



ASHA
American
Speech-Language-Hearing
Association

February 23, 2021

The Honorable Karen Fann
Chairwoman
Rules Committee
Arizona House of Representatives
1700 West Washington Street
Phoenix, AZ 85007

RE: ASHA Comments on Health Insurance Coverage; HB 2739

Dear Chairwoman Fann:

On behalf of the American Speech-Language-Hearing Association, I write to support House Bill 2739, which requires that individual health care plans, short-term limited duration insurance, and small employer group health care plans include coverage of habilitative and rehabilitative services and devices, and prevent the imposition of any preexisting condition exclusion or limitation in any health care plan.

The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for 218,000 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students. Over 3,100 ASHA members reside in Arizona.¹

ASHA supports the protection of access to habilitation and rehabilitation services. These services are essential components of high-quality insurance. The Patient Protection and Affordable Care Act (P.L. 111-148) requires consumer protections such as enforcing essential health benefits (EHB), banning preexisting condition exclusions, and eliminating ratings based on health status within the individual market. These requirements protect consumers with specific health needs who require audiology and/or speech-language pathology services. Habilitative services and devices help individuals establish skills that have not yet been acquired at an age-appropriate level. Rehabilitative services and devices help individuals reestablish skills that were acquired at the appropriate age but have either been lost or impaired. ASHA has created a resource on this topic, *Speech, Language, and Hearing Services: Essential Coverage of Habilitation and Rehabilitation*, which you may find useful.²

For example, speech-language pathology services for a child with autism spectrum disorder is habilitative; speech-language pathology services for an adult with aphasia following a stroke is rehabilitative. A child born with severe to profound hearing loss who is fit with hearing aids receives audiologic habilitation to develop speech and language skills. An adult with hearing loss and tinnitus who is fit with hearing aids equipped with sound generators receives audiologic rehabilitation to improve listening skills and to cope with tinnitus.

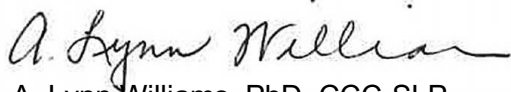
ASHA supports requiring any short-term limited duration insurance (STLDI) plans to include EHBs. Consumers who are healthy when they opt for STLDI plans may become ill or injured (e.g., traumatic brain injury) and need rehabilitative therapy to help regain skills and functioning from their unexpected circumstance. However, if the STLDI plan chosen does not provide

rehabilitation, the consumer will face unexpected out-of-pocket costs for medically necessary health care services that could threaten access to care and recovery.

HB 2739 will benefit many Arizonans by requiring essential health care benefits, which include habilitative and rehabilitative services and devices and preventing the imposition of any preexisting condition exclusion or limitation in any health care plan.

Thank you for your consideration of ASHA's position to support HB 2739. If you or your staff have any questions, please contact Eileen Crowe, ASHA's director, state association relations, at ecrowe@asha.org.

Sincerely,



A. Lynn Williams, PhD, CCC-SLP
2021 ASHA President

¹ American Speech-Language-Hearing Association. (2020). *Arizona* [Quick Facts].
<https://www.asha.org/siteassets/uploadedfiles/Arizona-State-Flyer.pdf>.

² American Speech-Language-Hearing Association. (2019). *Speech, Language, and Hearing Services: Essential Coverage of Habilitation and Rehabilitation*.
<https://www.asha.org/siteassets/uploadedfiles/ASHA/Practice/Health-Care-Reform/essential-coverage-of-habilitation-and-rehabilitation-advocacy-guide.pdf>.