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Summary of Benefits and Coverage and the Uniform Glossary

Comment On: EBSA-2011-0023-0002

Summary of Benefits and Coverage and Uniform Glossary: Templates, Instructions, and Related

Materials under Public Health Service Act

Document: EBSA-2011-0023-DRAFT-0007

Comment on FR Doc # 2011-21192

Submitter Information

Name: Jenn Raley Miller

Address:

San Francisco, CA,

General Comment

I am a human resources professional and consultant, and have administered benefits for employees. As an individual, I have signed up for a health insurance plan as an employee, as a spouse (dependent), and most importantly as a self-employed individual seeking self-insurance coverage.

My personal and professional experiences with signing up for health insurance have given me a keen interest in this new regulation.

Please see my comments in the attached Word document.

Attachments

2011-09-JRM_comment_on_EBSA-2011-0023-0002

I am a human resources professional and consultant, and have administered benefits for employees. As an individual, I have signed up for a health insurance plan as an employee, as a spouse (dependent), and most importantly as a self-employed individual seeking self-insurance coverage.

My personal and professional experiences with signing up for health insurance have given me a keen interest in this new regulation.

It is important that consumers have a standard format to use when comparing health insurance costs. I have been in this situation several times. It can be quite confusing, especially since insurance companies do not always provide all information up front when consumers are "shopping" for health insurance.

The new regulation is unlikely to be burdensome to insurers. I expect that a standard format would streamline operations. Insurance companies already supply most of this information to new subscribers. It should not be more difficult or expensive to supply this information in a standard format to potential customers.

The proposal is that the summary will be available to consumers upon request. I suggest that for consumers who are shopping online, "upon request" means immediately upon clicking a "submit" button. The information would be displayed on the ensuing web page. Consumers should not have to fill out a form and wait for the information to be sent to them via mail or email.

Regarding the form:

- It is good and fair to insurers to include a disclaimer that the information provided is not necessarily final. Consumers should be told that costs are subject to change based upon additional details they may provide when they sign up for the insurance.
- The "Important Questions" are great. However, I suggest that they not be phrased as "Yes or No" questions, but rather ask for the exact answer.
 - Example: "Is there an out–of– pocket limit on my expenses?" should be "What, if any, is the out-of-pocket limit on my expenses?"
- The section "Services Your Plan Does NOT Cover" is very important. However, I am concerned about the disclaimer saying, "This isn't a complete list." How will insurance companies know what is okay to exclude? How will consumers know what else might be excluded? The list should be as complete as possible. The disclaimer should explain what types of things might be listed once the list is complete.