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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

Document: IRS-2010-0015-0021
Comment on FR Doc # 2010-15278

Submitter Information

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Organization: Ruby Tuesday, Inc

General Comment

See attached file(s)

Attachments

IRS-2010-0015-0021.1: Comment on FR Doc # 2010-15278

RubyTuesday

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August 27, 2010

Office of Consumer Information and Insurance Oversight
Department of Health and Human Services
Room 445-G, Hubert H. Humphrey Building
200 Independence Avenue, SW
Washington, DC 20201

Dear Sir/Madam,

I am writing on behalf of Ruby Tuesday, Inc., a company with approximately 900 restaurants across America in 47 states employing over 46,000 people.

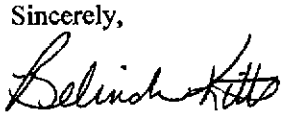
As is common in our industry, our employee population consists of a large number of part-time employees that rely on tips for a large portion of their income. Additionally, the turnover rate for this group of employees generally runs 100% or more. Ruby Tuesday currently utilizes limited benefit plans for this group of employees so they have some form of access to medical care.

Based on proposed changes, as of January 1, 2011, these workers would lose their current coverage and not be able to take advantage of federal subsidies found in the Exchanges or have guaranteed issuance of coverage in the individual market until 2014. We have approximately 10,000 employees and their dependents enrolled in these types of plans. Therefore, we feel it is important to be able to continue offering limited plans for this group of employees until other options are available to them.

Obviously, we would be interested in taking advantage of the waiver program via the Health and Human Services Department. However, we are running out of time for this to be a feasible alternative. Typically, the annual open enrollment for the upcoming year is conducted in October and November with changes taking effect in January 2011. Communication packages for the open enrollment are drafted and printed in September and October. Open enrollment is when we would provide communication to employees regarding upcoming benefit changes for the next year. As the waiver does not seem to be guaranteed and the process is unspecified, we as a company are concerned. We would need the waiver response by HHS to be immediate so we can notify employees of their options for Jan 1, 2011, OR advise them to make alternative plans for individual policies outside of employment.

Thank you for giving us the opportunity to share our concerns on the Regulations.

Sincerely,



Belinda Kitts
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Ruby Tuesday, Inc.
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