

# 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

The National Asian Pacific Center on Aging (NAPCA) thanks the Centers for Medicare and Medicaid Services (CMS), the Internal Revenue Service (IRS), and the Department of Labor (DOL) for the opportunity to comment on the 10% threshold for translation and oral interpretation of private plan materials in the internal review and appeals contexts.

NAPCA is a national non-profit organization devoted to educate and empower the Asian American and Pacific Islander (AAPI) elders. Since 1979, NAPCA has served tens of thousands AAPI seniors through community based and other employment programs, healthy aging efforts and initiatives to decrease health disparities in the AAPI population.

The proposed amendments place a 10% threshold for translation and oral interpretation of private plan materials in the internal review and appeals process for group health plans and insurance coverage; a standard which is too high. We recommend a standard of 5% of the plan's population or 500 persons in a plan's service area for large group plans.

AAPI seniors face linguistic and cultural barriers to care, and suffer from a number of critical health disparities, including a disproportionately high prevalence of hepatitis B, tuberculosis, and dementia; over half of the 1.25 million Americans with chronic hepatitis B infection are AAPIs. AAPI seniors are uninsured at more than double the rate of non-Hispanic white elders , and specific subgroups lack insurance at rates as high as 33%. Moreover, AAPIs 65 years and older are covered by Medicare at a significantly lower rate than non-Hispanic whites.

Lowering the standard to 5% provides an opportunity to ensure that low income AAPI elders' cultural and linguistic needs are met as each seeks adequate care.

NAPCA appreciates the opportunity to comment on the proposed amendment. NAPCA believes that lowering the standard will continue to help address the health needs of low-income AAPI elders.