

PUBLIC SUBMISSION

As of: July 25, 2011
Received: July 24, 2011
Status: Pending_Post
Tracking No. 80eca055
Comments Due: July 25, 2011
Submission Type: Web

Docket: EBSA-2010-0019

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

Document: EBSA-2010-0019-DRAFT-0092

Comment on FR Doc # 2011-15890

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General Comment

On behalf of myself, 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 an aspiring medical student with volunteer experience at hospitals in Los Angeles and Pomona, California, where I served patients of color, many of whom are limited English proficient. As a volunteer, I was once asked to interpret for an elderly limited English proficient Vietnamese couple during intake and the woman's mammogram. Because Vietnamese is my second language, I was at a complete loss as to how to interpret something so fundamental as the patient's rights, and yet no printed materials were available in Vietnamese either. The 10% 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. Professional oral interpretation should also be provided in all languages at all times.