November 4, 2009

The Honorable Nancy Pelosi
Speaker
United States House of Representatives
Washington, D.C. 20515

RE: Disability Community Supports Critical Provisions in H.R. 3962

Dear Speaker Pelosi:

The following members of the Consortium for Citizens with Disabilities (CCD) are writing to express our deep gratitude and strong support for critical elements of H.R. 3962, the Affordable Health Care for America Act of 2009. CCD, a coalition of national consumer, service provider, and professional organizations advocates on behalf of persons with disabilities and chronic conditions and their families.

We believe that the goal of health care reform should be to assure that all Americans, including people with disabilities and chronic conditions, have access to high quality, comprehensive, affordable health care that meets their individual needs and enables them to be healthy, functional, live as independently as possible, and participate in the community. H.R. 3962 goes a long way toward meeting that goal. Many of its provisions mark a sea change in improving access to quality, affordable health care for people with disabilities and chronic conditions.

The provisions in the bill that benefit people with disabilities and chronic conditions are far too many to list in this brief letter, but the following provisions stand out as signature achievements of the legislation for our community:

- Major insurance market reforms such as the elimination of discrimination based on health status, a prohibition on pre-existing condition exclusions, guaranteed issue and renewal requirements, and elimination of annual and lifetime caps;
- Creation of a high-risk pool to provide immediate assistance to those currently uninsured with pre-existing conditions before insurance market reforms are implemented;
• Inclusion of critical services for people with disabilities in the new Health Insurance Exchange’s essential benefits package such as rehabilitation and habilitation services, durable medical equipment, prosthetics, orthotics and related supplies, vision and hearing services, equipment and supplies for children under 21 years of age, behavioral health treatment, and mental health and substance abuse services in compliance with the Wellstone-Domenici parity law;

• Inclusion of the Community Living Assistance Services and Supports (CLASS) Act, a new actuarially sound, premium-based, national long term services insurance program to help adults with severe functional impairments to remain independent, employed, and a part of their communities, without having to impoverish themselves to become eligible for Medicaid;

• Inclusion of a Sense of Congress Regarding Community First Choice Option to Provide Medicaid Coverage of Community-Based Attendant Services and Supports which expresses support for allowing states to offer such services to people otherwise eligible for Medicaid institutional services;

• Significant investments in Medicaid to dramatically expand eligibility, including EPSDT services for millions of children, increased reimbursement for physicians to Medicare rates with significant federal funding to offset the burden on states, a Maintenance of Effort (MOE) provision, and a six month-extension of the American Recovery and Reinvestment Act’s increase to the federal share of Medicaid spending;

• Substantial federal subsidies and out-of-pocket limits to make coverage as affordable as possible;

• Creates new mechanisms and payment methods to better coordinate care for people with disabilities and chronic conditions (e.g., the Continuing Care Hospital (“CCH”) and other concepts), and establishes important patient protections to address some of the legitimate concerns involving “bundling” of payments to providers;

• A two-year extension of the exceptions process to the Medicare therapy caps on physical, occupational, and speech and language therapies;

• Requirements for the development of standards for accessible diagnostic and other medical equipment;

• Inclusion of “disability” as a category for purposes of health disparities;

• Inclusion of “disability” as a subpopulation in the provisions regarding Comparative Effectiveness Research (CER); and

• Provision of wellness grants that prohibit the use of discriminatory incentives.

Thank you for your tremendous leadership in developing the Affordable Health Care for America Act of 2009. We look forward to working with you and your staff to secure final passage of meaningful and comprehensive health reform legislation that meets the needs of all Americans this year, including people with disabilities and chronic conditions.

Sincerely,

ACCSES
Alexander Graham Bell Association for the Deaf and Hard of Hearing
American Academy of Physical Medicine and Rehabilitation
American Association of People with Disabilities
American Association on Health and Disability
American Association on Intellectual and Developmental Disabilities
American Council of the Blind
American Foundation for the Blind
American Medical Rehabilitation Providers Association
American Music Therapy Association
American Network of Community Options and Resources
American Occupational Therapy Association
American Physical Therapy Association
American Speech-Language-Hearing Association
American Therapeutic Recreation Association
Amputee Coalition of America
Association of University Centers on Disabilities
Autism Society
Bazelon Center for Mental Health Law
Brain Injury Association of America
Burton Blatt Institute
Center for Disability Issues and the Health Professions
CHADD - Children and Adults with Attention-Deficit/Hyperactivity Disorder
Community Access National Network
Council for Exceptional Children
Council for Learning Disabilities
Disability Rights Education and Defense Fund
Easter Seals
Epilepsy Foundation
Family Voices
Helen Keller National Center
Learning Disabilities Association of America
Mental Health America
National Alliance on Mental Illness
National Association for the Advancement of Orthotics and Prosthetics
National Association of Councils on Developmental Disabilities
National Association of Social Workers
National Association of State Directors of Special Education
National Association of State Head Injury Administrators
National Coalition on Deaf-Blindness
National Council for Community Behavioral Healthcare
National Council on Independent Living
National Disability Rights Network
National Down Syndrome Congress
National Industries for the Blind
National Multiple Sclerosis Society
National Respite Coalition
National Spinal Cord Injury Association
NISH
Paralyzed Veterans of America
Rehabilitation Engineering and Assistive Technology Society of North America
Teacher Education Division of the Council for Exceptional Children
The Arc of the United States
Tourette Syndrome Association
United Cerebral Palsy
United Spinal Association
World Institute on Disability

cc: The Honorable Steny Hoyer
    The Honorable Henry Waxman
    The Honorable Charles Rangel
    The Honorable George Miller
    The Honorable Frank Pallone
    The Honorable Pete Stark