

King, Cory (OHIC)

From: Mark De Binder <markdebinder@gmail.com>
Sent: Thursday, June 23, 2022 6:42 AM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : BCBSRI Rate Increase for Direct Pay Customers

Mr King,

I've just about had it with the rate increases from BCBS. Since 2012, my wife's and my plan has gone from \$800 per month to \$2400 per month and we don't have any un-normal health situations. We are direct pay customers who do not have the benefits of any group savings. Do the math on that rate of inflation and compare it to RI resident income gains. How can you keep letting them raise rates higher than the current inflation rates?

How much does the CEO and management team at BCBSRI make while we are going bankrupt paying all the costs THEY are supposed to be paying.

And if you didn't know, the direct pay segment is being used to take up the financial burden of group plans and low income health insurance. Is that fair or right? NO.

My feelings are that BCBSRI and anyone or agency that helps them increase any rates should be put in jail. Where do you stand Mr King?

Are you going to help the people or the insurance companies?

Kind Regards,

Mark

Mark De Binder
Former Member of the RI Advisory-
Board to the US Commission on Civil Rights

Providence Massage
hope artiste village Suite 1205
Pawtucket, RI 02860
401-965-9756

<https://www.messagebook.com/biz/providence-massage-ii> [messagebook.com]

King, Cory (OHIC)

From: Susan Jamison <sjamisondesign@gmail.com>
Sent: Wednesday, June 22, 2022 7:14 PM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : Blue Cross - Direct Pay - Raising Rates

To Cory King at the Office of the Health Insurance Commissioner,

Please reconsider raising Blue Cross Direct Pay rates this year. My husband and I depend on this health care and are struggling in this economy and the current inflation situation—like a lot of people—especially since this is all following a few years of dealing with the pandemic.

We all need a breather to get back on our feet! Please be kind!

Thank you for this consideration.

Regards,
Susan and David Jamison

--
Susan Jamison
Graphic Design and Marketing
 sjamisondesign@gmail.com

King, Cory (OHIC)

From: Becky Trosin <btrosin@aol.com>
Sent: Tuesday, June 21, 2022 3:32 PM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : Response to Blue Cross - Direct Pay request for new rates

To whom it may concern,

Another rate hike? Are we serious here? What exactly is Blue Cross' profit margin, may I ask? Since the pandemic, EVERYTHING HAS GONE UP. Blue Cross increased our rate 10% from 2021 to 2022 - \$131.40 per month for a total increase of over \$1500 annually, not to mention each year our deductible increases and benefits decrease.

Does Blue Cross want another 10% raise with another raise in deductibles and decreased in benefits???????????

How are we supposed to afford this neverending increase in rates and deductions in benefits????

Maybe Blue Cross can decrease their profit margin instead?

Please do not approve another rate hike for Blue Cross.
People who have Blue Cross direct pay cannot afford any more increased.

Thank you,
Becky Trosin

King, Cory (OHIC)

From: Greg Weiss <gregw85@gwmail.gwu.edu>
Sent: Tuesday, June 21, 2022 3:16 PM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : BCBSRI Direct pay

Hi,

Please do not raise health insurance costs. I am currently self paying about \$1200 a month for my family of 4. We are two adults in our thirties and two children under 6. This is a "low premium" high deductible plan. Meaning I need to spend over \$4k per a year out of pocket before insurance starts to pay for anything.

Sincerely,
Greg

Sent from my iPhone

King, Cory (OHIC)

From: Sky Wizard31 <mgilbert4080@gmail.com>
Sent: Friday, June 17, 2022 2:40 PM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : Proposed insurance rate hike

Insurance companies are middle men trying to steal as much profit as possible. Why do their profits come before care? They expect other parts of the chain may raise prices, and they want a bigger piece. This is never about providing care, or what's best for patients, only more money in the pockets of middle men. Wage stagnation, and now hyperinflation has been putting more, and more pressure on folks without the ability to buy basic life items for their families. Now they will be asked to put a greater percentage of that limited paycheck to insurance companies? This can't be a reasonable conclusion to reach if patients ARE what's important. I know Rhode Island is s a corrupt, shit show, but maybe you guy's will surprise me, this time. Peace

King, Cory (OHIC)

From: Marsha Giroux <choirgrimg@yahoo.com>
Sent: Wednesday, June 15, 2022 10:45 PM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : NO Insurance rate increases

Please do not permit these insurance companies to entrap us into rate increases. This will further the inflation that we are all already suffering with. If our insurance goes up with proposed 12.5 percent compounded with tax increases, inflated gas and grocery prices we will lose our home. I have four children and our income is stretched so thin. Big corporations are killing us with these inflated costs. We won't be able to afford to keep medical Insurance. We will have to choose to either eat, have a roof or have medical care. This is abuse. TELL THEM NO. someone needs to be fighting for us. The government isn't doing anything. Please just say no.

