

# MEDICAL POLICY

<b>SUBJECT: HANDICAPPED DEPENDENT COVERAGE</b>	<b>EFFECTIVE DATE: 02/01/01</b> <b>REVISED DATE: 05/23/02, 04/24/03, 05/27/04, 04/28/05, 08/25/05, 06/22/06, 12/07/06, 12/13/07, 12/11/08, 12/10/09, 08/26/10, 08/25/11, 08/23/12, 06/27/13, 06/26/14, 06/25/15, 06/26/16, 08/25/17, 10/25/18</b>
<b>POLICY NUMBER: 10.01.08</b> <b>CATEGORY: Contract Clarification</b>	<b>PAGE: 1 OF: 3</b>
<ul style="list-style-type: none"><li>• <i>If a product excludes coverage for a service, it is not covered, and medical policy criteria do not apply.</i></li><li>• <i>If a commercial product (including an Essential Plan product) or a Medicaid product covers a specific service, medical policy criteria apply to the benefit.</i></li><li>• <i>If a Medicare product covers a specific service, and there is no national or local Medicare coverage decision for the service, medical policy criteria apply to the benefit.</i></li></ul>	

## POLICY STATEMENT:

Coverage for handicapped dependent child (adult or minor) status will be determined by the Health Plan Medical Director based upon the certification of the dependent child's condition by the treating physician/therapist and the medical criteria stated in the *Disability Evaluation under Social Security (Blue Book)*, published by the Social Security Administration, as a guide.

Certification by the dependent child's treating physician/therapist consists of submission of a completed handicapped dependent application. Determination of handicapped dependent child status may include the review of the dependent's medical records and/or discussion with the requesting physician/therapist.

## POLICY GUIDELINES:

- I. Refer to the member's subscriber contract and/or the Customer (Member/Provider) Service Department for specific contract age limitations. (*Refer to the Description section for information regarding the Patient Protection and Affordable Care Act.*)
- II. In order to be considered for coverage as a handicapped dependent the handicapping condition must have existed prior to attainment of the age when dependent coverage would otherwise terminate (prior to contract dependent age limitations).
- III. In order to enroll for coverage as a handicapped dependent, the handicapping condition must have existed prior to the date on which coverage for the dependent would otherwise have terminated under the subscriber contract due to attainment of the limiting age. For example, if an individual over the age of a qualified dependent requests enrollment as a handicapped dependent, enrollment must be provided if the handicapping condition existed prior to the individual attaining age 26 (or 29, depending on the policy.)
- IV. In order for a covered dependent to continue coverage beyond the date coverage would otherwise terminate due to age, the individual must have a handicapping condition and be chiefly dependent upon the subscriber for support and maintenance. The subscriber must request continued coverage within 31 days from the date the dependent attains the termination age and submit an application and proof of the dependent's incapacity
- V. Requests for handicapped dependent status based upon *physical, developmental disability* or intellectual disability will be reviewed by a Health Plan Medical Director, or his/her appointed designee. Denials for handicapped dependent coverage based upon physical, developmental disability or intellectual disability will be made by a Health Plan Medical Director.
- VI. Requests for handicapped dependent status based upon *mental illness* will be reviewed by a Health Plan Behavioral Health Medical Director, or his/her appointed designee. Denials for handicapped dependent coverage based upon mental illness will be made by a Health Plan Behavioral Health Medical Director.
- VII. The subscriber and the dependent's attending physician must complete a handicapped dependent application and submit it to the Health Plan for review.

<p><b>SUBJECT: HANDICAPPED DEPENDENT COVERAGE</b></p> <p><b>POLICY NUMBER: 10.01.08</b></p> <p><b>CATEGORY: Contract Clarification</b></p>	<p><b>EFFECTIVE DATE: 02/01/01</b></p> <p><b>REVISED DATE: 05/23/02, 04/24/03, 05/27/04, 04/28/05, 08/25/05, 06/22/06, 12/07/06, 12/13/07, 12/11/08, 12/10/09, 08/26/10, 08/25/11, 08/23/12, 06/27/13, 06/26/14, 06/25/15, 06/26/16, 08/25/17, 10/25/18</b></p> <p><b>PAGE: 2 OF: 3</b></p>
--	---

**DESCRIPTION:**

Under the New York State Insurance and Public Health laws handicapped dependent coverage will be granted to unmarried dependent children, regardless of age, who are incapable of self-sustaining employment by reason of physical handicap, mental illness, developmental disability, or intellectual disability as defined in the New York State Mental Hygiene Law, and who became so incapable **prior to attainment of the age at which dependent coverage would otherwise terminate.**

Handicapped dependent status is determined based upon the certification of the dependent's condition by the treating physician/therapist and the medical criteria stated in the *Disability Evaluation under Social Security (Blue Book)*, published by the Social Security Administration, as a guide.

