

September 30, 2010

*SUBMITTED VIA EMAIL*

Jennifer R. Cook  
Senior Health Policy Analyst and Counsel  
National Association of Insurance Commissioners  
Washington, DC Executive Office  
444 North Capitol Street NW, Suite 701  
Washington, DC 20001

**Re: AOTA Comments - Proposed Glossary and Consumer Information Form Templates**

Dear Ms. Cook:

We are writing on behalf of the American Occupational Therapy Association, Inc. (AOTA), which represents the professional interests of 140,000 occupational therapists, occupational therapy assistants and students throughout the country. We appreciate the opportunity to provide comments regarding NAIC's proposed *Glossary of Health Insurance and Medical Terms* and Consumer Information Form Templates.

There are two issues AOTA believes should be addressed for clarification to consumers as they compare plans. The first is a revision to use parallel language in two particular terms in the *Glossary of Health Insurance and Medical Terms*. The second is to draw the subgroup's attention to specific concerns related to information used as an example on the Consumer Information Forms from Company 2.

**Definition of "Rehabilitation Services" and "Habilitation Services"**

AOTA supports NAIC's definition of "rehabilitation services" in the *Glossary of Health Insurance and Medical Terms*. AOTA believes the definition is clear to consumers and provides an inclusive and accurate description of the services available to consumers. The specific listing of rehabilitation services covered under this category is helpful to consumers.

AOTA also appreciates the comprehensive definition of "habilitation services" proposed by NAIC. In order to avoid any potential consumer confusion related to habilitation as opposed to rehabilitation services, AOTA suggests using more parallel definitions of the two terms. In particular, AOTA suggests adding the last sentence of the rehabilitation services definition to the habilitation services definition as specified below:

Underlined text = AOTA proposed amendment

**Habilitation Services**

Health care services that help a person keep, learn or improve skills and functioning for daily living. Examples include therapy for a child who isn't walking or talking at the expected age. These services may include physical and occupational therapy, speech-

language pathology and psychiatric rehabilitation services in a variety of inpatient and/or outpatient settings.

**Concerns Regarding NAIC’s Proposed Consumer Information Forms A & B From Company 2**

AOTA notes with concern that in the templates provided on Form A & B from Company 2 that habilitation services are listed as “Not Covered” both in-network and out-of-network.

**Form A – Company #2 PPO**

If you have a recovery or other special health need	Home health care	20% coinsurance	20% coinsurance
	Rehabilitation services	20% coinsurance	20% coinsurance
	Habilitation services	Not Covered	Not Covered
	Skilled nursing care	Not Covered	Not Covered
	Durable medical equipment	20% coinsurance	20% coinsurance
	Hospice service	20% coinsurance	20% coinsurance

**Form B – Company #2 PPO**

Common Medical Events	Examples of services you may need	Your cost if you use an	
		In-Network Provider <i>(doctors and hospitals in the plan’s network)</i>	Out-of-Network Provider <i>(you may be responsible for more charges)</i>
If you have a recovery or other special health need	Home health care	20% coinsurance	20% coinsurance
	Rehabilitation services	20% coinsurance	20% coinsurance
	Habilitation services	<i>Not Covered</i>	<i>Not Covered</i>
	Skilled nursing care	<i>Not Covered</i>	<i>Not Covered</i>
	Durable medical equipment	20% coinsurance	20% coinsurance
	Hospice service	20% coinsurance	20% coinsurance

While we understand that this may be merely an example, AOTA believes it sends an inappropriate message regarding the coverage of habilitation services and ignores that habilitation services is an explicit part of the essential benefits package listed in Section 1302(b)(1)(G) of the Patient Protection and Affordable Care Act (Public Law 111-148). In addition, AOTA notes that habilitation was not listed on those same forms as an excluded service. AOTA suggests that the templates changed to reflect the statutorily required coverage of habilitation services under all exchange plans.

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Again, AOTA appreciates the opportunity to submit these comments and looks forward to continue working with NAIC during the health care reform implementation process. Please contact AOTA at [FAD@aota.org](mailto:FAD@aota.org) with any questions of comments that relates directly to occupational therapy, rehabilitation or habilitation services.

Sincerely,



Tim Nanof, MSW  
Federal Affairs Manager



Chuck Willmarth  
Director, State Affairs and Reimbursement & Regulatory Policy