Marsha Giroux

Sent from Yahoo Mail for iPhone [overview.mail.yahoo.com]

King, Cory (OHIC)

From: Tara DiMuccio <taradimuccio@yahoo.com>
Sent: Wednesday, June 15, 2022 4:13 PM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : Premiums

I do not feel that an increase in premiums is fair to consumers because of the high rate of inflation and gas prices consumers are facing in our present economy. Being on a fix income due to retirement makes any further increaes on already high individual plans a financial difficulty. A fair policy is neded. Thank you. Sincerely, Tara F. DiMuccio

King, Cory (OHIC)

From: Sheila Shanley <shanz99@cox.net>
Sent: Wednesday, June 15, 2022 11:31 AM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : increased rates

Hello. The reason given for increasing the rates is infuriating and insulting. "Driven by pent-up and catch up demand for health care as procedures and surgeries were postponed or canceled during the pandemic!" What did they do with ALL the money they saved along with the received interest on it for those years that people were not having procedures/surgeries????????????? They saved MILLIONS!!!!!!!!

It would seem to me that they have the money.

Plus, I know the BCBS building was closed for the pandemic years and staff worked from home. Wouldn't that have saved them electric, AC, heat bills? Its minimal I know, but how dare they say the need such an increase! They need to figure it out like the rest of us have to do with our budgets. I am now retired, buying Plan 65 thru BCBS. Thank you and I hope you are able to reject their ask.

Best,
Sheila Shanley

King, Cory (OHIC)

From: Alice Benoit <illthinkforyou@yahoo.com>
Sent: Wednesday, June 15, 2022 10:59 AM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : UM NO CORY

I HAVE A FRIEND THAT WORKS IN THAT "BUSINESS" AND SHE SAID IT'S BECAUSE OF THE ILLEGALS WE HAVE TO PAY FOR AND AND CEO'S ARE GREEDY AND HAVE PRINCESS WIVES TO BUY SHOES AND POCKETBOOKS FOR...

STOP LYING TO US!!!!!!

AND YES PRICES WILL GO UP BECAUSE THE \$\$\$\$\$\$\$\$\$\$\$\$\$\$ IS WORTH ☐. SOON TO CRASH...PREPARE!

King, Cory (OHIC)

From: Deborah Dodge <deborahdodge33@icloud.com>
Sent: Wednesday, June 15, 2022 9:56 AM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : Regarding health cost increase ! This is absurd that you would even consider these hikes . This comes down to greed in this state the state of taxation

Sent from my iPhone

King, Cory (OHIC)

From: Greg Weiss <gregw85@gwmail.gwu.edu>
Sent: Wednesday, June 15, 2022 7:10 AM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : Bcbs rate hike

Hello,

I am currently buying health insurance directly from BCBSRI. My wife and I and two children under 5. This costs me about \$1,200 a month and is considered a lower premium high deductible plan. In other words when I go to the doctor, get an x ray, get a prescription, etc I need to pay for it until it reaches about \$7k annually! Please do not raise the premiums on families in RI while health insurance executives make millions per a year, when you include their bonuses.
<https://www.wpri.com/business-news/blue-cross-ri-paid-1-2-million-bonus-to-ceo-last-year/> [wpri.com]

Sincerely,
Greg Weiss
East Greenwich RI

Sent from my iPhone

King, Cory (OHIC)

From: Sheryl Bera <sberanbaums@gmail.com>
Sent: Sunday, June 12, 2022 3:30 PM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : Comment, re: 2023 commercial health insurance rates

Absolutely not no increase is necessary we don't have enough to buy food and gas

King, Cory (OHIC)

From: marianne russo <outlook_AAC2C9869E102262@outlook.com>
Sent: Sunday, June 12, 2022 1:37 PM
To: King, Cory (OHIC)
Subject: [EXTERNAL] :

You have to be kidding...a price hike at this time is like stabbing the public and then turning the knife. Who is going to be able to afford another price hike. Gas, food, housing, medicine and now health insurance. OH...I get it now they want to reduce the population in America and so we will all be like 3rd world countries. The rich just keeps getting richer.
Marianne Russo

Sent from [Mail \[go.microsoft.com\]](mailto:go.microsoft.com) for Windows

King, Cory (OHIC)

From: r dee <outlook_1F45C22941A17BE8@outlook.com>
Sent: Saturday, June 11, 2022 12:17 PM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : Comment, re: 2023 commercial health insurance rates

This year, requests for premium increases are being driven by pent-up and "catch-up" demand for health care, as procedures and surgeries were postponed or canceled during the pandemic.

