

HealthInquiry - Attn; Christopher Koller

From: "Linda Anderson" <land555@verizon.net>
To: <healthinquiry@ohic.ri.gov>
Date: 12/11/2012 9:54 AM
Subject: Attn; Christopher Koller

Dear Mr. Koller,

I am writing to you after seeing an article in the 12/8/12 Projo regarding a second fee increase for Blue cross Blue Shield. I would urge you to reject this request. The article in the third from last paragraph is very telling of why you should oppose this. "...forcing the company to dip into reserves-which Hudson (CEO) said REMAIN STRONG" Wow, plenty of past profits to keep reserves strong!!!!!!!!!!!!
Deserving of an increase I think NOT!

I would like to bring to your attention my situation, and many others as well. I pay \$714.00 in monthly premiums, and would say the benefits BCBS paid on my behalf this past year amounted to the price of 2 to 3 of my premium payments. Therefore, the rest of my year's payments were pure profit. In all the years past, one months premium would have covered their costs for me. All the healthy people are penalized enough. Also, as I reach age milestones, 50,55,60,65 I get automatic increases having nothing to do with my good health. I think that practice should be abolished or rebate the increases to the insured at year end if they did not decline in health afterall.

I would appreciate your comments on these matters.

Sincerely,
Linda H. A.

HealthInquiry - BCBS Request for increase should be no more than the COLA

From: David Robinson <davidr46@gmail.com>
To: <healthinquiry@ohic.ri.gov>
Date: 12/20/2012 4:55 PM
Subject: BCBS Request for increase should be no more than the COLA

BCBS should not be allowed to increase premium costs greater than the COLA estimate of the Bureau of Labor Statistics, in the Department of Labor or 1.7%

Thank you,

David

--

David S. Robinson, Ed.D.
President, DSRobinson & Associates
903 Providence Place #155
Providence, RI 02903
(Mobile) 617-733-5979
(Web) www.evaluationhelp.com
(Blog) <http://evaluationhelp.blogspot.com/>

HealthInquiry - Blue Cross Request for Supplementary Rate Relief 2013

From: "Cathleen Alexander" <CAlexander@teamcornerstone.com>
To: "healthinquiry@ohic.ri.gov" <healthinquiry@ohic.ri.gov>
Date: 1/3/2013 4:04 PM
Subject: Blue Cross Request for Supplementary Rate Relief 2013

As a Rhode Island small business employee benefits advisor I understand clearly business owners' angst over the high cost of health care. Here in Rhode Island we demand the very highest level of health care and it does not come cheap. For example, chances are if you or your family member is diagnosed with cancer, you are going up to Dana Farber where the cost of care is more expensive. Even though you might live in Newport and are pregnant, you probably will deliver at Women & Infants, instead of your local Newport Hospital. Fertility treatments are a very expensive mandated benefit here in Rhode Island. Pre-existing conditions have been removed from ratings for employer sponsored health plans. 2013 is our Healthcare Reform transition year to the introduction of the Exchange as well as new, complicated regulations. There is a lot at play here and it is going to be interesting to see how our health care costs actually become more affordable. Blue Cross should have done a better job on getting a handle on their 2013 rates. Rhode Islanders need Blue Cross to be out ahead, leading the charge as our health care thought leaders in these turbulent times.



Cathleen Alexander | Senior Benefits Consultant
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From: Douglas Stone <stone_douglas@msn.com>
To: "healthinquiry@ohic.ri.gov" <healthinquiry@ohic.ri.gov>
Date: 1/7/2013 11:47 AM
Subject: Health insurance premiums

The health insurance premiums are extremely high in RI for self employed individuals.
And now with the advent of a new health insurance national program blue cross has started to raise their rates to hedge against the impact.
What is the commissions course of action to protect the self employed.
Douglas Stone

Sent from my iPad

From: "Peter M. Oppenheimer, Ph.D." <pmopp@fopsych.com>
To: <healthinquiry@ohic.ri.gov>
CC: Christopher Koller <ckoller@ohic.ri.gov>, <hoison@ohic.ri.gov>
Date: 1/7/2013 10:39 AM
Subject: Letter for Blue Cross Rate Hearing on January 9, 2012
Attachments: Rate Increase Request BCBSRI.OHIC(KollerC)@OppenheimerPM.for
130109.130107.pdf

Dear Commissioner Koller and staff at OHIC:

Attached please find a letter reflecting my comment on Blue Cross Blue Shield of Rhode Island's rate request for your hearing on January 9.

