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Office of Consumer Information and Insurance Oversight
Department of Health and Human Services
Attention: OCIO-9991-IFC
P.O. Box 8016
Baltimore, MD 21244-1850

Re: Interim Final Rule for Group Health Plans and Health Insurance Coverage Relating to Status as a Grandfathered Health Plan Under the Patient Protection and Affordable Care Act

Please find below my opinions and comments regarding the Interim Final Rule for Group Health Plans and Health Insurance Coverage Relating to Status as a Grandfathered Health Plan Under the Patient Protection and Affordable Care Act (PPACA).

Every effort should be made to increase the number of individuals covered by PPACA, especially as of January 1, 2014 when most of the reform components (Insurance Exchanges, Subsidies, Tax Credits, etc.) come into play.

The average consumer has a broad definition of "benefits." Consumers view their health plan beyond the covered benefits, cost sharing, and the contribution levels associated with the plan. The Rule will result in confusion to the marketplace in its application. Clarity is critical both for the employer and the employee.

A substantial portion of the employees will remain outside the PPACA as of January 2014 based on the current rules. Creating a large population of excluded individuals will add to costs, increase confusion, and mitigate the potential impact of the legislation. The Rule needs to be clear, reasonable, and with no ambiguities involved in determining whether a group health plan is "in or out."

We need to make decisions to create a sustainable health care system that will support a growing economy in the future. That means getting as many citizens across the country participating at the beginning to make it work and delivering on its promises to retain their support.

Thank you for the opportunity to comment on this regulation.


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