PUBLIC SUBMISSION

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Interim Final Rules for Group Health Plans and Health Insurance Issuers Relating to Internal Claims and Appeals and External Review Processes Under the Patient Protection and Affordable Care Act

Comment On: EBSA-2010-0019-0002
Group Health Plans and Health Insurance Issuers: Internal Claims and Appeals and External Review Processes

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General Comment

On behalf of Advocates for Basic Legal Equality, I wish to comment on the 10% threshold for translation and oral interpretation of private plan materials in the internal review and appeals contexts. I am a managing attorney and supervise the staff that provides translation/interpretation to our LEP client. Due to the changing demographics in the country the LEP population is increasing while at the same time its also more geographically diverse. Thus a 10% threshold/standard is far too high. A more appropriate standard would be "5% of the plan's population or 500 persons in plan's service area" for large group plans, and 25% of population for small plans. Oral interpretation should be provided in all languages at all times. Health care access and communication with their doctors, clinics and hospitals is a critical necessity which if not done because of language restrictions can result in a life threatening event.