I am not sure if I will be able to attend due my schedule. Please include my letter in your record. You are welcome to contact me at any time to discuss these concerns.

Thank you for seeking public comment and addressing this matter with diligence.

Peter M. Oppenheimer, Ph.D.
Clinical Psychologist

--

Peter M. Oppenheimer, Ph.D.
Feil & Oppenheimer Psychological Services
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FAX: 401-245-1240
pmopp@fopsych.com

Member, Committee for the Advancement of Professional Practice
American Psychological Association

President-Elect
Chair, Legislative Committee
Rhode Island Psychological Association

Member, Advocacy Committee
Division 42 – Independent Practice

Co-Chair
Coalition of Mental Health Professionals of Rhode Island

Chair, Board of Psychology
Rhode Island Department of Health

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January 7, 2013

Christopher Koller
Health Insurance Commissioner
Office of the Health Insurance Commissioner
1511 Pontiac Ave Bldg 69-1
Cranston, RI 02920

RE: December 2012 Blue Cross Blue Shield of Rhode Island
Health Insurance Premium Rate Submission

Dear Commissioner Koller:

I am writing to express my concerns regarding Blue Cross Blue Shield of Rhode Island's current request for a rate increase for small and large employers. The review procedure requires that you assess four major issues to determine whether or not this rate request is appropriate according to RIGL 42-14.5 and OFFICE OF THE HEALTH INSURANCE COMMISSIONER REGULATION 2. I would like to comments on those issues:

Regulation 2 Section 6 - Protecting the interests of consumers

I have engaged in the practice of psychology in Rhode Island for 20 years, the last 18 in Barrington. I have been a contracted provider with Blue Cross for most of this time. We are aware that many of our patients who are covered by Blue Cross have experienced significant increases in deductibles and co-pays. Our patients who have medical issues or family members with medical issues, increasingly report that their plans do not cover significant portions of their medical expenses. Our patients tell us their deductibles and co-pays have increased to an extent that they serve as a significant barrier to our patients being able to participate in their treatment as they need it. Numerous patients or parents of patients have commented that they cannot afford to start or continue treatment due to these fees. We also regularly hear from our patients that they have difficulty accessing psychiatric services or intermediate levels of care on their Blue Cross plans.

Thus the insurance plans Blue Cross is selling are creating significant barriers to people being able to actually access services or derive benefit from the insurance plan that has been purchased on their behalf by their employer.

Regulation 2 Section 7 Encouraging Fair Treatment of Health Care Providers



Blue Cross is not treating behavioral health care providers fairly. Foremost, in October, 2012 I wrote to your office to complain that Blue Cross appears to be in violation of the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act (MHPAEA), the federal law mandating mental health parity for mental health and substance abuse services. Your office's legal council, Mr. Herbert Olson, responded to suggest that your office is investigating this matter. I would suggest that it is inappropriate for your office to consider Blue Cross' application on its merits while your office is investigating whether or not the company is violating federal law.

Our complaint alleges that Blue Cross fails to comply with **29 CFR 2590.712 (4) - Parity in mental health and substance use disorder benefits** by reimbursing behavioral health services at a different and usually lower premium of the Resource Based Relative Value Scale rates than they reimburse medical specialty services. The difference is in itself discriminatory.

Further, it is now difficult to meet the requirements of existing state and federal laws, to prepare for the implementation of the Affordable Care Act, and meet Blue Cross' contractual requirements without significant investments in infrastructure and allocations of professional and staff time. Blue Cross' reimbursement rates are becoming insufficient for my practice to address these requirements. Blue Cross significantly reduced their reimbursement rates for our primary services in the second half of 2012. As I write this letter the morning of January 7, I cannot tell you what our situation will be for 2013 as Blue Cross has yet to issue their rates for this year.