SO they saved when no one could get heath care and want to make up for it now! do not let this happen!

from Mail [go.microsoft.com] for Windows

July 5, 2022

Commissioner Patrick Tighe
Office of the Health Insurance Commissioner
1511 Pontiac Avenue
Building #69-1
Cranston, RI 02920

RECEIVED

JUL 12 2022

Health Insurance
Commissioner

Dear Commissioner Tighe,

Please accept this as a "**Submission of Written Comments**" as you review the current proposed Rate Hike requests from the Health Care Insurers in Rhode Island. My comments are directed at Blue Cross & Blue Shield of Rhode Island.

My basis for the following comments are two-fold. I was also a 'Direct Pay Customer' for several years and can speak from a consumer experience with this Organization. And, I have gained an understanding of the ideology of the Company.

I firmly do **NOT** believe that BCBSRI is entitled to the exorbitant rate hike(s) it has requested. Although the Company is under a Rhode Island Statute, it has and continues to conduct business like a 'for-profit company' rather than a non-profit company. This is not in the best interest of its subscribers.

First point : As a subscriber, understand that I paid a very high premium for Direct Pay coverage. What I experienced repeatedly was a pattern of **claims rejections** after their **Initial** submission. This created a need for several appeals on my part before the claim was eventually adjudicated and paid. I learned the circuitous pattern of having to appeal claims and continually follow up on the Appeals. I also learned that Blue Cross of RI '**subcontracts**' most of their claim processing to '**outside vendors**' to adjudicate the claim.

In the majority of cases, the claim is initially rejected and not for valid reasons. Even when there is complete documentation, Physician attestation, etc., the claims are most often denied. The Pharmacy always makes a recommendation for a different drug, even though it is not a 'generic' but an alternative drug to treat a different condition. This is wrong. You should not tell me to treat my condition with a drug for an unrelated condition, but they often do.

The Organization also seems to have guidelines and formularies in place which intentionally slow down the claim payment process and place the burden entirely back on the Subscriber. This is WRONG and needs to be stopped. I suggest you examine ALL the outside Vendors they use, their initial approval rates, and their eventual claim payment rate. You will find that most claims are eventually paid only after a lengthy appeal process. I was fortunate enough to know what I was doing to appeal my claims - How about the unknowing individuals who do not understand how to navigate the system and end up paying out-of-pocket.

My point - BCBSRI is asking for a rate hike but are not paying medical claims as they should be for their Subscribers.

Second point : Please take a look at Salaries and 'Bonuses' paid to employees but most importantly, the Executive Suite. Again, they operate more as a 'For-profit' rather than a 'Non-profit'. It is my Direct Pay premium dollars that are paying for their salaries and bonuses.

Third point : If you look at their Annual Report, their Billboards, their television commercials, one cannot but notice their Corporate Agenda of certain causes which they support. These are **not** always about improving the health of Rhode Islanders. Many have now become 'Political Causes'. One can easily detect their political leanings through the causes they support. As a premium paying subscriber, I do NOT want my premium dollars being spent on anything outside of medical claims. If you have excess money, use it to **REDUCE MY PREMIUM**.

Nothing is free - their advertising, their High School Sports banquet, etc... It is not their right to spend MY dollars as THEY see through their political lens. Enough already!

Most of the previous Health Insurance Commissioners have not held BCBSRI accountable. As the biggest Health Insurer in the State of Rhode Island with the largest market share, I am hoping you will have the courage and foresight to do a deep dive into the Organization from the perspectives I have highlighted (only the beginning) and make the right decision for the health care consumers of the State of Rhode Island. It is long overdue.

