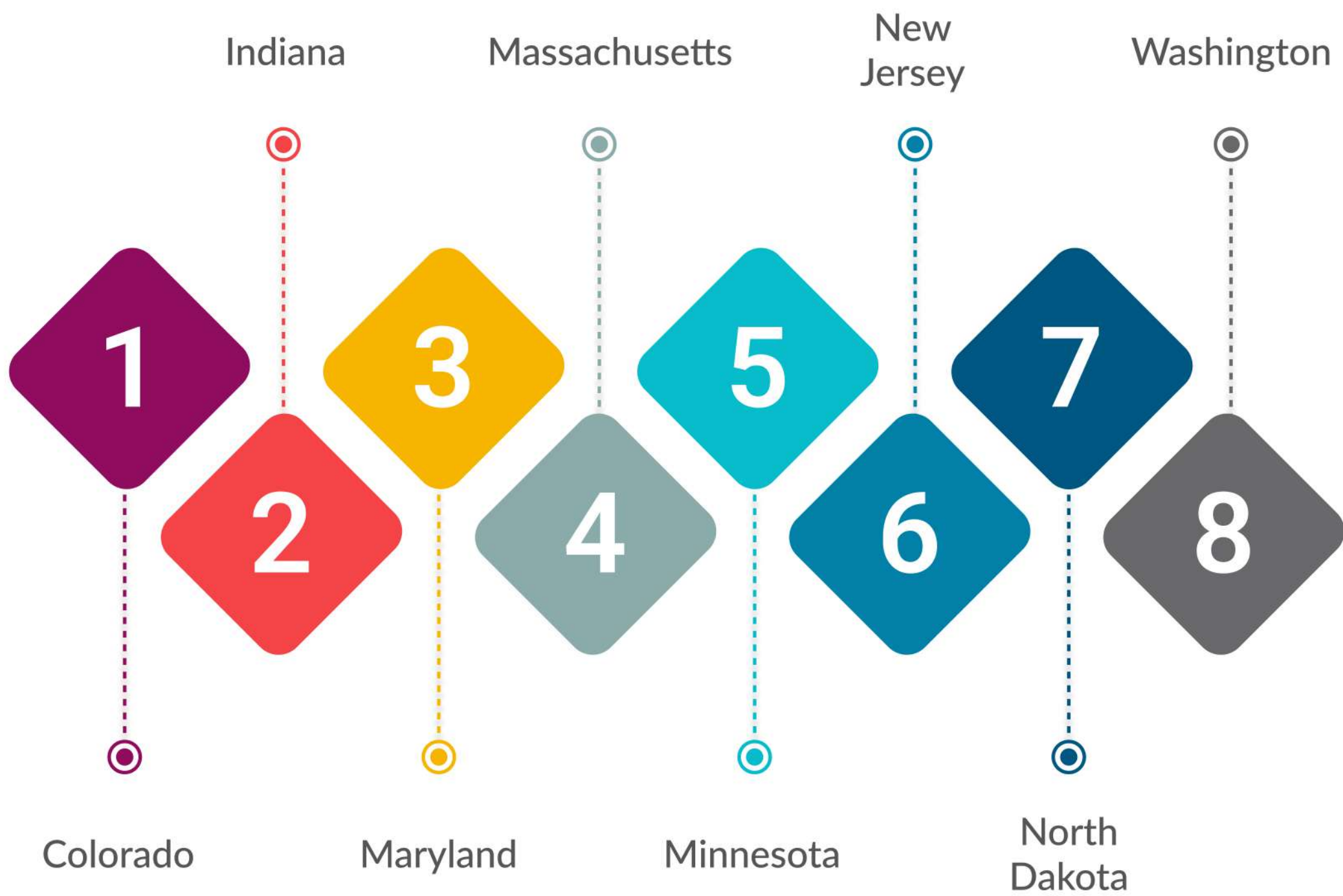
Experts agree that intervention from an early age is the best treatment for the condition. Applied behavior analysis (ABA) is one of the most widely accepted forms of this treatment. However, ABA is expensive. The CDC estimates that average yearly medical expenses for ASD patients range from \$4,110 to \$6,200 above non-ASD patients.

As such, autism patients or their guardians need to understand what insurance covers in their state. Most states mandate that insurers provide health insurance for autism. In fact, only Idaho lacks a law requiring autism insurance. However, it is still important to know what the limits of the coverage are. If a high-needs ASD patient chooses a state with a low coverage cap, they can easily spend tens of thousands per year.

Here is a breakdown of government-mandated autism insurance coverage by state.

