August 9, 2010

The Honorable Kathleen Sebelius
Secretary
US Department of Health and Human Services
Hubert H. Humphrey Building
200 Independence Avenue, SW
Washington, DC 20201

RE: File Code OCIO-4150-IFC

Dear Secretary Sebelius:

On behalf of children’s hospitals across the country, the National Association of Children’s Hospitals (N.A.C.H.) appreciates the opportunity to provide comments on the interim final rule entitled, “Group Health Plans and Health Insurance Issuers Relating to Dependent Coverage of Children to Age 26 Under the Patient Protection and Affordable Care Act,” published in the Federal Register on May 13, 2010. We appreciate your broad interpretation of the statute that will allow many young adults to obtain needed health insurance coverage.

Children’s hospitals provide health care to many young adults who age out of health insurance coverage. This regulation will allow many of these individuals to have a more continuous source of coverage. This should assist young adults access the care they need sooner than if they had no coverage at all.

We strongly support the provisions of the rule that would:

- Define a “dependent” only in terms of the relationship between a child and the health plan participant. We strongly support the provision that prohibits plans from conditioning dependent coverage on factors such as student or marital status, residency, financial support or other factors.

- Establish a process to allow those who had previously lost dependent status because of age of change of circumstances (i.e. no longer a student) to enroll in coverage if they have not yet attained the age of
26. Plans and issuers must provide written notice to dependents, or the health plan participant on behalf of the dependent.

- Require the terms of coverage –benefits, premiums and cost-sharing – to be the same for older and younger dependents.

We would like to suggest one change to the regulation. The regulation states that grandfathered health plans are not required to provide coverage for dependents who have their own employer-sponsored insurance or an offer of employer-sponsored insurance. We would like to suggest that the regulation allow a dependent who is subject to a waiting period for their own employer-sponsored insurance to be covered during that time by the parent’s insurance. This will ensure that these individuals will not have a gap in coverage as they are waiting to be enrolled in their own employer-sponsored insurance.

We appreciate the opportunity to comment. We look forward to working with you as you continue to develop new policies and regulation that will ensure all children have health insurance coverage, but also access to needed health care. If you have any questions on our comments, please contact Aimee Ossman, Director, Policy Analysis at 703/797-6023 or aossman@nachri.org.

Sincerely,

Lawrence A. McAndrews
President & CEO