

PUBLIC SUBMISSION

Received: January 17, 2018
Status: Pending_Post
Tracking No. 1k2-90z8-6jld
Comments Due: March 06, 2018
Submission Type: API

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-0060

Comment on FR Doc # 2017-28103

Submitter Information

Name: Robert

Address:

Email:

Organization: American Counseling Association

General Comment

Competitive resources such as this one should - although not guaranteed- help contain healthcare costs, which are a major problem in this for-profit sector. I would support this with two caveats:

- 1) all consumers of healthcare - so that means everyone- should continue to pay a premium, even if it is one supported or funded via the government. An individual's financial investment into their own health status cannot help but make the consumer far more aware than s/he is now. Healthcare is neither free nor cheap. That may be elsewhere addressed. Meanwhile, no one should be without it and then leave bills for the rest of us to pay in one way or another. Individual accountability goes a long way, even if subsidized for specific reasons. If one can argue that they can't pay the premium, what makes anyone think that they can afford the actual bill instead???
- 2)basic health policies need to include potential for hospitalization, prescription medication, and mental health need to be part of the policy. Dental and vision would be optimum, but probably are not on the table, again, leaving healthcare for "those who can afford it" on a higher level. Carving out any of these is fool-hearty, and

again, results in merely a gamble to be paid anyway by the rest of us who diligently afford to buy insurance through work or personal means.
Thank you for the opportunity for input.