RECEIVED

June 28, 2022

JUL 5 2022

Mr. Cory King
Office of the Health Insurance Commissioner
1511 Pontiac Ave, Building #69-1
Cranston, RI 02920

Health Insurance
Commissioner

Dear Mr. King:

My wife and I are in our late 50s and early 60s and are direct pay customers of BCBS RI. As a couple, we are currently paying over \$30,000 per year in health insurance premiums, an amount that is undeniably very expensive.

We were shocked to learn that BCBS RI is seeking a 9.6% increase (on average) in health care premiums for calendar year 2023. For us, it would mean an increase of approximately \$3,000 to over \$33,000 per year which is outrageously high.

Health care inflation has been running at the 4% rate over the 12 months ended May 2022 per the most recent CPI data. BCBS RI's request for a 9.6% increase in premiums is an egregious overreach on their part.

According to BCBS RI's 2021 financial statements, they earned \$1.8 billion in revenue for the year and posted a net gain of \$13.2 million due to lower than anticipated medical costs seen during the Covid-19 pandemic which has continued into 2022. BCBS RI added \$18.9 million to their reserves which now total over \$434 million on a cumulative basis.

It does not seem fair to RI direct pay customers that BCBS RI continues to increase premiums at such a high rate. I was also surprised and disappointed to read that BCBS RI is considering increasing co-pays, deductibles, and coinsurance levels. Too much of the cost of health care is being passed on to individuals both currently and especially under this upcoming year's request.

Please give serious consideration to approving a more reasonable request for higher health care premiums in the 0-4% range, rather than the 9.6% requested. Thanks in advance for your consideration.

Sincerely,



Timothy V. Geremia

Office of the Health Insurance Commissioner
1511 Pontiac Avenue
Cranston, RI 02920

RECEIVED

JUN 28 2022

Health Insurance
Commissioner

Dear Health Insurance Commissioner,

Thank you for providing an opportunity for comment on proposed rate increases by Blue Cross Blue Shield of Rhode Island. I am writing to strongly urge you **not** to approve these rate hikes.

I currently pay \$1,143.08 each month for health insurance coverage with Blue Cross. That is just for my own single policy. Deductibles, co-pays, prescriptions and out of pocket costs make that amount even higher. I have my own small business and do not qualify for any state assistance. My health insurance bill is by far the largest expense I have each month. It is in fact, higher than any mortgage I have ever paid. This cost is already a burden. Increased rates would make it more so.

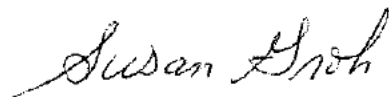
As small business owners and the community recovers from the economic impact of Covid, inflation, and increasing food and gas prices, I would encourage you to reject rate hikes for health insurance.

I do appreciate having health insurance coverage and realize that it can be lifesaving, but medical costs are out of control.

I urge you to reject this rate hike, and also to consider access to less expensive health insurance options for those of us approaching retirement age – but not yet eligible for medicare. At this point, the high cost of health insurance is the biggest deciding factor influencing the age I will be able to retire.

I appreciate your consideration.

Best regards,



Susan Groh
40 Moulton Circle
Warwick, RI 02886



Mark P. Small, D. M. D., F. A. G. D.
169 Mesa Drive
North Kingstown, RI 02852

June 21, 2022

RE: Blue Cross Direct Pay Rate Increase

RECEIVED

Patrick M. Tighe
Office of the Health Insurance Commissioner
1511 Pontiac Avenue
Building #69-1
Cranston, Rhode Island 02920

JUN 28 2022

Health Insurance
Commissioner

Dear Mr. Tighe:

I am contacting your office to protest against the proposed 9.6% rate increase that Blue Cross would like to impose on the direct pay individuals. The 9.6% increase is over the New England CPI of 7.5% and over the New England medical CPI of 3.4%. Blue Cross routinely asks for rate increases that are well over the CPI for the region and it is hard to believe that their expenses are over the region's expenses every year.

One of the reasons that was given for the large increase in the rate is due to the pent up demand for medical services now that COVID is winding down. There is a pent up need for these services because they were necessary, but elective and elective services were put off at the height of the COVID pandemic. During the pandemic, I was given two rate decreases. One was for less than \$ 400 and the other was for less than \$200. The money that was not spent in 2020 should still be in Blue Cross's coffers.

Another reason that Blue Cross gave for the rate increase is the recent spike in inflation. Apart from the cost to run their business, the cost of inflation will solely be borne by the providers. The increased costs for supplies, utilities, and personnel cannot be passed on to Blue Cross or onto the patients. The reimbursements are fixed by Blue Cross. Bear in mind that the fee discussion is a dictation, not a negotiation.

