

This message is from Ellen Pinnes and The Disability Coalition.

June 2012

Health Care Reform Information Series – Bulletin #8

What's Coming in 2014

Part III. – An improved benefit package: “Essential health benefits”

Current health insurance often falls short in meeting people’s needs – especially people with disabilities. The Affordable Care Act (ACA) addresses this problem by requiring that insurance cover a comprehensive package of what it calls “essential health benefits”.

**** Benefits that must be covered** – In addition to the usual benefits that we expect insurance to cover, like doctor visits, hospitalization, and prescription drugs, the ACA requires that the benefit package include some services that are important to people with disabilities but often aren’t covered by insurance today – like rehabilitation, habilitation and behavioral health.

**** Can’t discriminate based on disability** – Benefits must address the needs of different population groups, including people with disabilities. The ACA requires that decisions on what benefits are included in the essential benefits package, how providers are paid, or what services will be covered for a particular individual can’t be based on the person’s disability, expected length or perceived quality of life, or other inappropriate factors.

**** Mental health parity will apply** – There can’t be stricter limits or higher payment requirements imposed on these services than those that apply to physical health care.

**** Emergency care can’t be unreasonably limited** – The insurance company can’t require prior approval before a person gets emergency services from a provider that isn’t in the company’s network, and can’t charge more for going to an out-of-network emergency provider than they do for one that’s in-network.

**** But questions remain** – It will be up to the federal Department of Health and Human Services (DHHS) to set standards for what will be included in the essential health benefits package. Last year DHHS proposed an approach that would let each state set its own package of essential benefits rather than having uniform requirements that apply in all states. Each state’s package would be based on typical existing insurance plans, modified as necessary to include all the required benefits listed in the ACA. Advocates are concerned about this approach because it might not go far enough in assuring that people with disabilities have meaningful access to the services they need. DHHS hasn’t yet made a final decision.

Next: What’s coming in 2014 – Personal responsibility and financial help