Pitney Bowes

David Nassef
Vice President, Government & Regulatory Affairs

World Headquarters
MSC 0063-16
One Elmcroft Road
Stamford, CT 06926-0700

203-922-7487

dave.nassef@pb.com
www.pitneybowes.com

December 16, 2009

Timothy Geithner
Secretary
U.S. Department of Treasury
1500 Pennsylvania Avenue NW
Washington, DC 20220

Kathleen Sebelius
Secretary
U.S. Department of Health and Human Services
200 Independence Avenue SW, Room 639G
Washington, DC 20201

Hilda Solis
Secretary
U.S. Department of Labor
200 Constitution Avenue NW
Washington, DC 20210

Stuart J. Ishimaru
Acting Chairman
U.S. Equal Employment Opportunity Commission
131 M Street, NE
Washington, DC 20507

RE: Genetic Information Nondiscrimination Act (GINA)

Dear Secretaries Geithner, Sebelius, Solis and Acting Chairman Ishimaru:

On behalf of Pitney Bowes, I write to express our serious concerns about the adverse impact of the interim final rules on employer-sponsored wellness and disease management programs and to request that you rescind the regulations.

Pitney Bowes is the world's leading provider of integrated mail and document management systems, services and solutions. We have been recognized by President Obama and numerous members of Congress for our focus on creating a culture of health that drive long term cost savings. We do so by ensuring that employees and their dependents have access to high quality, evidenced based health care delivery; a value based health plan design that removes financial and other barriers for compliance, and programs that supports individual accountability by providing education, programs and processes. We currently provide medical coverage to approximately 40,000 US employees, retirees and their dependents.

Group health plans use voluntary health assessments to identify people with these types of health risks and offer programs and benefits that will reduce those risks. Health assessments provide opportunities for referral to preventive care, disease management programs, health promotion and other behavioral change initiatives. All of these programs are critical in slowing the rising cost of health care by making certain that care is matched to what will work best for each and every patient and in motivating people to proactively maintain and improve their health.

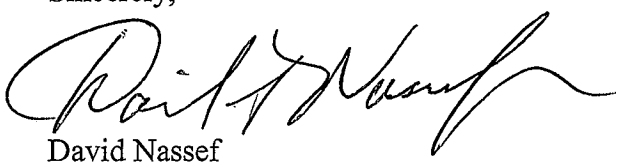
Health assessments that include questions about family medical history are vital for identifying plan participants who may particularly benefit from wellness initiatives and disease management programs. Without family

medical history, plans will lose information about a key risk factor, often the only one present, that identifies plan participants at higher risk for cardiovascular disease, some cancers, diabetes or other major chronic conditions who could benefit from intervention to stave off debilitating disease, death, and the only complete a voluntary assessment if incented to do so, despite the benefit they receive from participation.

We fully support the goal of GINA to avoid discrimination on the bases of genetic information. However, implementing the rules, as they are now promulgated, will severely limit the ability of employer-sponsored group health plans like ours to identify those who can most benefit from these valuable voluntary programs that promote wellness, help maintain health and manage chronic disease. The rules will have serious unintended consequences impairing the ability of employer-sponsored group health plans to improve quality, care coordination, medical outcomes and lower costs.

Thank you, again, for your consideration of these important issues.

Sincerely,



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