

**2022 -- S 2203 SUBSTITUTE B**

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LC003422/SUB B  
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**STATE OF RHODE ISLAND**

**IN GENERAL ASSEMBLY**

**JANUARY SESSION, A.D. 2022**

**A N A C T**

**RELATING TO INSURANCE**

Introduced By: Senators Lawson, DiMario, Burke, Murray, Cano, Quezada, and Valverde

Date Introduced: February 08, 2022

Referred To: Senate Health & Human Services

It is enacted by the General Assembly as follows:

1           SECTION 1. Chapter 27-18 of the General Laws entitled "Accident and Sickness Insurance  
2 Policies" is hereby amended by adding thereto the following section:

3           **27-18-89. Mandatory coverage for treatment of pediatric autoimmune**  
4 **neuropsychiatric disorders associated with streptococcal infections and pediatric acute onset**  
5 **neuropsychiatric syndrome.**

6           (a) Every group health insurance contract, or every group hospital or medical expense  
7 insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state, by  
8 any health insurance carrier, on or after January 1, 2023, shall provide coverage for treatment of  
9 pediatric autoimmune neuropsychiatric disorders associated with streptococcal infections and  
10 pediatric acute onset neuropsychiatric syndrome, including, but not limited to, the use of  
11 intravenous immunoglobulin therapy.

12           (b) For billing and diagnosis purposes, pediatric autoimmune neuropsychiatric disorders  
13 associated with streptococcal infections and pediatric acute onset neuropsychiatric syndrome shall  
14 be coded as autoimmune encephalitis until the American Medical Association and the Centers for  
15 Medicare and Medicaid Services create and assign a specific code for pediatric autoimmune  
16 neuropsychiatric disorders associated with streptococcal infections and pediatric acute onset  
17 neuropsychiatric syndrome. Thereafter, pediatric autoimmune neuropsychiatric disorders  
18 associated with streptococcal infections and pediatric acute onset neuropsychiatric syndrome may  
19 be coded as autoimmune encephalitis, pediatric autoimmune neuropsychiatric disorders associated

1 with streptococcal infections, or pediatric acute onset neuropsychiatric syndrome.

2 (c) The health care benefits outlined in this section apply only to services delivered within  
3 the state of Rhode Island; provided, that all health insurance carriers shall be required to provide  
4 coverage for those benefits mandated by this section outside of the state of Rhode Island where it  
5 can be established through a pre-authorization process that the required services are not available  
6 in the state of Rhode Island from a provider in the health insurance carrier's network.

7 (d) Each health insurance carrier shall collect and provide to the office of the health  
8 insurance commissioner, in a form and frequency acceptable to the commissioner, information and  
9 data reflecting the costs and the savings of adding the benefit coverage provided in this section. On  
10 or before January 1, 2025, the office of the health insurance commissioner shall report to the general  
11 assembly a cost-benefit analysis of the implementation of the benefit coverage provided in this  
12 section. The intent of this cost-benefit analysis is to determine if adding the benefit coverage  
13 provided in this section produces a net savings to health insurance carriers and to policy holders.

14 SECTION 2. Chapter 27-19 of the General Laws entitled "Nonprofit Hospital Service  
15 Corporations" is hereby amended by adding thereto the following section:

16 **27-19-81. Mandatory coverage for treatment of pediatric autoimmune**  
17 **neuropsychiatric disorders associated with streptococcal infections and pediatric acute onset**  
18 **neuropsychiatric syndrome.**

19 (a) Every group health insurance contract, or every group hospital or medical expense  
20 insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state, by  
21 any health insurance carrier, on or after January 1, 2023, shall provide coverage for treatment of  
22 pediatric autoimmune neuropsychiatric disorders associated with streptococcal infections and  
23 pediatric acute onset neuropsychiatric syndrome, including, but not limited to, the use of  
24 intravenous immunoglobulin therapy.

25 (b) For billing and diagnosis purposes, pediatric autoimmune neuropsychiatric disorders  
26 associated with streptococcal infections and pediatric acute onset neuropsychiatric syndrome shall  
27 be coded as autoimmune encephalitis until the American Medical Association and the Centers for  
28 Medicare and Medicaid Services create and assign a specific code for pediatric autoimmune  
29 neuropsychiatric disorders associated with streptococcal infections and pediatric acute onset  
30 neuropsychiatric syndrome. Thereafter, pediatric autoimmune neuropsychiatric disorders  
31 associated with streptococcal infections and pediatric acute onset neuropsychiatric syndrome may  
32 be coded as autoimmune encephalitis, pediatric autoimmune neuropsychiatric disorders associated  
33 with streptococcal infections, or pediatric acute onset neuropsychiatric syndrome.

34 (c) The health care benefits outlined in this section apply only to services delivered within

1 the state of Rhode Island; provided, that all health insurance carriers shall be required to provide  
2 coverage for those benefits mandated by this section outside of the state of Rhode Island where it  
3 can be established through a pre-authorization process that the required services are not available  
4 in the state of Rhode Island from a provider in the health insurance carrier's network.

5 (d) Each health insurance carrier shall collect and provide to the office of the health  
6 insurance commissioner, in a form and frequency acceptable to the commissioner, information and  
7 data reflecting the costs and the savings of adding the benefit coverage provided in this section. On  
8 or before January 1, 2025, the office of the health insurance commissioner shall report to the general  
9 assembly a cost-benefit analysis of the implementation of the benefit coverage provided in this  
10 section. The intent of this cost-benefit analysis is to determine if adding the benefit coverage  
11 provided in this section produces a net savings to health insurance carriers and to policy holders.

12 (e) This section shall sunset and be repealed effective December 31, 2025.

