

## 2025 State PANS and PANDAS Legislation

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| Jurisdiction                     | Bill Number                                   | Description  | Status  |
| Arkansas                         | <a href="#"><u>SB 128</u></a>                 | Appropriates \$175,000 to the University of Arkansas for Medical Sciences PANS/PANDAS Clinic and Programs for fiscal year ending June 30, 2026.  | 1/27/2025 Read first time, rules suspended, read second time, referred to Joint Budget Committee. |
| Georgia                          | <a href="#"><u>HB 124</u></a>                 | Requires individual and group health benefit plans, health care services contracts, and the state health benefit plan for employees to cover health care services for PANS and PANDAS. Coverage must include services for the diagnosis, treatment, appropriate management or ongoing monitoring of a covered person's disorder when such services are supported by nationally recognized clinical practice guidelines.  | 1/29/2025 House second readers.   |
| Massachusetts                    | <a href="#"><u>SD 341</u></a>                 | Requires the Department of Mental Health, in conjunction with the Department of Education to conduct a study of pediatric and adolescent psychiatric hospital settings and therapeutic day schools to determine if any children within these settings have root causes in missed or known neuroimmune issues or PANS and PANDAS. The study findings must include information regarding prevalence and report outcomes of interviewed children & families previously misdiagnosed and subsequently found to have PANS and PANDAS.   | Filed.  |
| Massachusetts                    | <a href="#"><u>SD 2084</u></a>                | Requires the department of public health to establish a program for PANS and PANDAS screening, which must adhere to the recommendations developed by a medical professional consortium convened by the department for the purposes of researching, identifying, and publishing best practice standards for diagnosis and treatment of such disorders or syndrome that are accessible for medical professionals and are based on evidence of positive patient outcomes. The department also must develop PANS working criteria to describe a clinically distinct presentation as defined in legislation. Physicians, licensed child psychiatrists or psychologists, licensed certified social workers and licensed mental health counselors must screen patients for PANS and PANDAS using specified methods. Licensed, registered or approved health care facilities serving children, including but not limited to hospitals, clinics and HMOs must take appropriate steps to ensure that their patients receive specified PANS and PANDAS screening. | Filed.  |
| Massachusetts                    | <a href="#"><u>HD 3534</u></a>                | Requires the department of public health to establish a program for PANS and PANDAS screening, which must adhere to the recommendations developed by a medical professional consortium convened by the department for the purposes of researching, identifying, and publishing best practice standards for diagnosis and treatment of such disorders or syndrome that are accessible for medical professionals and are based on evidence of positive patient outcomes. The department also must develop PANS working criteria to describe a clinically distinct presentation as defined in legislation. Physicians, licensed child psychiatrists or psychologists, licensed certified social workers and licensed mental health counselors must screen patients for PANS and PANDAS using specified methods. Licensed, registered or approved health care facilities serving children, including but not limited to hospitals, clinics and HMOs must take appropriate steps to ensure that their patients receive specified PANS and PANDAS screening. | Filed.  |
| Missouri                         | <a href="#"><u>HB 623</u></a> , as introduced | Designates March 26th of each year as PANS/PANDAS Awareness Day.   | 1/9/2025 Read second time (H)   |
| New York                         | <a href="#"><u>S 2655</u></a> , as introduced | Requires health plans and health issuers offering health insurance coverage as a group health plan to provide coverage for a beneficiary or participant who has PANS if the attending physician certifies in writing the medical necessity of the proposed course of rehabilitative treatment.   | 1/22/2025 Referred to Insurance Committee   |
| New York                         | <a href="#"><u>A 3362</u></a> , as introduced | Requires health plans and health issuers offering health insurance coverage as a group health plan to provide coverage for a beneficiary or participant who has PANS if the attending physician certifies in writing the medical necessity of the proposed course of rehabilitative treatment.   | 1/27/2025 Referred to Insurance Committee   |