Blue Cross frequently ignores or excludes behavioral health professionals from collaborative efforts to improve outcomes and contain costs. Blue Cross' unilaterally imposed policies that impair access and the quality of services we can provide. In direct communications with Blue Cross, the Rhode Island Psychological Association and the Coalition of Mental Health Professionals of Rhode Island have been pressing Blue Cross to engage with our professional community in a truly collaborative manner. We appear to be making some initial progressive steps, but we are very aware that we are not afforded the access and attentiveness to our concerns as are some medical specialties.

Section 8 Improving the Efficiency and Quality of Health Care Delivery and Increasing Access to Health Care Services

In the past few years Blue Cross unilaterally initiated two efforts to improve efficiency and quality of care delivery for behavioral health services. The first program attempted to co-locate behavioral health professionals in primary care offices. The program was implemented along Blue Cross' terms with little community input. It did not succeed.



Last spring Blue Cross sought to unilaterally impose a "quality improvement" program on their providers. The potential plan as presented to us had severe problems. Blue Cross did respond to our concerns about their plans and they created a committee with community professionals to discuss how such a program could be accomplished appropriately.

However, there are ongoing efforts in the professional community that seek to improve efficiency and quality of care. It has been difficult to get Blue Cross to acknowledge them and even harder to get Blue Cross to engage in meaningful discussions about them.

Regulation 2 Section 9 Affordable Health Insurance

Is Blue Cross utilizing their resources in the interest of the Public? The Wakely Group's Insurance Rate Review for 2012 indicates that Blue Cross does not meet the standard required by the Affordable Care Act for their Medical Loss Ratio, and they have higher administrative expenses than other Blue Cross and Commercial insurers in the region. Blue Cross is engaging in policies that favor some contracted service providers over others. As Rhode Island's state chartered non-profit hospital service and medical service corporation Blue Cross should be held to a high standard of community engagement and service. They are not meeting that obligation as well as they could.

In summary, while I respect Blue Cross' concern for their own financial state, I do not view that the company is acting in a manner that adequately protects the interests of consumers and respects the interests of the health care professionals who actually provide the medical services that Rhode Islanders require. Again, I feel it is inappropriate to entertain this rate review when your office is investigating whether or not the company is in violation of federal law. When that matter is resolved, I would ask that your response direct Blue Cross to ensure that the company is providing insurance coverage that truly enables Rhode Islanders to access quality care in an affordable manner. Specifically, I would ask that you direct the company to utilize their financial resources to provide affordable and meaningful coverage to consumers, and to support service providers in their effort to meet the evolving health care needs of Rhode Islanders especially in light of the changes mandated by the Affordable Care Act and the Mental Health Parity and Addiction Equity Act.

Sincerely,

Peter M. Oppenheimer Ph.D.

Peter M. Oppenheimer, Ph.D.

Clinical Psychologist

From: Kate Kennedy <kate.kennedy26@gmail.com>
To: Christopher Kolier <ckolier@ohio.ri.gov>
CC: "Donald R. Nokes" <drnokes@netcenergy.com>, Herbert Gray <hjgray@cox.net>...
Date: 1/9/2013 10:39 AM
Subject: RIBGH Commentary on BCBSRI Rate Refiling
Attachments: RIBGH Commentary on BCBS Rate Refiling 010913.pdf

Chris,

Please see attached letter laying out our position on the BCBSRI rate refiling. Herb Gray will be attending today's hearing.

Regards,
Kate

--

Kate H. Kennedy
Interim Executive Director
Rhode Island Business Group on Health
C: 401-369-5828
kate.kennedy26@gmail.com



RHODE ISLAND BUSINESS GROUP ON HEALTH

January 9, 2013

Mr. Christopher Koller
Office of the Health Insurance Commissioner
1511 Pontiac Avenue #69
Cranston, RI 02920

Dear Commissioner Koller,

This letter is in response to your request for public commentary on Blue Cross Blue Shield of Rhode Island's December 7th filing with your office to request changes to the company's rate components previously approved by your office for rates effective in 2013.

