

PUBLIC SUBMISSION

Received: January 08, 2018
Status: Pending_Post
Tracking No. 1k2-90t7-elu4
Comments Due: March 06, 2018
Submission Type: Web

Docket: EBSA-2018-0001

Definition of Employer Under Section 3(5) of ERISA-Association Health Plans

Comment On: EBSA-2018-0001-0001

Definition of Employer Under Section 3(5) of ERISA-Association Health Plans

Document: EBSA-2018-0001-DRAFT-0029

Comment on FR Doc # 2017-28103

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General Comment

As a seasoned employee benefits consultant, I am somewhat amazed at your lack of understanding regarding health care pricing. Association plans have existed for years and most have failed to retain their membership. Without an opt out agreement, members are free to come and go as they see fit. Most of this is driven by the competitiveness of the plan. As the large claims hit and they are no more impervious to high claims usage than any other plan whether group or individual, the healthy member groups will opt out for a better deal elsewhere. What is left in the association plan is all the high end user groups which without new membership, creates a death spiral. Prior to the ACA requirements of the essential benefits most association plans contained very specific contract language limiting many various exposures. The ability to sell across State lines does little to reduce costs since the exposure is by zip code so that the policy written in Alabama will need adjustment for Los Angeles. Spend some time on extending the HSA to all policies regardless of high deductibles or Medicare eligible. Establish some transparency legislation so that healthcare costs can be compared / Roger Peck