

Attention Deficit Hyperactivity Disorder (ADHD)

Policy Number: BIP009.K
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[➔ Instructions for Use](#)

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Related Benefit Interpretation Policies
• Autism Spectrum Disorder
• Developmental Delay and Learning Disabilities
• Inpatient and Outpatient Mental Health
• Rehabilitation Services (Physical, Occupational, and Speech Therapy)

Federal/State Mandated Regulations

California Health and Safety Code Section §1374.72 – Mental Health Parity Law

[Bill Text - SB-855 Health coverage: mental health or substance use disorders. \(ca.gov\)](#)

- (a) Every health care service plan contract issued, amended, or renewed on or after July 1, 2000, that provides hospital, medical, or surgical coverage shall provide coverage for the diagnosis and medically necessary treatment of severe mental illnesses of a person of any age, and of serious emotional disturbances of a child, as specified in subdivisions (d) and (e), under the same terms and conditions applied to other medical conditions as specified in subdivision (c).
- (b) These benefits shall include the following:
 - (1) Outpatient services.
 - (2) Inpatient hospital services.
 - (3) Partial hospital services.
 - (4) Prescription drugs, if the plan contract includes coverage for prescription drugs.
- (c) The terms and conditions applied to the benefits required by this section, that shall be applied equally to all benefits under the plan contract, shall include, but not be limited to, the following:
 - (1) Maximum lifetime benefits.
 - (2) Copayments.
 - (3) Individual and family deductibles.
- (d) For the purposes of this section, “severe mental illnesses” shall include:
 - (1) Schizophrenia.
 - (2) Schizoaffective disorder.
 - (3) Bipolar disorder (manic-depressive illness).
 - (4) Major depressive disorders.
 - (5) Panic disorder.
 - (6) Obsessive-compulsive disorder.
 - (7) Pervasive developmental disorder or autism.
 - (8) Anorexia nervosa.
 - (9) Bulimia nervosa.
- (e) For the purposes of this section, a child suffering from, “serious emotional disturbances of a child” shall be defined as a child who (1) has one or more mental disorders as identified in the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders, other than a primary substance use disorder or developmental disorder, that result in behavior

inappropriate to the child's age according to expected developmental norms, and (2) who meets the criteria in [paragraph \(2\) of subdivision \(a\) of Section 5600.3 of the Welfare and Institutions Code](#).

- (f) This section shall not apply to contracts entered into pursuant to Chapter 7 (commencing with Section 14000) or Chapter 8 (commencing with Section 14200) of Division 9 of Part 3 of the Welfare and Institutions Code, between the State Department of Health Services and a health care service plan for enrolled Medi-Cal beneficiaries.
- (g) (1) For the purpose of compliance with this section, a plan may provide coverage for all or part of the mental health services required by this section through a separate specialized health care service plan or mental health plan, and shall not be required to obtain an additional or specialized license for this purpose.
- (2) A plan shall provide the mental health coverage required by this section in its entire service area and in emergency situations as may be required by applicable laws and regulations. For purposes of this section, health care service plan contracts that provide benefits to enrollees through preferred provider contracting arrangements are not precluded from requiring enrollees who reside or work in geographic areas served by specialized health care service plans or mental health plans to secure all or part of their mental health services within those geographic areas served by specialized health care service plans or mental health plans.
- (3) Notwithstanding any other provision of law, in the provision of benefits required by this section, a health care service plan may utilize case management, network providers, utilization review techniques, prior authorization, copayments, or other cost sharing.
- (h) Nothing in this section shall be construed to deny or restrict in any way the department's authority to ensure plan compliance with this chapter when a plan provides coverage for prescription drugs.

State Market Plan Enhancements

The member may have additional mental health coverage as required by State Mental Health Parity Law through UnitedHealthcare of California or designee. Refer to the Benefit Interpretation Policy titled [Inpatient and Outpatient Mental Health](#).

Covered Benefits

Important Note: Covered benefits are listed in *Federal/State Mandated Regulations*, *State Market Plan Enhancements*, and *Covered Benefits* sections. Always refer to the *Federal/State Mandated Regulations* and *State Market Plan Enhancements* sections for additional covered services/benefits not listed in this section.

Note: Refer to the member's Evidence of Coverage (EOC)/Schedule of Benefit (SOB) to determine coverage eligibility

- Medical Management of Attention Deficit/Hyperactivity Disorder (ADHD) by the member's pediatrician or PCP including the diagnostic evaluation and laboratory monitoring of prescribed drugs.
- Referral for consultation and evaluation of individuals with suspected complex developmental and/or behavioral problems for confirmation of diagnosis.
- Treatment of any underlying coexistent medical condition (e.g., Tourette's Syndrome, seizure disorder), based on medical necessity.
- Behavior Modification may be covered. Refer to the member's Evidence of Coverage (EOC) for terms and conditions of coverage.
- Family Counseling may be covered under the behavioral health supplement. Refer to the member's Evidence of Coverage (EOC) for terms and conditions of coverage.

Refer to the Benefit Interpretation Policies titled, [Autism Spectrum Disorder](#), [Developmental Delay and Learning Disabilities](#), [Inpatient and Outpatient Mental Health](#), and [Rehabilitation Services \(Physical, Occupational, and Speech Therapy\)](#).

Not Covered

Prescription drugs, unless the member has the outpatient supplemental prescription drug benefit.

Definitions

Attention Deficit Hyperactivity Disorder (ADHD): A brain disorder marked by an ongoing pattern of inattention and/or hyperactivity. Impulsive behavior that interferes with functioning or development.

Behavior Modification: Used in a behavioral program to designate methods for conditioning behavior by joining a behavior with a reinforcement to reward the person if they implement a desired behavior or if they stop undesired behavior. It can also involve setting goals for desired behavior; goals are specific, measurable, attainable, and age and developmental stage appropriate.

Learning Disability: A condition where there is a meaningful difference between a person's current level of learning ability and the level that would be expected for a person of that age.

Policy History/Revision Information

Date	Summary of Changes
07/01/2023	Federal/State Mandated Regulations <ul style="list-style-type: none">Update reference link to <i>California Health and Safety Code Section 1374.72</i> Supporting Information <ul style="list-style-type: none">Archived previous policy version BIP009.J

Instructions for Use

Covered benefits are listed in three (3) sections: *Federal/State Mandated Regulations*, *State Market Plan Enhancements*, and *Covered Benefits*. All services must be medically necessary. Each benefit plan contains its own specific provisions for coverage, limitations, and exclusions as stated in the member's Evidence of Coverage (EOC)/Schedule of Benefits (SOB). If there is a discrepancy between this policy and the member's EOC/SOB, the member's EOC/SOB provision will govern.