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# LEGAL PROCESSING DIVISION PUBLICATION & REGULATIONS BRANCH

## PUBLIC SUBMISSION

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Group Health Plans and Health Insurance Coverage Rules Relating to Status as a Grandfathered

Health Plan Under the Patient Protection and Afforable Care Act

**Comment On:** IRS-2010-0010-0001

Group Health Plans and Health Insurance Coverage: Interim Final Rules for Relating to Status as

a Grandfathered Health Plan under the Patient Protection and Affordable Care Act

**Document:** IRS-2010-0010-0195 Comment on FR Doc # 2010-14488

#### **Submitter Information**

Name: Elise G Hewitt

Address:

2031 E. Burnside Street Portland, OR, 97214 **Phone:** 503-224-2100

### **General Comment**

See attached file(s)

#### **Attachments**

IRS-2010-0010-0195.1: Comment on FR Doc # 2010-14488

Office of Consumer Information and Insurance Oversight Department of Health and Human Services Attention: OCIIO-9991-IFC P.O. Box 8016 Baltimore, MD 21244-1850

Re: Interim Final Rule for Group Health Plans and Health Insurance Coverage Relating to Status as a Grandfathered Health Plan Under the Patient Protection and Affordable Care Act

I believe that every effort should be made to increase the number of individuals covered by PPACA, especially as of January 1, 2014 when most of the reform components (Insurance Exchanges, Subsidies, Tax Credits, etc.) come into play.

It is my opinion that the Rule may still result in some confusion to the marketplace in its application. For example, if an employer raised the copayment level beyond the maximum in one area (i.e. outpatient services) but retained the copayment level for primary care doctor visits, does that mean a loss of grandfather status? Clarity will be critical both for the employer and the employee.

Even by the most optimistic estimates, a substantial portion of the employee population will remain outside the PPACA as of January 2014 based on the current rules. While I understand the difficulty involved in making change, creating another large subpopulation of excluded individuals will only add to costs, increase confusion, and mitigate the potential impact of the legislation.

The Rule needs to be clear, reasonable, and with no ambiguities involved in determining whether a group health plan is "in or out." The decisions the federal government makes today will determine the outcomes for tomorrow. We may need to make some difficult decisions to create a sustainable health care system that will support a growing economy in the future. That means getting as many citizens across the country participating at the beginning to make it work and delivering on its promises to retain their support.

Thank you for the opportunity to comment on this regulation.

Elise G. Hewitt, DC, CST, DICCP, FICC Board Certified Pediatric Chiropractor Certified Craniosacral Therapist President, ACA Pediatrics Council