

The Honorable Kathleen Sebelius  
Secretary, Department of Health and Human Services  
HHS/OS/IOS  
Room 615-F  
200 Independence Avenue SW  
Washington, DC 20201

**RE: Ensuring confidential care to health care dependents and spouses receiving U.S. Preventive Services Task Force (USPSTF) preventive services graded A or B**

Dear Secretary Sebelius:

Public Health Solutions (PHS) seeks greater utilization of the U.S. Preventive Services Task Force (USPSTF) A and B graded preventive health services among those with the least access to care including: adolescents, young adults, and those in precarious social environments. We affirm the importance of addressing the barrier to confidential preventive care for health care dependents and spouses that exists when a policy holder is issued an Explanation of Benefits (EOB). We also affirm the belief of The National Assembly on School-Based Health Care that resolution can come from written guidance or regulations to implement Section 2713 of the Public Health Service Act (as amended by the Patient Protection and Affordable Care Act).

Public Health Solutions is a nonprofit organization that develops, implements, and advocates dynamic solutions to prevent disease and improve community health. We conduct comprehensive research providing insight on public health issues, create and manage community health programs, and provide services to organizations to address public health challenges. Public Health Solutions is also the non-governmental grantee recipient of Federal Title X Family Planning funds and oversees the use of those funds at sites operated by its MIC-Women's Health Services program as well as three external organizations: The Door – A Center for Adolescents, Planned Parenthood of NYC's Hub Center, the Charles B. Wang Community Health Center, and the Callen-Lorde Community Health Center.

The program provides funding for comprehensive prenatal and family planning services to over 25,000 patients annually through this multi-provider network. Services include medical, social work, HIV counseling and testing, STI screening and treatment, and dispensing of birth control methods to low-income uninsured and underinsured individuals. With the assistance of these grant funds, services offered by Title X providers assist ethnically and linguistically diverse populations primarily consisting of uninsured, underinsured, or low income individuals who would otherwise lack access to reproductive health services. In addition, many of our clients face precarious or complex social challenges such as intimate partner or domestic violence. As a Title X grantee, this legislation would potentially affect all of our sub-recipients (and their clients).

Section 2713 of the Affordable Care Act, requires health plans offering group or individual health insurance to provide coverage for clinical preventive services. In addition, the provisions prohibit cost-sharing requirements, such as co-payments or deductibles, for preventive care. The preventive care covered in the law includes clinical services graded A or B by the U.S. Preventive Services Task Force, immunizations recommended by ACIP, services recommended for children and teens in Bright Futures, and additional services to be specified by HRSA. STD screening and counseling, Pap smears, and HPV immunizations are included in these recommendations.

Despite the welcome expansion of coverage under Section 2713 of the Affordable Care Act, utilization of services may be impeded by an inadvertent breach of confidentiality that can occur when a health care dependent or spouse is screened for a sensitive service. When a healthcare provider seeks payment from a health plan, the health plan is required to issue an explanation of benefits (EOB) to the policy holder, often a parent/guardian or spouse, and thus discloses a medical visit and/or a service. We recognize that this is a complex issue that is confounded by numerous federal and state laws and regulations, but it must be addressed to ensure young people take advantage of recommended preventive care and to maintain the safety of those in

abusive domestic situations. If these individuals do not feel safe in and protected by the absolute confidentiality of these services through their insurance provider, they may seek assistance outside their insurance plan or not seek them at all. When insured individuals seek preventive services without insurance coverage, it puts a greater strain on funding streams such as Title X that are needed to protect the uninsured.

Public Health Solutions joins The National Assembly on School-Based Health Care (NASBHC), and the Partnership for Prevention in recommending the following options for addressing the EOB barrier to confidential services for adolescents, young adults, and victims of domestic violence:

- **Eliminate the requirement to issue EOBs for all USPSTF recommended A and B preventive services.** Given that the health reform law requires USPSTF A and B clinical preventive services be offered at no cost to the patient or policy holder, EOBs for the provision of these services are unnecessary.
- **Exclude sensitive preventive services from EOB documents.** Health plans can inform policy holders in their annual policy statement that, in an effort to uphold confidentiality, information about certain sensitive services will not be included in an EOB.
- **Provide a simple procedure for healthcare providers to request that no EOB is issued to policy holders for sensitive services.** Health plans can allow health care providers to request an exemption from the requirement to send an EOB to the policy holder when billing for sensitive services.

While NASBHC recommends **providing an EOB stating general medical services were rendered, but excluding specific details**, we do not support this recommendation given the nature of our health centers and the services we provide. Unlike School Based Health Centers, our centers and grant recipients only provide confidential services to adolescents, not general health care. Therefore, if a general EOB is issued saying that Medical Services were provided, that in itself would be a breach of the patients' confidentiality in our sites.

Adolescents, young adults, and victims of domestic violence need access to confidential health services in order to ensure their health, wellbeing, and safety now and in the future.

Sincerely,



**Kathryn Miller**  
Vice President  
Clinical & Community Health Programs  
Public Health Solutions