13 SECTION 3. Chapter 27-20 of the General Laws entitled "Nonprofit Medical Service  
14 Corporations" is hereby amended by adding thereto the following section:

15 **27-20-77. Mandatory coverage for treatment of pediatric autoimmune**  
16 **neuropsychiatric disorders associated with streptococcal infections and pediatric acute onset**  
17 **neuropsychiatric syndrome.**

18 (a) Every group health insurance contract, or every group hospital or medical expense  
19 insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state, by  
20 any health insurance carrier, on or after January 1, 2023, shall provide coverage for treatment of  
21 pediatric autoimmune neuropsychiatric disorders associated with streptococcal infections and  
22 pediatric acute onset neuropsychiatric syndrome, including, but not limited to, the use of  
23 intravenous immunoglobulin therapy.

24 (b) For billing and diagnosis purposes, pediatric autoimmune neuropsychiatric disorders  
25 associated with streptococcal infections and pediatric acute onset neuropsychiatric syndrome shall  
26 be coded as autoimmune encephalitis until the American Medical Association and the Centers for  
27 Medicare and Medicaid Services create and assign a specific code for pediatric autoimmune  
28 neuropsychiatric disorders associated with streptococcal infections and pediatric acute onset  
29 neuropsychiatric syndrome. Thereafter, pediatric autoimmune neuropsychiatric disorders  
30 associated with streptococcal infections and pediatric acute onset neuropsychiatric syndrome may  
31 be coded as autoimmune encephalitis, pediatric autoimmune neuropsychiatric disorders associated  
32 with streptococcal infections, or pediatric acute onset neuropsychiatric syndrome.

33 (c) The health care benefits outlined in this section apply only to services delivered within  
34 the state of Rhode Island; provided, that all health insurance carriers shall be required to provide

1 coverage for those benefits mandated by this section outside of the state of Rhode Island where it  
2 can be established through a pre-authorization process that the required services are not available  
3 in the state of Rhode Island from a provider in the health insurance carrier's network.

4 (d) Each health insurance carrier shall collect and provide to the office of the health  
5 insurance commissioner, in a form and frequency acceptable to the commissioner, information and  
6 data reflecting the costs and the savings of adding the benefit coverage provided in this section. On  
7 or before January 1, 2025, the office of the health insurance commissioner shall report to the general  
8 assembly a cost-benefit analysis of the implementation of the benefit coverage provided in this  
9 section. The intent of this cost-benefit analysis is to determine if adding the benefit coverage  
10 provided in this section produces a net savings to health insurance carriers and to policy holders.

11 (e) This section shall sunset and be repealed effective December 31, 2025.

12 SECTION 4. Chapter 27-41 of the General Laws entitled "Health Maintenance  
13 Organizations" is hereby amended by adding thereto the following section:

14 **27-41-94. Mandatory coverage for treatment of pediatric autoimmune**  
15 **neuropsychiatric disorders associated with streptococcal infections and pediatric acute onset**  
16 **neuropsychiatric syndrome.**

17 (a) Every group health insurance contract, or every group hospital or medical expense  
18 insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state, by  
19 any health insurance carrier, on or after January 1, 2023, shall provide coverage for treatment of  
20 pediatric autoimmune neuropsychiatric disorders associated with streptococcal infections and  
21 pediatric acute onset neuropsychiatric syndrome, including, but not limited to, the use of  
22 intravenous immunoglobulin therapy.

23 (b) For billing and diagnosis purposes, pediatric autoimmune neuropsychiatric disorders  
24 associated with streptococcal infections and pediatric acute onset neuropsychiatric syndrome shall  
25 be coded as autoimmune encephalitis until the American Medical Association and the Centers for  
26 Medicare and Medicaid Services create and assign a specific code for pediatric autoimmune  
27 neuropsychiatric disorders associated with streptococcal infections and pediatric acute onset  
28 neuropsychiatric syndrome. Thereafter, pediatric autoimmune neuropsychiatric disorders  
29 associated with streptococcal infections and pediatric acute onset neuropsychiatric syndrome may  
30 be coded as autoimmune encephalitis, pediatric autoimmune neuropsychiatric disorders associated  
31 with streptococcal infections, or pediatric acute onset neuropsychiatric syndrome.

32 (c) The health care benefits outlined in this section apply only to services delivered within  
33 the state of Rhode Island; provided, that all health insurance carriers shall be required to provide  
34 coverage for those benefits mandated by this section outside of the state of Rhode Island where it

1 can be established through a pre-authorization process that the required services are not available  
2 in the state of Rhode Island from a provider in the health insurance carrier's network.

3 (d) Each health insurance carrier shall collect and provide to the office of the health  
4 insurance commissioner, in a form and frequency acceptable to the commissioner, information and  
5 data reflecting the costs and the savings of adding the benefit coverage provided in this section. On  
6 or before January 1, 2025, the office of the health insurance commissioner shall report to the general  
7 assembly a cost-benefit analysis of the implementation of the benefit coverage provided in this  
8 section. The intent of this cost-benefit analysis is to determine if adding the benefit coverage  
9 provided in this section produces a net savings to health insurance carriers and to policy holders.

10 (e) This section shall sunset and be repealed effective December 31, 2025.

11 SECTION 5. This act shall take effect upon passage.

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EXPLANATION  
BY THE LEGISLATIVE COUNCIL  
OF  
A N A C T  
RELATING TO INSURANCE

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1           This act would require coverage for the treatment of pediatric autoimmune  
2 neuropsychiatric disorders associated with streptococcal infections and pediatric acute onset  
3 neuropsychiatric syndrome, including, but not limited to, the use of intravenous immunoglobulin  
4 therapy.

5           This act would take effect upon passage.

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