Under the New York State Mental Hygiene Laws:

- I. *Mental illness* is defined as an affliction with a mental disease or mental condition which is manifested by a disorder or disturbance in behavior, feeling, thinking, or judgment to such an extent that the person afflicted requires care, treatment and rehabilitation.
- II. *Developmental disability* is defined as a disability of a person which:
  - A. Is attributable to:
    1. Intellectual disability, cerebral palsy, epilepsy, neurologic impairment, familial dysautonomia, or autism;
    2. Any other condition of a person found to be closely related to intellectual disability because such condition results in similar impairment of general intellectual functioning or adaptive behavior to that of intellectually disabled persons or requires treatment and services similar to those required for such person; or
    3. Dyslexia resulting from disabilities described above;
  - B. Originates before such person attains age twenty-two;
  - C. Has continued or can be expected to continue indefinitely; and
  - D. Constitutes a substantial handicap to such person's ability to function normally in society.
- III. According to the American Psychiatric Association (APA), intellectual disability is defined by the following three criteria:
  - A. Deficits in intellectual functions, such as reasoning, problem solving, planning, abstract thinking, judgment, academic learning, and learning from experience, confirmed by both clinical assessment and individualized, standardized intelligence testing; and
  - B. Deficits in adaptive functioning that result in failure to meet developmental and sociocultural standards for personal independence and social responsibility. Without ongoing support, the adaptive deficits limit functioning in one or more activities of daily life, such as communication, social participation, and independent living, across multiple environments, such as home, school, work, and community; and
  - C. Onset during the developmental period.

Under federal regulations of the Patient Protection and Affordable Care Act, all contracts, regardless of products and funding arrangements, are required to provide coverage for adult children until the adult child's 26<sup>th</sup> birthday for plan years beginning after September 23, 2010.

**CODES:**      Number                      Description

*Eligibility for reimbursement is based upon the benefits set forth in the member's subscriber contract.*

**CODES MAY NOT BE COVERED UNDER ALL CIRCUMSTANCES. PLEASE READ THE POLICY AND GUIDELINES STATEMENTS CAREFULLY.**

Codes may not be all inclusive as the AMA and CMS code updates may occur more frequently than policy updates.

**CPT:**                      Several

<b>SUBJECT: HANDICAPPED DEPENDENT COVERAGE</b>  <b>POLICY NUMBER: 10.01.08</b> <b>CATEGORY: Contract Clarification</b>	<b>EFFECTIVE DATE: 02/01/01</b> <b>REVISED DATE: 05/23/02, 04/24/03, 05/27/04, 04/28/05, 08/25/05, 06/22/06, 12/07/06, 12/13/07, 12/11/08, 12/10/09, 08/26/10, 08/25/11, 08/23/12, 06/27/13, 06/26/14, 06/25/15, 06/26/16, 08/25/17, 10/25/18</b>  <b>PAGE: 3 OF: 3</b>
---	--

Copyright © 2018 American Medical Association, Chicago, IL

**HCPCS:** Several

**ICD9:** Several

**ICD10:** Several

**REFERENCES:**

American Association on Intellectual and Developmental Disabilities. Definition of intellectual disability. [<http://aaid.org/intellectual-disability/definition>] accessed 8/26/18.

\*American Psychiatric Association. Diagnostic and statistical manual of mental disorders. 5th ed. Arlington, VA: American Psychiatric Publishing, 2013.

\*New York State Insurance Law § 3216 (c) (4) (A), § 4304 (d) (1), § 4305 (c). [<http://public.leginfo.state.ny.us/lawsrch.cgi?NVLWO:>] accessed 8/26/18.

\*New York State Mental Hygiene Law Chapter 27 (A) (1) § 1.03. [<https://codes.findlaw.com/ny/mental-hygiene-law/mhy-sect-1-03.html>] accessed 8/26/18.

\*Social Security Administration Office of Disability. Disability evaluation under Social Security. SSA Pub 64-039. 2008 Sep, last reviewed or modified 5/18/15 [<https://www.socialsecurity.gov/disability/professionals/bluebook/>] accessed 8/26/18.

\*key article

**KEY WORDS:**

Handicapped dependent.

## CMS COVERAGE FOR MEDICARE PRODUCT MEMBERS

Based on our review, handicapped dependent coverage is not addressed in National or Local Medicare coverage determinations.