Finally, I am not only a Blue Cross member, but I am also a Blue Cross provider. Until this year Blue Cross Dental has not increased its reimbursements to participating dentists for eight years. Year after year the premiums increase and many of the medical plans have a dental component, but these increases are not passed down to the people who are providing the services.

The Office of the Health Insurance Commissioner was created after a series of scandals at Blue Cross. The original mission of your office was to create a balance between payers, providers, and patients. Permitting the full 9.6% rate increase tilts the playing field much too heavily in favor of the insurance company.

Sincerely,



Mark P. Small, D. M. D., F. A. G. D.

MPS

Andrea M Robertson
65 Old Quarry Rd
North Scituate RI 02857
[REDACTED]

RECEIVED

JUN 28 2022

Health Insurance
Commissioner

Office of the Health Insurance Commissioner
1511 Pontiac Avenue, Building #69-1
Cranston, Rhode Island 02920

June 19, 2022

Re: Blue Cross Direct Pay- Public Hearing

Dear Commissioner,

As self employed individuals, myself and husband have been direct pay customers for the past 25+ years. The rates on these plans are OUT OF CONTROL.

We strongly urge you to put a halt to the health insurance industries overwhelming price gorging on the sole proprietor, self paying individuals.

I have not seen a year in the past 25+, where rates have not increased.

As a family of 4 we pay \$1800 per month= \$21,600.00 per year for a high deductible plan, (\$13,000 family deductible) which covers hardly anything over the course of the year. We do not qualify for HealthSource RI or any federally funded programs.

An individuals health is priority, and in many cases it is the difference between life and death!

These health insurance companies need to re-evaluate their expenditures and stop putting the burden on individual paying customers.

Please, Please take a stance on helping this market find some stability in very difficult times.

Now is definitely NOT the time to make price increases to this segment of population, Blue Cross Blue Shield has a long history of price increases. Perhaps, they need to take a step back and cut back themselves!

Sincerely,

Andrea M. Robertson
Andrea M. Robertson
Robertson Real Estate Inc.

King, Cory (OHIC)

From: [REDACTED]
Sent: Wednesday, June 29, 2022 8:37 AM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : Blue Cross Direct Pay

Good Morning,

I received notice of a proposed rate increase for direct pay customers of Blue Cross. Like many direct pay customers I am self-employed, the proposed increase of almost 10% will be catastrophic to my finances and my business. I cannot afford this increase. There is no other insurance company available to me through the exchange which will allow me to see my Drs and Brigham and Womens in Boston. I have a neuro-muscular condition, that under the right care can be controlled. Without care I cannot walk. I urge you to reject this increase for the residents of RI.

Thank you,
[REDACTED]



Sent from [Mail \[go.microsoft.com\]](mailto:go.microsoft.com) for Windows

King, Cory (OHIC)

From: [REDACTED]
Sent: Monday, June 20, 2022 6:20 PM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : Comment, re: 2023 commercial health insurance rates

June 20, 2022

Dear Cory King:

I am writing to express my opposition to the proposed health insurance rate increase.

I work for a small non-profit as a 1099 contractor, and purchase my health insurance through Health Source RI. Even with a subsidy, my health insurance cost for 2022 is more than one third of my monthly compensation.

An increase will be a burden to me and others who purchase their insurance through Health Source RI.

I have a Blue Cross/Blue Shield of RI plan because I need the national network it provides to cover my daughter who attends college out of state.

Despite the high costs of my plan, to date, I have not even been able to use the benefits of my plan. I moved to RI in November 2021, and soon after began searching for a primary care physician. I spent hours over several months calling dozens of offices that were listed on the BCBSRI website as in network and accepting new patients. Many offices didn't answer the phone or call me back. Those that I was able to reach said that contrary to the website listing, they were not accepting new patients.

Although my plan does not require a referral to receive services such as a mammogram, radiology offices will not book me for a mammogram since I do not have a primary care physician. This has been the case for other services that I have sought as well.

In February or March I finally did secure an appointment with a primary care physician for August, and after I see her, and am officially a patient of that office, I hope to be able to schedule other services, including a mammogram. However, given scheduling delays, I am not sure that I will be able to be seen in this calendar year.

