Insurance Coverage for Autism Spectrum Disorder
If you or someone you know is the parent of a child with autism, you should know how your child’s autism-related services may be covered by private group health insurance under Pennsylvania’s Autism Insurance Act, the Medical Assistance program or the Children’s Health Insurance Program (CHIP).

This document provides a basic overview of the Autism Insurance Act. As additional information is developed, it will be posted to the Department of Human Services (DHS) website. We encourage you to visit the following page for the most up-to-date Fact Sheet: www.PAAutismInsurance.org

Act 62: The Autism Insurance Act:
- Requires many private health insurance companies to cover the cost of diagnostic assessment and treatment of autism spectrum disorder (ASD) for children under the age of 21. The amount is adjusted annually ($38,276 in 2015) with coverage subject to copayment, deductible, coinsurance, and other exclusions or limitations to the same extent as other medical services covered by the policy; however, some plans do not impose any cap. Be sure to check your plan.
- Requires DHS to cover the cost of services for individuals who are enrolled in the Medical Assistance program and do not have private insurance coverage, or for individuals exceed the Act 62 limits in one year; and
- Requires the Pennsylvania Department of State to license professional behavior specialists who provide services to children.

Act 62: The Autism Insurance Act covers the following population:
- Children and young adults under age 21 who:
  - Are covered under an employer group health insurance policy (including HMOs and PPOs) issued in Pennsylvania to groups of 51 or more employees (Act 62 does not apply to policies issued outside of Pennsylvania or that are “self-funded” or “ERISA” policies)
  - Are on Medical Assistance; or
  - Are covered by CHIP.

Act 62: The Autism Insurance Act covers the following services:
- Diagnostic assessment and treatment of autism spectrum disorders, which include:
  - Prescription drugs and blood level tests;
  - Services of a psychiatrist and/or psychologist (direct or consultation);
  - Applied behavioral analysis; and
  - Other rehabilitative care and therapies, such as services provided by speech and language pathologists, occupational and physical therapists.

Treatment Requirements:
- Must be for an ASD;
- Must be medically necessary;
- Must be identified in a treatment plan developed by a licensed physician or licensed psychologist; (A licensed behavior specialist may design, implement or evaluate a behavior modification intervention component of a treatment plan);
- Must be prescribed, ordered or provided by a licensed physician, licensed physician assistant, licensed psychologist, licensed clinical social worker or certified registered nurse practitioner; and
- Must be provided by an autism service provider or a person, entity or group that works under the direction of an autism service provider. Autism service provider includes behavior specialists licensed by the Pennsylvania Department of State.

Visit www.PAAutismInsurance.org for more information and resources for families, insurers and providers. If you have a more specific question about Act 62: the Autism Insurance Act, email your questions to ra-in-autism@pa.gov.