

COMMONWEALTH OF MASSACHUSETTS Office of Consumer Affairs and Business Regulation DIVISION OF INSURANCE 1000 Washington Street, Suite 810 • Boston, MA 02118-6200

(617) 521-7794 • http://www.mass.gov/doi

CHARLES D. BAKER GOVERNOR

KARYN E. POLITO LIEUTENANT GOVERNOR JAY ASH SECRETARY OF HOUSING AND ECONOMIC DEVELOPMENT

JOHN C. CHAPMAN UNDERSECRETARY OF CONSUMER AFFAIRS AND BUSINESS REGULATION

> DANIEL R. JUDSON COMMISSIONER OF INSURANCE

HEALTH COVERAGE Filing Guidance Notice 2016-D

TO:	Commercial Health Insurers, Blue Cross and Blue Shield of Massachusetts, Inc. and Health Maintenance Organizations
FROM:	Kevin Patrick Beagan, Deputy Commissioner of the Health Care Access Bureau
DATE:	June 9, 2016
RE:	Rehabilitative and Habilitative Services and Devices within Insured Health Benefit Plans

This Filing Guidance Notice is issued to provide guidance for commercial health insurers, Blue Cross and Blue Shield of Massachusetts, Inc. and Health Maintenance Organizations (collectively "Carriers") for insured health benefit plans that include rehabilitative and habilitative services and devices. Filings for insured health benefit plans utilizing the Massachusetts Essential Health Benefits Benchmark Plan that are intended to be offered on and after January 1, 2017 should be consistent with the provisions of 45 CFR 156.115(a)(5)(i) – (iii), including the following:

- benefits for habilitative services and devices are to include health care services and devices that help a person keep, learn, or improve skills and functioning for daily living and may include, for example, therapy for a child who is not walking or talking at the expected age, as well as physical and occupational therapy, speech-language pathology and other services for persons with disabilities in a variety of inpatient and/or outpatient settings;
- coverage for habilitative services and devices is not limited in a manner that is less favorable than any such limits imposed on coverage for rehabilitative services and devices; and
- there are not any combined limits on habilitative and rehabilitative services and devices.

In addition, the Division would not consider any plan provisions to be appropriate that:

- discriminate based on an individual's age, expected length of life, present or predicted disability, degree of medical dependency, quality of life, or other health conditions; or
- apply annual or lifetime dollar limits to any habilitative and rehabilitative services and devices. (Annual or lifetime limits may be converted to actuarially equivalent treatment or service limitations.)

If you have any questions regarding this Filing Guidance Notice, please contact Kevin Beagan, Deputy Commissioner of the Health Care Access Bureau, at (617) 521-7323.