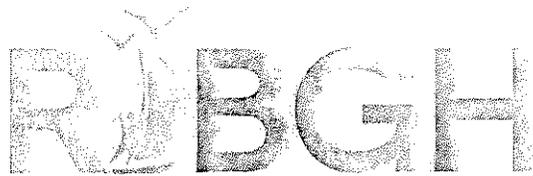
As the voice of RI business on health care, the Rhode Island Business Group on Health advocates on behalf of its 75 employer members to control health care costs while improving quality, transparency and consumer engagement. We actively participate as members of your office's Health Insurance Advisory Council and the State's Health Care Planning & Accountability Advisory Council. In addition, we convene a group of our members for regular business advisory meetings with the executives from Blue Cross Blue Shield of Rhode Island and United Healthcare of New England, respectively, to discuss issues of mutual interest.

Through this active involvement, we have come to understand that what is needed to bring about meaningful change to reduce cost and improve value is an evolved health care system -- an integrated model that shifts from rewarding for volume to rewarding for quality outcomes, leverages technology, keeps healthy people well, and shares risk among all parties.

In our most recent meeting with Blue Cross Blue Shield of Rhode Island (BCBSRI) to discuss this rate refiling, we listened to the steps they have taken to control their costs. They have worked diligently to reduce their administrative costs, and we are confident that they will continue to do so, including exploring all opportunities to leverage efficiencies across the Blue Cross system. They have also made a strong move in managing pharmacy costs by changing pharmacy benefit providers to Catamaran. Despite these efforts, Blue Cross still needs to request higher rate factors to cover increased hospital and physician expenses.

We appreciate that BCBSRI is looking to mitigate future unpredictable spikes in renewal increases, particularly given the influx of taxes related to PPACA that will begin being levied in 2014. We have confidence that BCBSRI's actual rate increases will come in at the level approved, as monitored by your office. The stark reality is that if BCBSRI continues to lose money and erode its reserves, they run the risk of losing their license and trademark. We leave it to the Commissioner to judge whether the request for increased rates is reasonable, and have confidence that your decision will reflect your office's dual charge of controlling health care costs while ensuring the health and viability of the system.

P. O. Box 41108 • Providence, Rhode Island 02940-1108
T: (800) 606-1384 • www.ribgh.org • info@ribgh.org

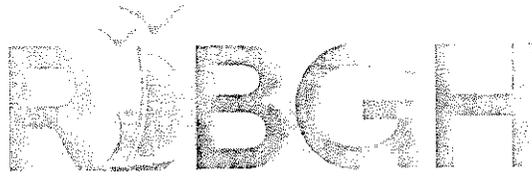


RHODE ISLAND BUSINESS GROUP ON HEALTH

RIBGH would not object to OHIC granting BCBSRI an increase as long as immediate action is taken to address the continued pressures that cause BCBSRI to make this request in the first place. Specifically, we believe the current year's request should only be approved if increased regulatory scrutiny is applied. Our position is that BCBSRI, along with other insurers as well as providers, be required to release financial reimbursement terms of all future contracts in order to reach our goal for increased transparency. We have separately sent a letter to BCBSRI requesting that the company will not enter into any future provider agreements that include any limitation on the public disclosure of provider reimbursement rates as a matter of company policy.

We all have to continue the fight for the elements that will bring about real system reform:

- better **transparency** in contracted rates and quality measures, so consumers can make better decisions on selecting providers,
- demanding **value-based contracting** that will provide incentives for health care providers for delivering value versus performing a high volume of procedures,
- employers adopting innovative **value-based plan designs** that incent their members to the right behaviors,
- comprehensive **statewide health care planning** that will identify opportunities to reduce overcapacity in the system,
- limiting the number of **state-based mandates** that add undue cost to providing health care coverage in Rhode Island,
- promoting the adoption of **patient-centered medical homes (PCMHs)**, which have shown to improve outcomes and patient satisfaction while reducing cost,
- building out and recruiting participants into **CurrentCare**, the state's HIE, to enable a coordinated, patient-centered care model while eliminating duplicate procedures,
- promoting investments in **wellness programs and education**, which have been proven to have a positive ROI on health costs and outcomes.



