

February 17, 2014



Representative Dan Saddler
State Capitol, Room 104
Juneau, AK 99801

RE: Comments to Comprehensive Autism Early Diagnosis and Treatment Task Force Meeting

On behalf of Premera Blue Cross Blue Shield of Alaska, thank you for the opportunity to provide comments in response to questions that arose at the last taskforce meeting on January 10 during which Dr. Ted Conklin and I both participated. This section is organized by the topic and our response.

Coding Procedures for Autism Services

We understand the coding concerns regarding Applied Behavioral Analysis (ABA) services, and challenges subsequently exist for insurers in identifying these services when they are billed. Providers are coding ABA services differently since there are no specific codes for ABA.

We support the task force making recommendations to help address coding/billing concerns regarding autism services by supporting the efforts of the American Medical Association (AMA). We understand an AMA subgroup is currently working on CPT codes for autism services to be issued in 2015.

We do not support recommendations that the Alaska Department of Health and Social Services should establish billing codes for ABA services in the state. This could lead to conflicting procedures and administrative issues when national guidelines are currently being developed.

Licensing of Providers

We support recommendations to establish a licensure process for Board Certified Behavior Analysts (BCBAs). We recommend that Alaska create a state licensing board that allows the state to license and regulate BCBAs.

Mandating Autism Coverage by Self-funded Plans

We understand there is interest in recommending a mandate for self-funded plans in Alaska to provide autism coverage. The State of Alaska has no jurisdiction over self-funded health plans as these plans are not subject to state insurance laws and instead are governed by federal Employee Retirement Income and Security Act (ERISA). Since state legislation was enacted requiring certain insurance plans to cover autism benefits,

self-funded plans in Alaska may voluntarily adopt this benefit. However, since the state does not have jurisdiction, such a mandate would be preempted by ERISA, and we oppose the task force making such recommendation.

The Alaska Legislature has jurisdiction over the Alaska state employee plan, and we support and urge the task force to require coverage for autism services under this plan.

Defining Standard Services for Autism Treatment

We do not support defining standards of services for autism treatment. We believe the task force is not staffed with the appropriate clinical professionals to conduct a thorough assessment of the medical literature to make credible recommendations about treatment standards. The evidence for autism related therapies is complex, of varied quality and still developing. Such practice and treatment recommendations should be left to such organizations as credible professional societies and academic mental health departments with staff qualified to conduct a comprehensive review of the medical literature. Clinical trials in the professional medical literature have not yet provided consistent and unequivocal evidence for the effectiveness of treatments for autism.

In addition, we do not believe the state should be making determinations regarding the standards of care which are more appropriately decided by the medical profession. Furthermore, standards of service should not be codified in state regulations because standards of treatment for most conditions generally change continuously over time as new evidence emerges.

Thank you for the opportunity to provide comments. We look forward to continuing to work with you. Please let us know if you would like to discuss our comments further.

Sincerely,



Ted Conklin, M.D. Medical Director, on behalf of,

John Espinola, M.D. Premera Vice President of Quality and Medical Management