PUBLIC SUBMISSION

Docket: IRS-2008-0103
Request for Information Regarding Sections 101 Through 104 of the Genetic Information Nondiscrimination Act of 2008

Comment On: IRS-2008-0103-0017
Interim Final Rules Prohibiting Discrimination Based on Genetic Information in Health Insurance Coverage and Group Health Plans

Document: IRS-2008-0103-0051
Comment on FR Doc # E9-22504

Submitter Information

General Comment

Interim Final Rules Prohibiting Discrimination Based on Genetic Information in Health Insurance Coverage and Group Health Plans (Document ID IRS-2008-0103-0017) - Comments

Attachments

IRS-2008-0103-0051.1: Comment on FR Doc # E9-22504
From the Desk of
Mark W. Crosby
20 West Lakeview Drive
Canton, GA 30114

Timothy Geithner, Secretary
U.S. Department of Treasury
1500 Pennsylvania Avenue NW
Washington, DC 20220

Kathleen Sebelius, Secretary
U.S. Department of Health and Human Services
200 Independence Avenue SW
Room 639G
Washington, DC 20201

Hilda Solis, Secretary
U.S. Department of Labor
200 Constitution Avenue NW
Washington, DC 20210

Stuart J. Ishimaru, Acting Chairman
U.S. Equal Employment Opportunity Commission
131 M Street, NE
Washington, DC 20507

To Whom It May Concern:

As the parent and sole provider for a child with juvenile diabetes, I write you today to discuss my concerns with the interim final ruling on the Genetic Information Nondiscrimination Act (GINA). I understand the intent of GINA is to prevent the improper use of genetic information in hiring practices as well as in the provision and pricing of health insurance. While these are serious concerns, and should not be taken lightly, the interim final ruling on GINA poses many risks.

First, family medical history is a key component of health risk assessments which are commonly offered by employers to identify employees or dependents that might benefit from wellness and disease management programs. Without including such information in the assessments, it is difficult to diagnose potential health risks, such as diabetes and other chronic diseases. Moreover, individuals who could benefit from wellness and disease management services fall through the cracks, the prevalence of chronic conditions rises and employers experience increased health care costs and productivity losses.

Elements of the Oct. 7, 2009, GINA interim final rule will create significant barriers to the use of health risk assessments and access to wellness and chronic disease management programs. I would like to ask that you do not deny employers the right to offer incentives. I urge you to encourage the departments of Health and Human Services, Labor and the Treasury to delay implementation and enforcement of the interim final rule and evaluate, through an interagency panel, the rule’s potential impact on workplace health promotion programs.

Sincerely,

Mark Crosby

cc: Robert Kocher, MD, Special Assistant to the President, National Economic Council, The White House
    Ezekiel Emanuel, MD, Special Advisor for Health Policy, Office of the Director, Office of Management and Budget