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**Docket:** IRS-2010-0015
Requirements for Group Health Plans and Health Insurance Issuers under the Patient Protection and Affordable Care Act

**Comment On:** IRS-2010-0015-0002
Patient Protection and Affordable Care Act: Preexisting Condition Exclusions, Lifetime and Annual Limits, Rescissions, and PatientProtections

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## Submitter Information

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## General Comment

Do the PPACA sections apply to so-called limited benefit plans or "mini-Med" plans? The regulations regarding Section 2711 speak to application of the lifetime and annual limit changes.

Of specific concern is the application of Sections 2704, 2711, and 2713. Such plans provide health coverage at a minimal cost. Application of any of the provisions, but especially those above, would make the benefit design unviable.

On Section 2713, if the benefit design does not cover certain preventive services, would the Section mandate inclusion of such services at zero cost-sharing?