

SPECIAL NEEDS BENEFIT (AUTISM SPECTRUM DISORDERS)



Effective 1/1/2023: Coverage for Autism will include the previously non-covered services below and related services per [Medical Policy #V-37-038](#). Please provide this Medical Policy, reflecting covered and non-covered services, to your provider to confirm the services being rendered are eligible for this reimbursement benefit.

Benefit Limit:

- \$2,500 per benefit period (calendar year). This excludes out-of-pocket expenses such as co-pays, co-insurance, and deductibles.

Benefits that are not covered but are eligible for reimbursement include:

- Animal or pet assisted therapy
- Chelation therapy and detoxification for heavy metals
- Craniosacral therapy
- Fibroblast growth factor 2
- Hydrotherapy
- Hyperbaric oxygen therapy
- Intravenous Immune Globulin (IVIG)
- Music, art therapy (services primarily educational in nature)
- Naltrexone therapy
- Neurofeedback
- Peripheral stem cell transplantation and umbilical cord stem cell transplantation
- Secretin therapy
- Social therapeutic group and behavioral health day treatment
- Testing for immunologic abnormalities
- Vitamin: Laboratory testing
- Vitamins, nutritional supplements, or diet-oriented therapy

For more information reach out to our insurance team at insuranceplans@uua.org.

ONLINE CLAIM SUBMISSION PROCESS



1. Complete the [Member Submitted Health Insurance Claim Form](#)
 - a. Report “Special Needs Reimbursement” and the diagnosis code and procedure/service performed in the “Diagnosis or Nature of Illness or Injury” section
2. Print and Sign/Date the form
3. Upload the completed claim form along with images of all itemized receipts via the Message Center in the [Highmark Member Portal](#).
 - a. Once logged in, select "Need Help" in the top right corner
 - b. Select "Contact Us"
 - c. Select plan
 - d. Select message topic: "Claim Inquiry"
 - e. In the questions or comments, indicate the inquiry is for submission of Special Needs Benefit Reimbursement
 - f. Attach the completed claim and receipts
 - g. Complete the required information and press "Submit"