I raise this scheduling issue because by the time I see the primary care doctor in August, I will have been paying premiums for 10 months without having access to in-network medical care. And now I and others are facing the prospect of an increase in premiums. I can't think of another industry in which that would be acceptable – ie: asking consumers to pay their monthly phone bill for 10 months but not turning on the service until month 10, and then increasing the monthly rate.

Please add my voice to those opposing the rate increase.

Sincerely,

[REDACTED]

King, Cory (OHIC)

From: [REDACTED]
Sent: Thursday, June 16, 2022 4:41 PM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : Insurance Rate Hikes

June 16, 2022

Hello. My name is [REDACTED] I've worked all my life, but when i got sick, working became difficult. I continued to work part or full time jobs as i was able. Currently im not working, but am on SSDI, approved in 2020. As part of my disability, i was told that i need to file for Medicare coverage. After much confusion and rereading, i picked an Advantage plan, Blue Chip. I have Healthmate for medicare. The cost of my medical insurance is taken directly out of my check, as are a couple other expenses.

I fear the BLUE CROSS INSURANCE HIKE will put me in the 'Red' monthly. I struggle now with the bills I have currently. Medical bills vary month to month and I've had to avoid doctors and physical therapy because copays are \$25 each session. I chose Blue Cross out of all the other plans because I know them to be a reputable insurance company. Since I see doctors, case workers, [REDACTED] and specialists for Pulmonary and Spine, I'm at the doctors regularly, and I'm paying copays. Needless, once all that is paid, along with my rent and vehicle costs, im often left with less than \$100 to cover me for the month. As it is, i only buy one tank of gas per month. 2 years ago i could fill my tank with \$25. Yesterday it cost me \$60.80. I spent \$37 more than my food stamps (\$290) for food this month, my vehicle taxes are coming soon, and i just had my registration and inspection last month. My rent is subsidized, electric is paid w LIHEAP, I do not have cable or streaming services, i only have internet on my phone, and if the weather is bad, my TV Loses reception because I'm in a valley. Frankly, i cant afford a price hike on anything!

Please, consider those of us who are at the low income level. The struggle is very real.

I appreciate you taking the time to read this, and I pray that something can be done that wont hurt the low income residents in RI.

Sincerely,
[REDACTED]

King, Cory (OHIC)

From: shoe shoe <kflorshoe@yahoo.com>
Sent: Tuesday, July 5, 2022 7:17 PM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : Public Comment re: proposed increase in cost of BCBSRI Direct Pay policy

Kathie Florsheim
PO Box 2367
Providence, 02906

OHIC
1511 Pontiac Av, Bldg #69-1
Cranston, RI 02920

Email: Cory.King@OHIC.ri.gov

Subject:
Proposed increase in cost of Direct pay policy, BCBSRI

To whom it may concern:

If anything, BCBSRI should be reducing the cost of its policies and increasing the benefits and reimbursements. Having been responsible for paying for my medical policy, since I finished grad school, I am well aware of all BSBCRI tricks.

BCBSRI does not deserve to raise the price of its policies for the following reasons:

- Providers do not benefit from these rate increases. There is only one other place that new pot of money will go and that is to the administration. I can personally attest to having multiple problems with BCBSRI representative responding incorrectly to my questions about my policy, if they respond at all. I can personally attest to submitting claims, which were moldering in their office for months and month, without explanation, that would still be sitting in a dead file, were it not for RIPIN's help. I can personally test to being given exactly the opposite information about whether a provider was in or out of network, repeatedly- for months. It was, again, RIPIN's help that finally got an answer, which took yet months to get in writing. Any organization that is so poorly managed - or incompetent- doesn't deserve to increase its income, unless OHIC wants to make an example of failing upward.

- Further, I know of PTs whose reimbursements have been reduced, without explanation and without recourse. My own opinion of that is that BCBSRI is trying to run the small PT offices out of business so that BCBSRI can turning over all PT therapy to CVS Minute Clinic, thus, no doubt saving BCBSRI considerable money. The manner in which PTs are being treated is a sleazy business practice -it is also underhanded, and no one has taken any responsibility for it- nor has any entity stood up for the PTs who are being driven out of business.

- And...further, as the price has increased over the years, BCBSRI has concurrently reduced benefits, as always without explanation.

I am four-square against allowing BCBSRI to increase its rates.

Kathie Florsheim

"Where law ends, tyranny begins."

