

Testimony of Gretchen Raffa, MSW
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In support of raised House Bill 5247 *An Act Concerning Explanation of Benefits*
February 27, 2020

Senator Lesser, Representative Scanlon and members of the Insurance and Real Estate Committee, my name is Gretchen Raffa, Director of Public Policy, Advocacy & Strategic Engagement at Planned Parenthood of Southern New England testifying in strong support of raised House Bill 5247, *An Act Concerning Explanations of Benefits*. Planned Parenthood of Southern New England is the largest provider of sexual and reproductive health care in Connecticut, serving over 68,000 patients annually at 16 health centers. Our Stamford and Hartford Health centers are NCQA certified patient-centered medical homes, offering primary care. As a health care provider and advocate, Planned Parenthood's top priority is ensuring that all individuals have access to the health care and information they need, including the full range of sexual and reproductive health services.

This March we will celebrate the 10th anniversary of the Affordable Care Act (ACA), whose passage we fought to assure, and that enabled millions of uninsured individuals to gain health coverage and has set the standard for the services they must be able to access with that coverage. As a result of the ACA, young adults are covered by their parents' health insurance plans until the age of 26, which allowed millions of young people access to health insurance. However, an unintended consequence of this effort may be breaches of health care confidentiality, because of the billing practice of explanation of benefits which provides a detailed statement to the policy holder, such as the parent or guardian, about health services paid for by the insurance plan. A significant number of insured young people are accessing covered care such as reproductive health care, behavioral health care, substance abuse counseling and treatment, mental health or substance use disorders. Our state law already protects minors' access to such health care including the full range of reproductive health such as birth control, sexually transmitted infection testing and treatment, HIV testing and treatment and access to HIV prophylaxis (PrEP) and abortion. ⁱ

The intent of H.B. 5247 is to establish other mechanisms to ensure confidential health care information is not shared with anyone other than the patient if multiple people are enrolled in the insurance plan. Allowing any insured enrollee to request that the explanation of benefit about their care be redirected to another address (including email) or not issued is only one step toward improving privacy. This is particularly important for young people who need to access to reproductive health care. The reality is many adolescents proactively involve their parents or guardians in their sexual and reproductive health decision making. Yet for those who can't, as a family planning provider Planned Parenthood believes that all young people need and deserve access to confidential sexual and reproductive health care.

Adolescents who are concerned about the confidentiality of their contraceptive care are unlikely to obtain it. Furthermore, a 2016 nationally representative study of Title X (federal family planning program) clients found that among those younger than 20 who had health insurance, just over half did not plan to use that coverage for their visit because of confidentiality concerns.ⁱⁱ For the many young people who do not feel they can talk with their parents or guardians—often out of fear that they will face some type of punishment or abuse for being sexually active—confidentiality protections are essential. This reality can be particularly pronounced among marginalized adolescents, such as those who are experiencing homelessness, identify as LGBTQ or are in the foster care system.ⁱⁱⁱ

We need to ensure that people have access to the health care they need and those who have insurance should feel safe and comfortable using it. H.B. 5247 gives young adults the opportunity to access vital healthcare in a confidential manner and is consistent with state law.

Those who might expect strong confidentiality protections for the care they are seeking are not limited to adolescents and young adults. Confidentiality may be a factor when individuals are seeking a wide range of care including those seeking substance abuse or mental health services who may not want their parents or spouses to know that they need such care. Importantly, this may be especially true for people who have experienced violence perpetrated by a parent or partner. Individuals who have experienced such violence may forego needed care for fear that their abuser may be

alerted. Importance of privacy protections for many patients cannot be underestimated, and confidentiality breaches have provided the basis for privacy requirements such as the Health Insurance Portability and Accountability Act of 1996 or HIPAA.

The HIPAA privacy rule allows individuals to request special confidentiality protections for their Protected Health Information (PHI), from both their provider and their health plan. Health plans are required to accommodate such reasonable requests, but only “if the individual clearly states that the disclosure of all or part of the information could endanger the individual.” And, of course, it is not only the threat of impending physical danger or harm that might lead an individual to seek confidentiality for their medical information. In some circumstances the health care we seek is information we simply expect and wish to remain private.

Federal law requires insurers to send notices to a subscriber when claims are denied or the consumer owes a portion of the bill, and virtually all states have incorporated this requirement into state law, along with a range of other communications and practices carriers have adopted related to claims and payment processing, including “explanation of benefits” statements and denials of claims. Confidentiality breaches can be the result of these communications, particularly if these communications are seen by a parent, spouse, other family member or a domestic partner, once they are mailed to the home. Certainly, EOBs have an important function: to inform policy holders of the degree to which they have met their cost-sharing obligations, copayments, deductibles, and coinsurance, and to deter fraud in the claims process.

Several states have adopted confidentiality provisions specific to explanation of benefits particularly those who are covered as dependents on a family member’s plan including Massachusetts, California, and Maryland. Connecticut can be the next state to ensure that patient privacy is protected when seeking health care and using their private insurance. Our state needs to continue passing policy that allows greater access to health care coverage. When people get private insurance coverage, they should be able to use it and feel safe knowing that they can access that care confidentially and which is why Planned Parenthood urges the passage of H.B. 5247. Thank you for your time and consideration.

ⁱ See e.g. Conn. Gen. Stat §§19a-216 (Examination and Treatment of Minor for Venereal Disease), 19a-600-602 (Abortion), 19a-14(c) (Mental Health Treatment – Outpatient), 17a-75-81 (Mental Health Treatment – Inpatient), 19a-592 (HIV & AIDS), 19-592 (PrEP).

ⁱⁱ Kavanaugh ML, Zolna MR and Burke KL, Use of health insurance among clients seeking contraceptive services at Title X–funded facilities in 2016, *Perspectives on Sexual and Reproductive Health*, 2018, 50(3):101–109,

<https://www.guttmacher.org/journals/psrh/2018/06/use-health-insurance-among-clients-seeking-contraceptive-services-title-x>.

ⁱⁱⁱ <https://www.guttmacher.org/gpr/2018/11/ensuring-adolescents-ability-obtain-confidential-family-planning-services-title-x>