Covered benefits are listed in three (3) Sections - A, B and C. 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.

Essential Health Benefits for Individual and Small Group
For plan years beginning on or after January 1, 2014, the Affordable Care Act of 2010 (ACA) requires fully insured non-grandfathered individual and small group plans (inside and outside of Exchanges) to provide coverage for ten categories of Essential Health Benefits (“EHBs”). Large group plans (both self-funded and fully insured), and small group ASO plans, are not subject to the requirement to offer coverage for EHBs. However, if such plans choose to provide coverage for benefits which are deemed EHBs (such as maternity benefits), the ACA requires all dollar limits on those benefits to be removed on all Grandfathered and Non-Grandfathered plans. The determination of which benefits constitute EHBs is made on a state by state basis. As such, when using this guideline, it is important to refer to the member specific benefit document to determine benefit coverage.

This benefit interpretation policy applies to members with diagnosed or suspected Developmental Delay, either global or limited to a specific developmental area (e.g., speech/language, motor).

A. FEDERAL/STATE MANDATED REGULATIONS

California Health and Safety Code Section §1374.72 – Mental Health Parity
(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 purpose 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.

Note: Developmental Delay is not a qualifying diagnosis under the CA mental health parity law and is not eligible for coverage through the mental health parity benefit.

B. STATE MARKET PLAN ENHANCEMENTS

None
C. COVERED BENEFITS

IMPORTANT NOTE: Covered benefits are listed in Sections A, B and C. Always refer to Sections A and B for additional covered benefits not listed in this Section.

Refer to the member’s Evidence of Coverage (EOC)/Schedule of Benefits (SOB) for specific benefit information.

| The following services are the responsibility of the Member’s Medical Plan (IPA, PMG, or UnitedHealthcare). | • Physical Therapy, Occupational Therapy and Speech Therapy  
• Medical Specialist Services (e.g., neurology)  
• Durable Medical Equipment (e.g., speech device)  
• Laboratory monitoring if ordered by the PCP or medical specialist  
• Prescription drugs (Refer to the supplemental drug rider/benefit) |
|---|---|
| The following services are the responsibility of the Member’s Behavioral Health Plan [(Optum) USBehavioral Health Plan of CA or alternative Behavioral Health Plan selected by the Member’s Employer]. | • Applied Behavioral Therapy  
• Psychiatry and/or Psychologist related services  
• Diagnostic testing if ordered by the behavioral health personnel.  
• Laboratory monitoring if ordered by the behavioral health professional |

1. Speech-language, motor, cognitive, and social development services may be covered when they are authorized, part of a Medically Necessary treatment plan, provided by or rendered under the direct supervision of a licensed or certified health care professional, and are provided by a Participating Provider acting within the scope of his or her license or as authorized under California law.

2. Play therapy services are covered only when they are authorized, part of a Medically Necessary treatment plan, require the direct supervision of a licensed physical therapist or a Qualified Autism Provider, and are provided by a Participating Provider acting within the scope of his or her license or as authorized under California law.

Refer to the following Benefit Interpretation Policies for additional information: Attention Deficit Hyperactivity Disorder (ADHD), Inpatient and Outpatient Mental Health, Pervasive Developmental Disorder and Autism Spectrum Disorder, and Rehabilitation Services (Physical, Occupational, and Speech Therapy) policies.

D. NOT COVERED

Educational Services for Developmental Delays and Learning Disabilities are not Health Care Services and are not covered.

Examples include, but are not limited to:
1. Items and services to increase academic knowledge or skills
2. Special education: teaching to meet the educational needs of a person with mental retardation, Learning Disability, or Developmental Delay.

Note:
   a. A Learning Disability is 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. A Developmental Delay is a delayed attainment of age-appropriate milestones in the areas of speech-language, motor, cognitive, and social development.

b. This exclusion does not apply to Covered Services when they are authorized, part of a Medically Necessary treatment plan, provided by or rendered under the direct supervision of a licensed or certified health care professional, and are provided by a Participating Provider acting within the scope of his or her license or as authorized under California law;

3. Teaching and support services to increase academic performance
4. Academic coaching or tutoring for skills such as grammar, math, and time management
5. Speech training that is not Medically Necessary, and not part of an approved treatment plan, and not provided by or under the direct supervision of a Participating Healthcare Professional acting within the scope of his or her license under California law that is intended to address speech impediments
6. Teaching you how to read, whether or not you have dyslexia
7. Educational testing
8. Teaching (or any other items or services associated with) activities such as art, dance, horse riding, music, or swimming, or teaching you how to play.

**Note:**

a. Play therapy services are covered only when they are authorized, part of a Medically Necessary treatment plan, require the direct supervision of a licensed physical therapist or a Qualified Autism Provider, and are provided by a Participating Provider acting within the scope of his or her license or as authorized under California law.

b. This exclusion does not apply or exclude Medically Necessary behavior health therapy services for treatment of pervasive developmental disorders (PDD) or Autism.

### E. DEFINITIONS

**Developmental Delay:** Delayed attainment of age-appropriate milestones in the areas of speech-language, motor, cognitive, and/or social development.

**Intellectual Disability:** An individual is determined to have an intellectual disability based on the following three criteria: Intellectual functioning level (IQ) is below 70-75; significant limitations exist in two or more adaptive skill areas; and the condition is present from childhood (defined as age 18 or less).

**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.

**Serious Emotional Disturbances of a Child:** (SED) Under Age 18 – A Serious Emotional Disturbance of a Child under Age 18 means a condition identified as a Mental Disorder in the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM), other than a primary substance-related and addictive disorder or developmental disorder that result in behavior inappropriate to the child’s age according to expected developmental norms if the child also meets at least one of the following three criteria:

As a result of the Mental Disorder, (1) the child has substantial impairment in at least two of the following areas: self-care, school functioning, family relationships, or ability to function in the community; and (2) either:

(i) the child is at risk of removal from home or has already been removed from the home; or
(ii) the Mental Disorder and impairments have been present for more than six months or are likely to continue for more than one year without treatment; or

The child displays psychotic features or risk of suicide or violence due to a Mental Disorder; or

The child meets special education eligibility requirements under Chapter 26.5 (commencing with Section 7570) of Division 7 of Title 1 of the California Government Code.

**Severe Mental Illness:** Severe Mental Illness (SMI) includes the diagnosis and Medically Necessary treatment of the following conditions:

1. Anorexia nervosa;
2. Bipolar disorder (manic depressive illness);
3. Bulimia nervosa;
4. Major depressive disorder;
5. Obsessive-compulsive disorder;
6. Panic disorder;
7. Pervasive developmental disorder or autism;
8. Schizoaffective disorder;

F. POLICY HISTORY/REVISION INFORMATION

<table>
<thead>
<tr>
<th>Date</th>
<th>Action/Description</th>
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<tbody>
<tr>
<td>09/01/2019</td>
<td><strong>Federal/State Mandated Regulations</strong></td>
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<tr>
<td></td>
<td>• Revised language pertaining to <em>California Health and Safety Code Section §1374.72</em></td>
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