RHODE ISLAND BUSINESS GROUP ON HEALTH

While we are disappointed with the current set of events, we understand the main business driver for this rate refiling is the unanticipated spike in inpatient and outpatient utilization. We see the present circumstances as a renewed call to action that all stakeholders -- insurers, providers, regulators, employers and employees -- continue to take on the ills of our health care system on several fronts in order to bring about meaningful, sustainable change. Thank you for your consideration of our remarks.

Regards,

A handwritten signature in black ink, appearing to read 'Donald R. Nokes'. The signature is fluid and cursive, with a long horizontal stroke at the end.

Donald R. Nokes
Board President

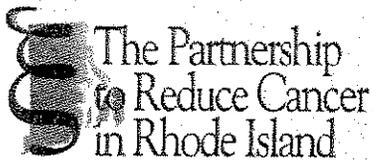
cc: Peter Andruszkiewicz, CEO, Blue Cross Blue Shield of Rhode Island

From: <Susan.Roberts@Cancer.Org>
To: <ckoller@ohic.ri.gov>
Date: 1/9/2013 4:19 PM
Subject: Public comment re: Proposed BC rate hike
Attachments: S45C-313010916390.pdf

Hi Chris,
Below you will find public comment from the Rhode Island Partnership to Reduce Cancer regarding the proposed rate increase by the Blues.
Please let me know if you have any questions.
Thanks!!
Susan

Susan Roberts |
State Government Relations and Advocacy Director, Rhode Island
Government Relations | American Cancer Society Cancer Action Network, Inc.
931 Jefferson Blvd., Suite 3004
Warwick, Rhode Island 02886-2233
Phone: 401.243.2600 ext. 2620 | Fax: 401.421.0535 | command not present
acscan.org

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The Partnership
to Reduce Cancer
in Rhode Island

3 Capitol Hill, Room 408
Providence, RI 02908
Tel. 401.222.7899 Fax. 401.222.1256

Date: January 9, 2013

From: Linda Dziobek, RN, Chair
Partnership to Reduce Cancer in Rhode Island

Re: Proposed RI Health Insurance Rate Hike Public Comment

To: Christopher Koller Health, Insurance Commissioner
Office of the Health Insurance Commissioner
State of Rhode Island
1511 Pontiac Ave
Bldg. 69, Floor 1
Cranston, RI 02920

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Manager, Comprehensive Cancer
Control Program
Nicholas Oliver, MPA, CAE
Manager
Priyanca Joshi
Program Evaluator

Dear Commissioner Koller: *Chris*

Thank you for this opportunity to provide a brief public comment regarding the proposed health insurance rate hike here in Rhode Island. The Partnership to Reduce Cancer in Rhode Island believe, that if you or a loved one has lived with cancer – you probably know more about the American health insurance system than you ever wanted. Affordability of good health insurance coverage is critical for Ocean State citizens.

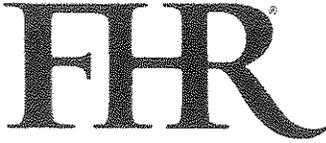
During your consideration of the proposed rate hike please keep in mind the difficulty Rhode Island families currently face with double digit unemployment, a very high cost of living and the ever increasing insurance premiums. **Now** is not the time to increase health insurance premiums for people battling cancer in Rhode Island.

We would be happy to speak with you further on this important issue and the consequences experienced by cancer survivors and their families. My contact information is: ldziobek@yahoo.com or 401-573-6341. Wishing you a Happy and Healthy New Year.

Thank you for your consideration.

Linda M. Dziobek, RN
Chair, Partnership to Reduce Cancer in Rhode Island

*Thank you Chris
for giving us this
opportunity to comment.*



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FHR is CARF-accredited for the following behavioral health programs:

Assertive Community Treatment, Assessment and Referral, Case Management/ Services Coordination, Community Housing, Community Integration, Crisis Stabilization, Intensive Outpatient Treatment, Outpatient Treatment, Supported Living, and Respite Services.

