

Improved Transparency of Rehabilitation and Habilitation Services for Consumers

On April 6, 2016, the Centers for Medicare & Medicaid Services (CMS) posted the final 2017 [Summary of Benefits and Coverage \(SBC\) template](#) and uniform [Glossary of Health Coverage and Medical Terms](#) (Uniform Glossary), which includes important changes specific to rehabilitation and habilitation services that health plans must follow. The SBC is for use by all health plans to allow consumers to have an even comparison among available health plans, and to help enrollees better understand and use their own coverage. The new SBC must be used for plan years with open enrollment periods beginning after April 1, 2017.

ASHA effectively argued that health plans must include visit limits related to speech therapy for rehabilitation and habilitation services, and that visit limits must be listed separately for each. (See [SBC template](#), pg. 3) The greatest improvement in the final SBC is that the terms used in an electronic version can be fully hyperlinked to the Uniform Glossary. ASHA is pleased that rehabilitation and habilitation services are hyperlinked terms that will automatically direct consumers to the definition. (See [Uniform Glossary](#), pgs. 2 and 5) The Uniform Glossary is to be used in tandem with the SBC to help consumers better understand their benefits. In addition, we support the inclusion of "habilitation" in the definition for "medically necessary". (See [Uniform Glossary](#), pg. 3)

Background

Under the Patient Protection and Affordable Care Act of 2010, issuers and health plans are required to provide a brief summary of what the plan covers and the cost sharing responsibility of the consumer in order to help individuals make more informed choices among health plan options and better understand their coverage. Plans and issuers are also required to provide a comprehensive uniform glossary of commonly used health coverage and medical terms.

The final SBC is the product of almost a year and a half process that ASHA was actively engaged in as an interested party of the National Association of Insurance Commissioners' Consumer Information stakeholder group. The SBC is issued jointly by CMS with the U.S. Departments of Labor and Treasury and will be used by all health plans, including individual, small group, and large group; insured and self-insured; grandfathered, transitional, and ACA compliant.

Resources

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