HOUSE BILL No. 1103

DIGEST OF INTRODUCED BILL

Citations Affected: IC 5-10-8-7.1; IC 27-8-14.2; IC 27-13-7.

Synopsis: Applied behavior analysis coverage. Requires a state employee health plan to reimburse the provider of behavior analysis services that provides behavior analysis services to a covered individual at a rate of not less than 110% of the Medicaid reimbursement rate for behavior analysis services under certain circumstances. Requires a policy of accident and sickness insurance to reimburse the provider of behavior analysis services that provides behavior analysis services to an insured at a rate of not less than 110% of the Medicaid reimbursement rate for behavior analysis services under certain circumstances. Requires a health maintenance organization contract to reimburse the provider of behavior analysis services that provides behavior analysis services to an enrollee at a rate of not less than 110% of the Medicaid reimbursement rate for behavior analysis services under certain circumstances.

Effective: July 1, 2026.

Greene

January 5, 2026, read first time and referred to Committee on Insurance.



Second Regular Session of the 124th General Assembly (2026)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2025 Regular Session of the General Assembly.

HOUSE BILL No. 1103

A BILL FOR AN ACT to amend the Indiana Code concerning insurance.

Be it enacted by the General Assembly of the State of Indiana:

1	SECTION 1. IC 5-10-8-7.1, AS AMENDED BY P.L.188-2013,
2	SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3	JULY 1, 2026]: Sec. 7.1. (a) The amendments made to this section
4	in the 2026 session of the general assembly apply to a:
5	(1) self-insurance program established under section 7(b) of
6	this chapter to provide group health coverage; and
7	(2) contract with a prepaid health care delivery plan that is
8	entered into or renewed under section 7(c) of this chapter;
9	that is issued, delivered, amended, or renewed after June 30, 2026.
0	(a) (b) As used in this section, "covered individual" means an
1	individual who is:
2	(1) covered under a self-insurance program established under
3	section 7(b) of this chapter to provide group health coverage; or
4	(2) entitled to health services under a contract with a prepaid
5	health care delivery plan that is entered into or renewed under
6	section 7(c) of this chapter.
7	(b) (c) As used in this section, "autism spectrum disorder" means a



- neurological condition, including Asperger's syndrome and autism, as defined in the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders of the American Psychiatric Association.
- (d) As used in this section, "behavior analysis services" means services related to the design, implementation, and evaluation of instructional and environmental modifications to produce socially significant improvements in human behavior. The term includes the following:
 - (1) Empirical identification of functional relations between behavior and environmental factors through functional assessment and analysis.
 - (2) Applied behavior analysis interventions based on scientific research and the direct observation and measurement of behavior and the environment.
 - (3) Use of contextual factors, motivating operations, antecedent stimuli, positive reinforcement, and other consequences to assist people in developing new behaviors, increase or decrease existing behaviors, and emit behaviors under specific environmental conditions.
- However, the term does not include, psychological testing, diagnosis of mental or physical disorders, neuropsychology, psychotherapy, cognitive therapy, sex therapy, psychoanalysis, hypnotherapy, or counseling.
- (c) (e) A self-insurance program established under section 7(b) of this chapter to provide health care coverage must provide a covered individual with coverage for the treatment of an autism spectrum disorder. Coverage provided under this section is limited to treatment that is prescribed by the covered individual's treating physician in accordance with a treatment plan. A self-insurance program may not deny or refuse to issue coverage on, refuse to contract with, or refuse to renew, refuse to reissue, or otherwise terminate or restrict coverage on, an individual under an insurance policy or health plan solely because the individual is diagnosed with an autism spectrum disorder.
- (d) (f) A contract with a prepaid health care delivery plan that is entered into or renewed under section 7(c) of this chapter must provide a covered individual with services for the treatment of an autism spectrum disorder. Services provided under this section are limited to treatment that is prescribed by the covered individual's treating physician in accordance with a treatment plan. A prepaid health care delivery plan may not deny or refuse to provide services to, or refuse to renew, refuse to reissue, or otherwise terminate or restrict services to, an individual solely because the individual is diagnosed with an



autism spectrum disorder.