January 9, 2013

Mr. Christopher F. Koller
 Health Insurance Commissioner
 Office of the Commissioner
 1511 Pontiac Avenue, Building 69-1
 Cranston, RI 02920

Dear Commissioner Koller:

Good afternoon. My name is Joseph Dziobek and I am the President/CEO of Fellowship Health Resources, Inc. (FHR) headquartered in Lincoln, RI. FHR is a nonprofit provider of mental health and substance abuse programs for children to adults with over 75 locations in seven states. We employ over 600 staff, 480 of which are benefit-eligible. Currently, 328 (70%) take health coverage with Blue Cross for a total of 556 covered lives.

We spend at the present time \$2.7m dollars on health insurance, almost 10% of our budget. Our health insurance premiums have increased by 20%-40% in the past two years depending upon the plan. We were grateful for the decision by your office to limit the increase for large employers to 3.98% for 2013. Were the rates allowed to rise to 9%, that would cost FHR an additional \$135,601 dollars or the equivalent of five direct-care positions.

FHR is serious about employee wellness. We won the healthiest employer award for firms between 300-600 employees last year. We have an aggressive Shape Up program and provide a monetary incentive for employees who do not smoke. We reduced by 20% employee leave of absences last year. Should our rates increase, we would have basically three options: 1) reduce the benefit level; 2) pass the costs along to the employee; 3) reduce the workforce. None of these options are palatable.

In closing, I urge you to stand by your initial decision to cap the rate hikes at 1.65% and 3.98% respectively. Our goal is to have a healthier, more productive workforce. Rate hikes, which reduce the benefit and the number of enrollees, remains the single biggest obstacle in achieving this goal.

Sincerely,

Joseph F. Dziobek
 President/CEO

HealthInquiry - Statement regarding requested increase in Blue Cross premium rates

From: "Deb Cavanaugh" <deb@stylecraftusa.com>
To: <healthinquiry@ohic.ri.gov>
Date: 1/10/2013 3:19 PM
Subject: Statement regarding requested increase in Blue Cross premium rates
CC: "Joshua Greenberg" <jgreenberg@provplan.org>, <MHEAGNEY@aol.com>

Commissioner Koller,

I am extremely dismayed to hear of Blue Cross's request to increase their premium rates for small businesses in 2013. Stylecraft currently has 32 employees. Our health insurance rates have increased 40% over the past 4 years. 10% of my workforce cannot afford our health insurance and the company is paying approximately 55 – 60% of the premium. We have increased our deductibles from \$500 per person four years ago to \$2000 per person this year. These increases have all occurred at a time when the economy has been in extreme downturn and our employees have not seen pay increases in all of that time. Their utility bills, mortgages, rents, and necessities have gone up, but their pay has not. In fact, we decreased our hours by 10% about 3 years ago and are not eligible for the workshare program. Our employees have actually taken a 10% cut in pay while their health care premiums have gone up 40%.

Some employees are paying 25 to 30 percent of their gross pay for health insurance premiums, not including co-pays and deductibles. It is like a mortgage payment to them just for premiums and there is no relief in sight. Stylecraft is paying around \$200K per year for health insurance. It is simply mind-boggling that Blue Cross can now come back looking for more money from small businesses – there is just no more money to give. I do not know how we will be able to continue to offer benefits for our employees if the rates go much higher. There is going to come a point of sacrifice for small businesses and this might be it.

On the flip side, small businesses need a healthy workforce in order to stay functioning. I can't have a healthy workforce if my employees cannot afford to stay healthy. Employees cannot afford the co-pays for emergency room visits and prescriptions in addition to the premiums they are paying. It becomes a painful choice – go to work sick or take another hit in the paycheck for a sick visit. To say nothing of staying healthy – the bloodwork, testing, etc. costs that are applied to the deductible and employees must pay out of pocket are skyrocketing. I need healthy employees. This means to me that being healthy is now becoming a luxury. And health care should NEVER be a luxury. It should be affordable to all. It certainly needs to be affordable for small businesses. And, with so few health care choices in RI, it seems like the insurers have the perpetual advantage.