KATHIE FLORSHEIM

Independent Professional Photographer + Writer

Providence, RI

<http://www.kathieflorsheimphotography.com> [kathieflorsheimphotography.com]

Kathie Florsheim
PO Box 2367
Providence, 02906

RECEIVED

JUL 12 2022

Health Insurance
Commissioner

✓ OHIC

1511 Pontiac Av, Bldg #69-1
Cranston, RI 02920

Email: Cory.King@OHIC.ri.gov

Subject:

Proposed increase in cost of Direct pay policy, BCBSRI

July 5, 2022

To whom it may concern:

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- Providers do not benefit from these rate increases. There is only one other place that new pot of money will go and that is to the administration. I can personally attest to having multiple problems with BCBSRI representative responding incorrectly to my questions about my policy, if they respond at all. I can personally attest to submitting claims, which were moldering in their office for months and month, without explanation, that would still be sitting in a dead file, were it not for RIPIN's help. I can personally test to being given exactly the opposite information about whether a provider was in or out of network, repeatedly- for months. It was, again, RIPIN's help that finally got an answer, which took yet months to get in writing. Any organization that is so poorly managed – or is incompetent- doesn't deserve to increase its income, unless OHIC wants to make an example of failing upward.

- Further, I know of PTs whose reimbursements have been reduced, without explanation and without recourse. My own opinion of that is that BCBSRI is trying to run the small PT offices out of business so that BCBSRI can turning over all PT therapy to CVS Minute Clinic, thus, no doubt saving BCBSRI considerable money. The manner in which PTs are being treated is a sleazy business practice -it is also underhanded, and no one has taken any responsibility for it- nor has any entity stood up for the PTs who are being driven out of business.

- And...further, as the price has increased over the years, BCBSRI has concurrently reduced benefits, as always without explanation.

I am four-square against allowing BCBSRI to increase its rates.

Kathie Florsheim



King, Cory (OHIC)

From: [REDACTED]
Sent: Tuesday, June 14, 2022 11:46 PM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : Comment, re: 2023 commercial health insurance rates

Hello Cory,

My wife and I have Medicare (\$170.10)and Blue Cross RI Healthmate Advantage (\$ 132.00 monthly each). \$604.20 in premiums on our retirement incomes.

In addition, co-pays for higher tier drugs of \$47. Monthly, I'm also appealing a \$280. Charge for full cost of tier 2 drug needed while I was on vacation! \$25. for specialists visits which usually are 4 to 5 monthly (\$125.), \$15. Co-pays for acupuncture (4x's mo. = \$60) and this year I'm appealing a \$680. Dental charge for a procedure done by my dentist that Blue Cross vendor Concordia states is not covered under my policy (dentist fixed recurring pain and cysts I was getting on a tooth that had a crown), insurer is covering the cost of the crown but not the "retreating of the root work that had been done over 14 years ago under that tooth (the actual issue causing the pain). So, thus far, Jan - May:

3021. Premiums

235. Higher tier drug co-pays

1875. Acupuncture co-pays

680. Appealing dental charge

280. Appealing drug charge

Did some PT @ \$25. Per visit = \$100.

Summarized payments for healthcare Jan-May = \$ 6191.

Benefits that the Part-C plan offers and we have taken advantage of are OTC \$125. Per quarter. Gift cards \$25. For well health issues covering four stated programs. It helps.

Thank you for asking for comments, we hope you can use this information.

Office of the Health Commissioner

1511 Pontiac Avenue

Cranston, RI 02920

RECEIVED

JUL 6 2022

Health Insurance
Commissioner

Dear OHIC,

Thank you for the letter informing me of a potential rate increase to my insurance of 9.6%. I currently have a BC/BS RI Vanantage Blue Direct PPO medical insurance plan. I currently spend \$419.55 per month, with no cost sharing from an employer. My insurance plan is originally \$685.17 without a rebate from RI HealthSource.com. Since January, I've been collecting Unemployment at \$2644/mo in income. I am also a rare disease patient and I live with life-long disabilities. My "income" from unemployment is above the state and federal threshold needed to apply for SSI or SSDI, as such I do not qualify for Medicare. It is also above the threshold to qualify for utility assistance, food stamp assistance, rent assistance, medication assistance, and student loan forgiveness. Many charities like food banks do not have enough resources due to COVID, and the enormous need from the community.