- (e) (g) The coverage required by subsection (e) (e) and services required by subsection (d) (f) may not be subject to dollar limits, deductibles, copayments, or coinsurance provisions that are less favorable to a covered individual than the dollar limits, deductibles, copayments, or coinsurance provisions that apply to physical illness generally under the self-insurance program or contract with a prepaid health care delivery plan.
- (h) If the coverage required by subsection (e) provided to a covered individual is for behavior analysis services, a self-insurance program established under section 7(b) of this chapter to provide health care coverage must reimburse the provider of behavior analysis services that provides behavior analysis services to a covered individual at a rate of not less than one hundred ten percent (110%) of the Medicaid reimbursement rate for behavior analysis services.
- (i) If the services required by subsection (f) provided to a covered individual are behavior analysis services, a contract with a prepaid health care delivery plan that is entered into or renewed under section 7(c) of this chapter must reimburse the provider of behavior analysis services that provides behavior analysis services to a covered individual at a rate of not less than one hundred ten percent (110%) of the Medicaid reimbursement rate for behavior analysis services.

SECTION 2. IC 27-8-14.2-0.1 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2026]: **Sec. 0.1.** The amendments made to this chapter in the 2026 session of the general assembly apply to an accident and sickness insurance policy that is issued, delivered, amended, or renewed after June 30, 2026.

SECTION 3. IC 27-8-14.2-3.3 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2026]: Sec. 3.3. (a) As used in this chapter, "behavior analysis services" means services related to the design, implementation, and evaluation of instructional and environmental modifications to produce socially significant improvements in human behavior. The term includes the following:

- (1) Empirical identification of functional relations between behavior and environmental factors through functional assessment and analysis.
- (2) Applied behavior analysis interventions based on scientific research and the direct observation and measurement of



1	behavior and the environment.
2	(3) Use of contextual factors, motivating operations.
3	antecedent stimuli, positive reinforcement, and other
4	consequences to assist people in developing new behaviors.
5	increase or decrease existing behaviors, and emit behaviors
6	under specific environmental conditions.
7	(b) The term does not include the following:
8	(1) Psychological testing.
9	(2) Diagnosis of mental or physical disorders.
10	(3) Neuropsychology.
11	(4) Psychotherapy.
12	(5) Cognitive therapy.
13	(6) Sex therapy.
14	(7) Psychoanalysis.
15	(8) Hypnotherapy.
16	(9) Counseling.
17	SECTION 4. IC 27-8-14.2-6 IS ADDED TO THE INDIANA CODE
18	AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY
19	1, 2026]: Sec. 6. If the coverage required under this chapter
20	provided to an insured is for behavior analysis services, an
21	accident and sickness insurance policy must reimburse the
22	provider of behavior analysis services that provides behavior
23	analysis services to an insured at a rate of not less than one
24	hundred ten percent (110%) of the Medicaid reimbursement rate
25	for behavior analysis services.
26	SECTION 5. IC 27-13-7-0.1, AS ADDED BY P.L.220-2011,
27	SECTION 457, IS AMENDED TO READ AS FOLLOWS
28	[EFFECTIVE JULY 1, 2026]: Sec. 0.1. The following amendments to
29	this chapter apply as follows:
30	(1) The addition of sections 15.3 and 16 of this chapter by
31	P.L.170-1999 applies to health maintenance organization
32	contracts that are issued, delivered, or renewed after June 30,
33	1999.
34	(2) The addition of section 18 of this chapter by P.L.166-2003
35	applies to a health maintenance organization contract that is
36	entered into, delivered, amended, or renewed after December 31,
37	2003.
38	(3) The amendments made to section 14 of this chapter by
39	P.L.204-2003 apply to an individual contract or a group contract
40	that is entered into, delivered, amended, or renewed after June 30.
41	2003.



