

Frequently Asked Questions about the District of Columbia Autism Insurance Law

1. District of Columbia Autism Insurance Law History

B20-0302 was enacted July 15, 2013.

2. To which plan types does the District of Columbia autism insurance law apply and what is the effective date of coverage?

Plan Type	Subject to Terms of Bill?	Effective Date	Comments
State Employee Health Plans	No	NA	
Individual Plans	Some	Jan 1, 2014	See #6 below
Fully insured large group plans	No	NA	
Fully insured small group plans	Some	Jan 1, 2014	See #6 below

3. Which autism services are required to be covered by the law?

- Habilitative Services (e.g. Applied Behavior Analysis)

4. Does the law impose age limits or annual dollar caps on coverage?

There are no age or dollar limits on coverage.

5. Where can I find more details about the District of Columbia autism insurance law?

A copy of B20-0302 as enrolled can be found [here](#).

6. Other comments about the law.

For purposes of the essential health benefits benchmark plan, Council Bill B20-0302 (The Better Prices, Better Quality, Better Choices for Health Coverage Temporary Amendment Act of 2013) defined “habilitative services” to include “health care services that help a person keep, learn, or improve skills and functioning for daily living, including applied behavioral analysis for the treatment of autism spectrum disorder.”

As such, small group and individual plans sold through the D.C. Exchange must provide coverage for ABA for individuals with autism. This requirement does not apply to grandfathered plans (i.e. plans issued prior to March 23, 2010).

If you have additional questions, please email advocacy@autismspeaks.org.

