PUBLIC SUBMISSION

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Interim Final Rules for Group Health Plans and Health Insurance Issuers Relating to Internal Claims and Appeals and External Review Processes Under the Patient Protection and Affordable Care Act

Comment On: EBSA-2010-0019-0002

Group Health Plans and Health Insurance Issuers: Internal Claims and Appeals and External Review Processes

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General Comment

I wish to comment on the 10% threshold for translation and oral interpretation of private plan materials in the internal review and appeals contexts. I am a Certified Medical Interpreter working with Hispanic patients in Little Rock. I volunteer at St Vincent Infirmary Medical Center in Little Rock and Westside Free Medical Clinic, sponsored by Catholic Charities under the auspices of the Diocese of Little Rock, and accompany Spanish-speaking patients to medical appointments and procedures. The 10% standard is far too high. A more appropriate standard would be "5% of the plan's population or 500 persons in plan's service area, whichever is less" for large group plans, and 25% of population for small plans. Oral interpretation should be provided in all languages at all times. If clients do not have access to insurance and medical documents in their own language, they have no way of understanding procedures and instructions they need to follow in order to comply with regulations and policies