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(4) The amendments made to section 14.8 of this chapter by

1	P.L.226-2003 apply to a group or an individual contract with a
2	health maintenance organization that is entered into, delivered
3	amended, or renewed after June 30, 2003.
4	(5) The amendments made to section 14.5 of this chapter by
5	P.L.196-2005 apply to a health maintenance organization contract
6	that is entered into, delivered, amended, or renewed after June 30
7	2005.
8	(6) The amendments made to section 3 of this chapter by
9	P.L.218-2007 apply to a health maintenance organization contract
10	that is entered into, delivered, amended, or renewed after June 30
11	2007.
12	(7) The addition of section 19 of this chapter by P.L.109-2008
13	applies to an individual contract or a group contract that is entered
14	into, delivered, amended, or renewed after June 30, 2008.
15	(8) The amendments made to section 14.7 of this chapter in
16	the 2026 session of the general assembly apply to a health
17	maintenance organization contract that is entered into
18	delivered, amended, or renewed after June 30, 2026.
19	SECTION 6. IC 27-13-7-14.7, AS AMENDED BY P.L.124-2018
20	SECTION 88, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
21	JULY 1, 2026]: Sec. 14.7. (a) As used in this section, "autism spectrum
22	disorder" means a neurological condition, including Asperger's
23	syndrome and autism, as defined in the Diagnostic and Statistical
24	Manual of Mental Disorders.
25	(b) As used in this section, "behavior analysis services" means
26	services related to the design, implementation, and evaluation of
27	instructional and environmental modifications to produce socially
28	significant improvements in human behavior. The term includes
29	the following:
30	(1) Empirical identification of functional relations between
31	behavior and environmental factors through functional
32 33	assessment and analysis.
33 34	(2) Applied behavior analysis interventions based on scientific
35	research and the direct observation and measurement of behavior and the environment.
36 36	
37	(3) Use of contextual factors, motivating operations antecedent stimuli, positive reinforcement, and other
38	consequences to assist people in developing new behaviors
39	increase or decrease existing behaviors, and emit behaviors

under specific environmental conditions.

However, the term does not include, psychological testing,

diagnosis of mental or physical disorders, neuropsychology,



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psychotherapy, cognitive therapy, sex therapy, psychoanalysis, hypnotherapy, or counseling.

- (b) (c) A group contract with a health maintenance organization that provides basic health care services must provide services for the treatment of an autism spectrum disorder of an enrollee. Services provided to an enrollee under this subsection are limited to services that are prescribed by the enrollee's treating physician in accordance with a treatment plan. A health maintenance organization may not deny or refuse to provide services to, or refuse to renew, refuse to reissue, or otherwise terminate or restrict coverage under a group contract to services to an individual solely because the individual is diagnosed with an autism spectrum disorder.
- (c) (d) The services required under subsection (b) (c) may not be subject to dollar limits, deductibles, copayments, or coinsurance provisions that are less favorable to an enrollee than the dollar limits, deductibles, copayments, or coinsurance provisions that apply to physical illness generally under the contract with the health maintenance organization.
- (e) If the services required under subsection (c) provided to an enrollee are behavior analysis services, a group contract with a health maintenance organization that provides basic health care services must reimburse the provider of behavior analysis services that provides behavior analysis services to an enrollee at a rate of not less than one hundred ten percent (110%) of the Medicaid reimbursement rate for behavior analysis services.
- (d) (f) A health maintenance organization that enters into an individual contract that provides basic health care services must offer to provide services for the treatment of an autism spectrum disorder of an enrollee. Services provided to an enrollee under this subsection are limited to services that are prescribed by the enrollee's treating physician in accordance with a treatment plan. A health maintenance organization may not deny or refuse to provide services to, or refuse to renew, refuse to reissue, or otherwise terminate or restrict coverage under an individual contract to services to an individual solely because the individual is diagnosed with an autism spectrum disorder.
- (e) (g) The services that must be offered under subsection (d) (f) may not be subject to dollar limits, deductibles, copayments, or coinsurance provisions that are less favorable to an enrollee than the dollar limits, deductibles, copayments, or coinsurance provisions that apply to physical illness generally under the contract with the health maintenance organization.
 - (h) If the services required under subsection (f) provided to an



1	enrollee are behavior analysis services, a health maintenance
2	organization that enters into an individual contract that provides
3	basic health care services must reimburse the provider of behavior
4	analysis services that provides behavior analysis services to an
5	enrollee at a rate of not less than one hundred ten percent (110%)
6	of the Medicaid reimbursement rate for behavior analysis services.

