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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-2010-0010-0779 Comment on FR Doc # 2010-14488

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Organization: American Architectural Manufacturers Association

## **General Comment**

See attached file(s)

## **Attachments**

IRS-2010-0010-0779.1: Comment on FR Doc # 2010-14488



August 13, 2010

Office of Consumer Information and Insurance Oversight Department of Health and Human Services Room 445-G Hubert H. Humphrey Building 200 Independence Ave. SW Washington, DC 20201

Re: OCIIO-991-IFC, The Interim Final Rules for Group Health Plans and Health Insurance Coverage Relating to Status as a Grandfathered Health Plan Under the Patient Protection and Affordable Care Act

On behalf of the American Architectural Manufacturers Association (AAMA), we appreciate the opportunity to comment on the Interim Final Rules regarding grandfathered health plans under the Patient Protection and Affordable Care Act. AAMA is a section 501(c)(6) trade association representing window, door, and skylight manufacturers across the United States. As our membership is closely tied to the home construction and renovation industries, they have been among the hardest hit industries resulting from the enduring economic crisis. Throughout this recession, our membership rolls have also declined, resulting in an unprecedented reduction in our staffing level.

We currently employ 17 people and provide health care coverage to only the 15 individuals who work on a full-time basis. As our workforce is considered small, we are not privy to lower-cost plans that are tailored to benefit larger companies. As such, we pay higher premiums for the same or less coverage. In order to continue to provide health care coverage, in 2009 we were forced to make a change to our coverage that significantly increased the deductible each participant must pay.

Although, the current cost of coverage is a huge financial burden, we are dedicated to providing our employees with sufficient, reliable coverage for themselves and their families.

Unfortunately, any proposed benefits of the Exchange will not be realized until its 2014 implementation. In the interim, it will be imperative for our organization to retain the ability to negotiate policies that will benefit our staff and their families while keeping our costs at a rate that will sustain our association through the current economic downturn.

The Interim Final Rule unfairly ties the hands of small to mid-size employers by revoking grandfather status if any necessary policy/premium adjustments are negotiated during the pre-implementation of the Exchange Program.

At this time, we have no way of knowing what the insurance industry response to recent changes will be, or how it will impact our policies for the next 36 months. We do, however, want to assure our staff that we will continue to ensure that they and their families will maintain the benefit of quality health care coverage.

continued

Office of Consumer information and Insurance Oversight Department of Health and Human Services Room 445-G Hubert H. Humphrey Building 200 Independence Ave. SW Washington, DC 20201

Re: OCIIO-991-1FC, The Interim Final Rules for Group Health Plans and Health Insurance Coverage Relating to Status as a Grandfathered Health Plan Under the Patient Protection and Affordable Care Act

As such, we respectfully request a modification to the interim final rule which will allow for grandfathering the health care plans of small to mid-size tax-exempt organizations, regardless of coverage/policy adjustments made during the pre-implementation period of the Exchange program.

Thank you for this opportunity to express our views on this important issue.

Sincerely,

Richard G. Walker President and CEO