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Claims Procedure for Plans Providing Disability Benefits

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Claims Procedure for Plans Providing Disability Benefits

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General Comment

Regarding proposed changes - RIN-1210-AB39 - to long-term disability ERISA legislation by the Department of Labor

I am a voting-age resident of California, and over the past few years I have experienced a series of devastating health conditions and complications due to a rare genetic condition. Despite receiving ADA-mandated accommodations from my former employer, my health issues because so serious I am now disabled and unable to work. My disability has been extensively documented and continues to be supported by multiple top specialist physicians at both University of California, San Francisco (UCSF) and Stanford medical centers. As you can imagine, this has been a terrible ordeal for myself and my family.

Worse even than my devastating health issues, however, has been the experience of filing an ERISA long-term disability claim. This process, even with the assistance of a professional consultant (who I had to hire at my own expense), has been complicated, painful, and unfair. My doctors and myself have been harassed for information repeatedly, information which is then conveniently "lost" or "not received", and it has been made clear to me that my credibility and that of my doctors is constantly being doubted, and the deck is stacked against me throughout the process. Thus, I could lose my benefits, my only source of financial support, at

any moment and without warning. Dealing with this ongoing claim is a constant source of stress at a time when I should be able to focus on taking care of my health. In many cases, my medical care and conditions have been compromised and/or worsened by the constant demands and uncertainty of this ERISA long-term disability claim process.

I cannot tell you how desperately these reforms are needed, to protect those of us who find ourselves unexpectedly vulnerable and dependent on a process that is fundamentally stacked against us, because the disability insurance companies have a strong financial incentive to deny any claim they possibly can (regardless of actual health or disability status), and virtually no oversight or recourse for those who feel they are not being treated fairly. Patients like me, struggling with serious health issues that require complex treatment would be much better served by being able to focus our limited energies on that treatment instead of on constantly trying to satisfy the capricious demands of a process where the odds are against us getting fair and good faith treatment. And the stress of constantly worrying we may lose our only means of financial support, suddenly and without warning or cause (a likely outcome based on available information about the current review standards and processes of the disability insurance industry) certainly does not improve anyone's health status. Please implement these much-needed reforms ASAP.