



**AMERICAN
SPEECH-LANGUAGE-
HEARING
ASSOCIATION**

Technical Assistance for States to Design Essential Health Benefits (EHB) Packages for Rehabilitative and Habilitative Services and Devices Audiology and Speech-Language Pathology

The Affordable Care Act (ACA) lists 10 benefit categories that must be covered as essential—beginning in 2014—by new individual and small-group plans. The U.S. Department of Health and Human Services (HHS) released guidance instructing states to choose an existing plan as a benchmark for their essential health benefits (EHB) package. HHS guidance directs states to enhance that plan where it does not adequately cover all 10 of the required benefit categories. The following information is designed to provide guidance in one particular area, **rehabilitative and habilitative services and devices**, to assist both pro-

viders and decision-makers as to some of the basic areas that should be addressed in design of the EHB packages.

This document describes a single benefit category—rehabilitative and habilitative services and devices, specific to the provision of speech language pathology and audiology services. The services include direct therapeutic intervention as well as the provision of hearing aids, augmentative communication devices, and other assistive technologies and supplies.

The following are key areas to address when assisting in designing benefit packages:

States' Role

States need to choose an existing plan as a benchmark for their EHB package and enhance that plan where it does not adequately cover all 10 of the federally required benefit categories.

Definition of Benefit

Definitions developed by the National Association of Insurance Commissioners (NAIC) include:

Rehabilitation: Health care services that help a person *keep, get back, or improve skills* and functioning for daily living that have been lost or impaired because a person was sick, hurt, or disabled. These services may include physical and occupational therapy and speech-language pathology and psychiatric rehabilitation services in a variety of inpatient and/or outpatient settings.

Habilitation: 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 and speech-language pathology and other services for people with disabilities in a variety of inpatient and/or outpatient settings.

Definitions should recognize that habilitative and rehabilitative services and devices

- are essential medical interventions;
- accommodate the health care needs of those with functional limitations;
- speed recovery by achieving better outcomes and enhancing the likelihood individuals can be discharged from the hospital to their homes, live longer, and/or retain a higher level of function;
- improve an individual's long-term functional and health status and increase the likelihood he or she can achieve independent living and a high quality of life;
- halt or slow the progression of primary and secondary disabilities by maintaining function and preventing further deterioration of function.

For more information, contact Laurie Alban Havens, ASHA's director of private health plans and Medicaid advocacy, at lalbanhavens@asha.org or 301-296-5677.

Devices Related to Rehabilitation and Habilitation

Rehabilitative and habilitative devices that aid speech and hearing include durable medical equipment (DME), orthotics, prosthetics, low vision aids, hearing aids, augmentative communication devices, and other assistive technologies and supplies. States should define these devices to explicitly include devices that maintain as well as improve function, consistent with the definitions for rehabilitative and habilitative services adopted by NAIC.

- Augmentative and alternative communication (AAC) is a compensatory means of supporting communication that may require specialized devices ordered by a health care professional to assist individuals with severe speech and language problems; AAC devices supplement existing speech or replace speech that is not functional. Examples include picture and symbol communication boards and electronic devices, such as speech generating devices.
- Hearing aids and assistive listening devices are medical devices ordered by a health care professional to assist individuals with hearing loss to amplify sound and/or counter the negative effects of environmental acoustics and background noise.

Settings and Levels of Care for Services

These services and devices can be provided in an array of settings—such as inpatient rehabilitation hospitals and other inpatient or transitional rehabilitation settings, outpatient therapy clinics, community provider offices, the patient's home—and at various levels of intensity, duration, and scope, depending on the severity of the condition and the functional impairment presented by the particular individual.

Examples of Coverage Language

- Habilitation services include speech-language pathology and audiology evaluation, assessment, and treatment that enable persons born with congenital and/or neurodevelopmental conditions or developmental disabilities to acquire the skills and ability to function in social, education, and vocational activities. Such services include the support of assistive technology such as speech-generating devices or hearing aids.
- Rehabilitative services include speech-language pathology and audiology evaluation, assessment, and treatment that enable persons with neurological conditions—such as traumatic brain injury, stroke, and other acquired neurologic conditions—to improve cognitive function for social, educational, and vocational activities. This includes the support of assistive technology such as speech-generating devices or hearing aids.

Resources:

- Sample advocacy letter <http://www.asha.org/uploadedfiles/Template-Letter-for-Habilitation-Advocacy.pdf>
- ASHA's Model Benefits <http://www.asha.org/public/coverage/model-benefits/>
- EHB from CMS http://cciio.cms.gov/resources/files/Files2/12162011/essential_health_benefits_bulletin.pdf
- FAQ from CMS <http://cciio.cms.gov/resources/files/Files2/02172012/ehb-faq-508.pdf>
- ASHA's health care reform site <http://www.asha.org/practice/Health-Care-Reform/Patient-Protection-and-Affordable-Care-Act/>

Summary Checklist for State Essential Health Benefit Package

- ✓ Speech-language pathology and audiology services are included.
- ✓ Coverage language addresses rehabilitation and habilitation benefits specifically.
- ✓ Habilitation services are covered in parity with rehabilitation services.
- ✓ Hearing aids and assistive listening devices are included.
- ✓ Augmentative and alternative communication devices are included.
- ✓ Services can be provided in a variety of care settings (e.g., inpatient, outpatient, post-acute, day program, residential).
- ✓ State mandates (e.g., hearing aids) are incorporated in benefits.
- ✓ There is a guarantee that coverage decisions, reimbursement rates, incentive programs, and benefit design avoid discrimination based on disability, among other things.



In reviewing the health package to determine that the above services or conditions are included, providers and decision-makers should also determine what services or conditions are excluded.