



NATA Guidance on Affordable Care Act (ACA): Non-discrimination in health care provision

Summary

While this is good information and may be used to some advantage when seeking reimbursement and credentialing under ACA, there is no mandate either. NATA interprets this provision as neutral to the athletic training profession—it neither helps nor hurts the profession.

Analysis

Non-discrimination in health care: Under ACA section 1201(2)(a) provides that plans that operate in the exchanges can't discriminate against any provider acting within the scope of their license or certification under State law. On the flip side, plans are not required to contract with a health care provider; moreover, the law allows plans to vary reimbursement based on quality and performance measures.

- As we read the statute, it neither helps nor hurts ATs since it does not require that plans contract with ATs.
- The Department of Labor released an FAQ on the subject (available [here](#)) in which they state the language was included in the statute to conform with existing Medicare and other HHS regulations. The key section of the FAQ reads: “to the extent an item or service is a covered benefit under the plan or coverage, and consistent with reasonable medical management techniques specified under the plan with respect to the frequency, method, treatment or setting for an item or service, a plan or issuer shall not discriminate based on a provider's license or certification, to the extent the provider is acting within the scope of the provider's license or certification under applicable state law. This provision does not require plans or issuers to accept all types of providers into a network.”

Source

<http://www.hhs.gov/healthcare/rights/law/title/i-quality-affordable-health-care.pdf>

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7 “SEC. 2706. NON-DISCRIMINATION IN HEALTH CARE.

8 “(a) PROVIDERS

.—A group health plan and a health

9 insurance issuer offering group or individual health insur-

10 ance coverage shall not discriminate with respect to partici-

11 pation under the plan or coverage against any health care

12 provider who is acting within the scope of that provider's

13 license or certification under applicable State law. This sec-

14 tion shall not require that a group health plan or health

15 insurance issuer contract with any health care provider

16 willing to abide by the terms and conditions for participa-

17 tion established by the plan or issuer. Nothing in this sec-

18 tion shall be construed as preventing a group health plan,

19 a health insurance issuer, or the Secretary from establishing

20 varying reimbursement rates based on quality or perform-

21 ance measures.