States That Require Full Coverage

Some states require autism coverage and have no upper limit on pricing. Patients with severe ASD should consider moving to these states since the treatment they need may cost far more than the cap.



States That Have Upper Limits on Coverage

- ★ Alabama: \$36,000 per year
- ★ Alaska: Restrictions are subject to individual health plans
- ★ Arizona: \$50,000 per year for ages nine and younger; \$25,000 per year for ages 9-16

- ★ Arkansas: \$50,000 per year
- ★ California: Coverage is not to exceed that of ABA coverage provided by the Patient Protection and Affordable Care Act
- ★ Connecticut: Allows individual plans to limit non-monetary elements such as visiting hours
- ★ Delaware: \$36,000 per year
- ★ District of Columbia: Coverage is limited to that of other treatments and therapies
- ★ Florida: \$36,000 per year; \$200,000 for lifetime
- ★ Georgia: \$30,000 per year
- ★ Hawaii: \$25,000 per year
- ★ Illinois: \$44,877 in 2016 dollars (to be adjusted for inflation annually)
- ★ Iowa: \$36,000 per year
- ★ Kansas: 1,300 hours total limit for ages under four; 560 hours total limit for ages 4-12
- ★ Kentucky: \$50,000 per year for ages 1-7; \$1,000 per month for ages 7-21
- ★ Louisiana: \$36,000 per year
- ★ Maine: \$36,000 per year
- ★ Michigan: \$50,000 per year up to age six; \$40,000 per year for ages 7-12; \$30,000 per years for ages 13-18
- ★ Missouri: \$40,000 per year (to be adjusted annually) unless the insurance payer approves more
- ★ Montana: \$50,000 per year for ages eight and younger; \$20,000 per year for ages 9-18
- ★ Nebraska: 25 hours per week
- ★ Nevada: \$72,000 per year

- ★ New Hampshire: \$36,000 per year for ages twelve and younger; \$27,000 per year for ages 13-21
- ★ New Mexico: \$36,000 per year; \$200,000 for lifetime
- ★ New York: \$45,000 per year
- ★ North Carolina: \$40,000 per year
- ★ Ohio: 20
- ★ Oklahoma: \$25,000 per year (to be adjusted annually); 25 hours per week
- ★ Oregon: 25 hours per week
- ★ Pennsylvania: \$36,000 per year
- ★ Rhode Island: \$32,000 per year
- ★ South Carolina: \$50,000 per year
- ★ South Dakota: \$36,000 per year for ages six and under; \$25,000 per year for ages 7-13; 12,500 per year for ages 14-18
- ★ Tennessee: Coverage is limited to individual health plans' deductibles for other neurological disorders
- ★ Texas: Restrictions are subject to individual health plans
- ★ Utah: 600 hours per year or 11.5 hours per week
- ★ Vermont: Coverage is not to exceed that of benefits provided by the Patient Protection and Affordable Care Act
- ★ Virginia: \$35,000 per year unless the insurer specifies a higher amount
- ★ West Virginia: \$30,000 per year for the first three years; \$2,000 per month following the first three years
- ★ Wisconsin: \$50,000 per year for four years for intensive services; \$25,000 per year for non-intensive services
- ★ Wyoming: 20 visits annually unless specified by a medical professional

Final Notes on Autism Coverage by State

While this list gives a helpful picture of coverage limitations, there are a few more factors to consider. Most states require that a state-certified physician diagnose ASD. Self-diagnosis and alternative opinions will not be allowed. Also, these laws do not apply to every insurance plan. Many have restrictions, such as Alabama, which only covers employment plans for companies with over 50 employees.

Additionally, ASD laws focus on child treatment. This means most states will not require insurers to cover those over either 18 or 21. While these are common cut-off ages, research your state to be sure. Some states, such as New York, have no cut-off age, while others like Georgia set the cut-off at age six. For a more specific state-by-state breakdown, the National Conference of State Legislatures has a detailed article.

Key Takeaways

- ★ Some states require ASD coverage and have no upper limit restriction on cost.
- ★ Most states require ASD coverage but place restrictions on the upper limit of cost.
- ★ Coverage typically applies to those under 18 or 21, and a state-verified physician must diagnose the condition.

About Plutus Health Inc.

[Plutus Health](#) is a leading [ABA Billing services](#) company offering complete end-to-end RCM solutions for ABA Centers and Providers. Our dedicated team knows the intricacies of billing ABA-specific claims

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Disclaimer: The information presented above is subject to change with time. To access the latest information on insurance coverages respective to a state, kindly check the respective state websites.