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| <b>Jurisdiction</b>              | <b>Bill Number</b>              | <b>Description</b>  | <b>Status</b>   |
| <b>Tennessee</b>                 | <u>HB 411</u>                   | The Division of TennCare must require group health insurance contracts, group or hospital medical insurance policies, plans or group policies delivered, issued, amended or renewed by a managed care organization to cover medically necessary prescribed treatment for PANS and PANDAS. Treatment includes antibiotics, medication, behavioral therapies to manage neuropsychiatric symptoms, immunomodulating medicines, plasma exchange, and intravenous immunoglobulin therapy. A group or individual health insurance policy may not deny or delay coverage of medically necessary treatment solely on the basis of prior treatment for PANS and PANDAS. Coverage for PANS and PANDAS treatment must adhere to the treatment recommendations developed by a medical professional consortium. Requires the use of the diagnostic code for autoimmune encephalitis for billing purposes in the absence of a code for PANS and PANDAS. | 2/3/2025 Introduced, passed first consideration.  |
| <b>Tennessee</b>                 | <u>HJR 73</u>                   | Commemorates October 9, 2025 as PANDAS Awareness Day.   | 2/3/2025 Introduced and placed on House consent calendar 2/5/2025.  |
| <b>Virginia</b>                  | <u>HB 1641</u> , as introduced  | Authorizes the Board of Medical Assistance Services to amend the state plan for medical assistance services to include a provision for payment for the prophylaxis, diagnosis, and treatment of PANDAS and PANS. Requires individual and group accident and sickness insurers; corporations providing individual or group accident and sickness subscription contracts; and health maintenance organizations providing a health care plan for health care services to cover prophylaxis, diagnosis, and treatment of PANDAS and PANS. Coverage requirements include antimicrobials, medication, and behavioral therapies to manage neuropsychiatric symptoms, immunomodulating medicines, plasma exchange, and intravenous immunoglobulin therapy. Prohibits certain actions with respect to coverage determinations.   | 2/3/2025 Read second time and engrossed.  |
| <b>Virginia</b>                  | <u>SJR 273</u> , as engrossed   | Appoints Ann Flippin, David Jaffe, Aradhana Sood and Terry Woody to the Advisory Council on PANDAS and PANS.  | 1/31/2025 House reported from Privileges and Elections as amended (21-Y 0-N)                                      |
| <b>Virginia</b>                  | <u>SJR 274</u> , as introduced  | Appoints Brian Gottstein, Galam Khan, and Kristina Nunnally to the Advisory Council on PANDAS and PANS.   | 1/31/2025 House reported from Privileges and Elections as amended (21-Y 0-N)                                      |
| <b>Virginia</b>                  | <u>SJR 275</u> , as engrossed   | Appoints Susan Swedo to the Advisory Council on PANDAS and PANS.  | 1/31/2025 House reported from Privileges and Elections as amended (21-Y 0-N)                                      |
| <b>Washington</b>                | <u>HB 1198</u> , as introduced. | The State Health Care Authority must consider evidence-based recommendations from the Oregon health evidence review commission when making coverage decisions for the treatment of PANDAS and PANS. (See page 133)  | 1/13/2025 First reading, referred to Appropriations. Public hearing in the House Committee on Appropriations 4 PM |
| <b>Washington</b>                | <u>SB 5167</u> , as introduced. | The State Health Care Authority must consider evidence-based recommendations from the Oregon health evidence review commission when making coverage decisions for the treatment of PANDAS and PANS. (See page 133)  | 1/14/2025 Public hearing in Senate Ways and Means 4 PM.   |
| <b>Washington</b>                | <u>HB 1741</u> , as introduced  | For health plans other than those offered to public employees and dependents, health carriers must provide initial coverage for three monthly immunomodulatory courses of intravenous immunoglobulin for the treatment of PANDAS and PANS and subsequent courses as deemed necessary by treating providers when certain conditions are met. Conditions include consultation with a subspecialist and that the subspecialist and primary care provider recommend the treatment. The health carrier may require that the patient be clinically reevaluated every three months.  | 1/30/2025 First reading, referred to Health Care & Wellness.  |
| <b>Updated 2/4/2025</b>          |                                 | <b>Johnson Policy Consulting</b> <a href="https://policyconsult.com/resources">https://policyconsult.com/resources</a>  | <b>202-258-5529</b>   |