March 15, 2013

Marilyn Tavenner, Acting Administrator
Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS–9958–P
Mail Stop C4–26–05
7500 Security Boulevard
Baltimore, MD 21244–1850

Re: Patient Protection and Affordable Care Act;
Exchange Functions: Eligibility for
Exemptions; Miscellaneous Minimum Essential Coverage
45 CFR Parts 155 and 156 – Comment
File Code CMS-9958-P

Dear Ms. Tavenner:

On behalf of the American College Health Association (“ACHA”), I write in response to the Notice of Proposed Rule Making (CMS-9958-P) in which the Centers for Medicare & Medicaid Services (“CMS”) solicited comments on its proposed rule in which, among other provisions, the Secretary of Health and Human Services (HHS) would designate self-funded student health coverage per se as minimum essential coverage for purposes of section 5000A(f)(1)(E) of the Code. ACHA is a non-profit national health association that represents multidisciplinary college and university health professionals whose principal collective interest is to advance the health of the nation’s 20 million college students. Comprised of more than 2,800 physicians, nurses, and other clinical providers, mental health providers, health promotion professionals, health administrators, pharmacists, and support staff on nearly 900 student health centers, ACHA has long supported the provision of high-quality, comprehensive and affordable health coverage through college and university sponsored student health plans. Specifically, I am writing in response to the Department’s request for comments\(^1\) on this impending per se designation.

The Department’s proposed action to include self-funded student health plans among the types of coverage that will be recognized as minimum essential coverage is entirely consistent with ACHA’s longstanding position regarding this issue. In our April 12, 2011 letter commenting on the then proposed rule regarding Student Health Insurance Coverage under the Public Health Service Act and the Affordable Care Act, we indicated concern that “…an opportunity to include quality coverage provided by self-funded plans has been omitted from these rules. While we acknowledge that the

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\(^1\) Federal Register / Vol. 78, No. 22 / Friday, February 1, 2013 / Proposed Rules, II, B. b. Other Types of Coverage That Qualify as Minimum Essential Coverage (§ 156.602), Page 7361.
HHS has no authority to regulate self-funded student health plans…ACHA encourages the Secretary
to use her authority…to designate other types of coverage as ‘minimum essential health coverage’, to
so designate that self-funded plans having all of the compliance features as set forth in the regulations
would be another form of ‘minimum essential health coverage’…thereby satisfying the individual
mandate.” Therefore, we are both appreciative and supportive of the Secretary’s inclusive action in
this proposed rule.

In the Department’s rationale, HHS indicated that it “is familiar with the scope of coverage under
these plans and they are comparable to other coverage that is designated as minimum essential
coverage under the statute.” We assure you that ACHA will sustain its longstanding promotion of
standards for student health plans -- both insured and self-funded -- that set forth an expectation of
comprehensive and affordable student health coverage. In light of ACA legislation and regulations,
ACHA is currently updating its guidelines document, *Standards for Student Health
Insurance/Benefits Programs*, which will further reinforce the expectation of a broad scope of
coverage for student plans. ACHA’s revised guidelines document will call for:

- Coverage for preventive health services as well as care for illnesses and injuries;
- Prescription drug coverage, including psychotropic medications;
- Coverage for pre-existing conditions;
- Coverage for the dependents of covered students, including children, spouses and domestic
  partners.

The ACHA standards will further call for appropriate continuity of coverage for medically-necessary
leaves-of-absence and upon plan renewals and/or change to a new carrier. The document will also
encourage provision of benefits in self-funded plans that are consistent with ACA requirements that
have been established for student insured plans.

ACHA remains committed to the provision of high-quality, cost-effective health benefits for the
nation’s college students as we feel that access to care is integral to students’ success. ACHA
commends the Department for its inclusive stance regarding self-funded student health insurance
coverage, and thanks you for the opportunity to comment. We would be pleased to provide
additional information that might be helpful, and stand ready to assist as the final regulations are
developed.

On behalf of college health professionals across the country, we thank you for your continuing
attention to college students’ health insurance coverage.

Sincerely,

Jennifer Haubenreiser, MA, FACHA
President
American College Health Association