Dear Ms. Matthews,

I am writing to express concern with two model insurance regulations circulated for public comment on September 30, 2014 regarding the regulations relate to the individual market and small group coverage. I am extremely concerned with Section 14(B) of the individual market model, and Section 15(B) of the small group model.

Both would exclude “benefits provided out-of-network” from the annual limit. This is inconsistent with statutory language provided in PPACA Section 1302(c), and may make out-of-pocket protection more or less illusory in light of well-documented concerns with narrow networks. Moreover, the NAIC’s language is broad enough that it could - in theory - be interpreted by plans to exclude benefits covered through an appeal or exception process. This would be a step backward from current practice.

The rare disease community is particularly sensitive to excluding out-of-network benefits from the annual limit. Typically and unfortunately, a large number of providers seen by patients with rare or undiagnosed diseases are out-of-network. As a result, patients with rare diseases are unfairly penalized by this policy interpretation. I am deeply concerned the current NAIC drafts would erode one of the ACA’s most important consumer protections — the annual limit on out-of-pocket spending. I am requesting the drafts remain under discussion in light of my concerns -- and those of the rare disease community -- based on the importance of annual limits on out-of-pocket spending.

Sincerely,

Colleen Cascio

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