In addition, Stylecraft has recently changed from United Health to Blue Cross as our health insurer at our annual renewal on December 1. We already had Blue Cross for dental. I am absolutely appalled at the gross incompetence at the administrative level at Blue Cross when we made this change. We endured so much chaos when it came time for Blue Cross to enter all of our paperwork and get the memberships processed, my employees did not even have ID cards on the day the insurance became effective although Blue Cross had the paperwork 3 weeks in advance of the date. Our broker had a Blue Cross rep meet with both of us to address my concerns. Their response was basically : we aren't good at the paperwork, we know that we aren't, and we will get to it when we can. That is simply unacceptable to me. If management ran Stylecraft or any other small business with that type of attitude, we would not be in business long.

Interestingly enough, I was also advised that Blue Cross farms out some of this admin work to India. So, a company that was founded for the benefit of RI residents is now sending their work to India? Really? And they wonder why they aren't good at paperwork. This also just goes against the grain for me, both as an employer

and as a taxpayer.

It comes down to throwing more money at terrible inefficiencies. Perhaps Blue Cross would not need to increase small business rates if they ran their business like small business owners in a bad economy. Our small businesses are doing more with less, let's expect Blue Cross to do the same.

*Thank you,
Deb Cavanaugh*

Stylecraft, Inc.
1510 Pontiac Avenue
Cranston, RI 02920
Phone: (401) 463-9944 ext 122
Fax: (401) 463-5164

HealthInsInquiry - BCBSRI request

From: Donna Deandrea-Ballou <d.ballou@yahoo.com>
To: "healthinsinquiry@ohic.ri.gov" <healthinsinquiry@ohic.ri.gov>
Date: 1/10/2013 7:08 PM
Subject: BCBSRI request

January 10, 2013

Office of the Health Insurance Commissioner

To whom it may concern:

This letter is written regarding Blue Cross & Blue Shield of Rhode Island request for changes to the company's rate components.

The economy in the state of Rhode Island is not good and has not been for quite some time. Families are struggling. Our rates have already increased three times since we lost our health insurance coverage and began to direct pay BCBSRI in 2007. Enough! We simply cannot afford another rate increase or an increase to our deductible.

Sincerely,

Seth Ballou
Donna Deandrea-Ballou

737 Commonwealth Avenue
Warwick, RI 02886

Kathe Florsheim
PO Box 2367
Providence, RI 02906

RECEIVED

JAN 15 2013

Health Insurance
Commissioner

Christopher Koehler
Health Insurance Commissioner
OHIC
1511 Pontiac Av / Building 69-1
Cranston, RI 02920

January 14, 2012

Dear Mr. Koehler:

I am writing because of a recent article in the Providence Journal reporting that Blue Cross Blue Shield of Rhode Island (BCBSRI) is once again asking for an increase in its premiums. That is of particular concern because this iteration of an old story is that as BCBSRI increases premiums, providers reimbursements are falling and policyholder's co-payments are increasing. I know that to be the case as I have read the Explanation of Benefits (EOB) for my physical therapist's services. I also know that to be the case because BCBSRI, as of the turn of the year, has told mental health providers they are no longer going to be reimbursed for a 50 session because now, the sessions will be 45 minutes. Reimbursements will also be smaller, although at the time I heard this news, those reimbursements had not been defined.

I am deeply troubled by this because when I renewed my policy, these new "standards" for mental health services were not in effect. The terms of the contract were changed, after the contract went into effect. I am, likewise, very concerned that BCBSRI would presume to dictate its own standard of care, when the profession, for many, many years has functioned otherwise, using a 50 minute session as the expected office visit. I do not understand how or why an insurance company would be qualified to make such a change in the practice. I am hoping you will be able to mitigate this situation... Not to put too fine a point on it, but if you are unable to rein in this egregious behavior I cannot think of where the public can turn.

Thank you for your time and attention,
I am



Kathie Florsheim