

PUBLIC SUBMISSION

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Uniform Disclosure to Consumers: Benefit Design, Cost Sharing, & Standards for Definitions

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Summary of Benefits and Coverage and Uniform Glossary

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Submitter Information

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General Comment

I am an employee benefits agent and consultant with my own agency for the past 17 years.

This summary of Benefits and Coverage is so overly simplistic and elementary when it comes to describing coverages and benefits that I wonder if the person(s) who created it has ever worked with employers and employees.

All carriers, TPA, etc. already provide a SPD or Summary of Benefits that summarizes in great detail the questions you are trying to answer.

When I have clients with 2/3/4 different plans, each with different plan designs, this type of comparison sheet will, simply stated - confuse rather than clearly answer questions.

My customers - employers - create clear summaries for all plan participants and this extra paperwork, poorly designed - will not help anyone. It will only confuse.

For example - your examples of how much someone will pay out of pocket for a procedure. Well, are they in or out of network? HSA or deductible plan design? Are they above or below their deductible?

Also, these forms ignore whether plans are fully insured, HRA reimbursed, HSA reimbursed, etc.

I fail to see why you think that one size will fit all plans in this country except by lowering to an overly simplistic summary that won't answer specific plan questions.

Thank you.