Bulletin No: 96-19

To: Commercial Health Insurers

From: Commissioner Linda Ruthardt

RE: New Reimbursement Requirements for Early Intervention Services

Date: October 10, 1996

The purpose of this Bulletin is to inform commercial health insurers that St. 1996, c. 365, § 16 has amended M.G.L. c. 175 § 47C so that the maximum benefit required to be provided for early intervention services has been increased.

M.G.L. c. 175 § 47C, requires, in addition to other benefits, that dependent coverage must include coverage for medically necessary early intervention services (including occupational, physical and speech therapy, nursing care and psychological counseling) for children from birth until three months after their third birthday or until September first of the year of the recipient’s third birthday if the recipient was born after April first.

St. 1996, c. 365, § 16 amends M.G.L. 175 § 47C to increase the amount insurers are required to reimburse for costs for such early intervention services to a maximum benefit of $3,200 per year per child and an aggregate benefit of $9,600 over the total enrollment period.

This mandate is effective for all policies and certificates that are issued or renewed on or after August 10, 1996. Please refer to the M.G.L. c. 175 § 47C and St. 1996, c. 365 § 16 for a complete description of the benefits required to be provided.

Any questions regarding this Bulletin may be directed to Caroline E. DeStefano, Assistant General Counsel at (617) 521-7364.