The majority of my income is spent on medical care, as name brand medications and compounded medications are also not covered by insurance. I live with Celiac Disease, an autoimmune disease and need all my meds to be gluten free. Generic meds are the only meds that are covered by insurance, but unfortunately, they are not tested for gluten and manufacturers will not plan to test for gluten in the foreseeable future unless mandated by the federal government. My only option is to have compounding pharmacies create my medications so that they are gluten free so I can live. I was also diagnosed with [REDACTED] it's a chronic pain condition. I was recently diagnosed with Multiple Sclerosis [REDACTED] it is also a chronic pain and degenerative nerve condition. The MS affects my balance, critical thinking, executive functions, bladder functions, and often leads me with lack of sensation and numbing in my abdomen, hands, and sometimes feet. I need my medical insurance and medications for any resemblance of a quality of life so I can pursue graduate school, and full-time employment. I can no longer work in the field I made my career in 18 years ago. So, I have to go back to school, incur more student loan debt to retrain, and I am now a full-time graduate student.

The [REDACTED] health insurance plans for students is provided by [REDACTED] It is required for full time students unless an approved waiver is submitted proving the same level of health insurance coverage with another policy. The school's policy does not cover my orphan drug medications, compounded medications, and provides limited coverage for more frequent provider visits that are necessary for my medical needs as a rare disease patient. The school's health insurance plan is not an ideal option for me. It would provide me less coverage than what I already receive with BC/BS.

In addition to paying premiums, I also have to pay travel expenses, my deductibles, and copays for treatment. Many specialists in [REDACTED] and MS have decided to not take insurance because they are tired of fighting the insurance companies, and so appointments are often paid in cash before the appointment. At the time I purchased the Vantage Blue Direct PPO medical insurance plan because I have specialist doctors who practice in Massachusetts, outside the state of RI. On avg I will pay \$1500 every 2-3 months

in compounded or out of country medications alone, not including transportation costs, additional doctor appointments (not covered by my benefit plan), or medical equipment.

I implore you NOT to increase my premiums to \$459.83 per month. My covered benefits already are insufficient to my lifelong medical needs for physical therapy, compounded medications, and medical equipment so I pay for these services out of pocket. Together with my medical team, we have filed out the preauthorization forms, explaining my medical needs, and we went through the many appeal processes. It is a done deal, my insurance provider will not cover these necessary medical expenses and I already have the best insurance that I can afford, because it allows me to see specialists out of state as an in-network provider.

Please do not increase my premiums so that my medical insurance plan is out of reach for me. I am just one patient out of thousands who also live with a rare disease and/or disability in RI whose income is above the threshold to apply for SSI and SSDI benefits, and do not receive Medicare. Our income and benefits are already insufficient to meet our medical needs with a high quality of life. To afford my medical needs, the tradeoff is that I live in an apartment that has a leaking roof, I've had broken appliances for years, and live with non-insulated windows and walls that are original to a 1900 building. It is freezing in the winter, and I pay through the nose to heat my tiny 1 bdrm home.

I cannot move anywhere else because I collect unemployment and every landlord wants a renter's income to be three times the amount of rent, which I don't earn. [REDACTED] and not many landlords or apartment complexes accept animals that large. And Section 8 housing has a wait list of over 4 years here in RI. Currently I have nowhere else to live. This apartment was the only place I could find within my income at the time. I just renewed my lease for another year with a rent increase of \$100 with no guarantees the property manager will fix the living conditions in my home.

So please remember that there are so many people like me that are rare disease and disabled patients that do not qualify for state assistance programs, and we already shoulder the cost for a basic quality of life when our health insurance plans do not cover our needs. Please do not increase our premiums.

Respectfully,

[REDACTED]

King, Cory (OHIC)

From: Ragu Bharadwaj <ragu@nyrasta.com>
Sent: Sunday, July 10, 2022 7:26 AM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : Comment, re: 2023 commercial health insurance rates

Dear Sir,

I am a technology and innovation focused small business owner with a long track record who moved to RI after almost two decades in Middlesex county, Massachusetts. My family and I chose RI for its community feel and natural beauty. I am currently working on a start-up idea in ag-tech. I am writing to register my views on the proposed health insurance plan cost increases that focus disproportionately on small business and single-person LLC owners. My specific comments regarding the proposed increase:

- * From an equity perspective, it is unclear why large groups should field a smaller rate of increase than small businesses and single owner LLCs. It is not that people employed by larger businesses somehow have better health, take better care of their health or use lesser healthcare. The truth is more likely the opposite.
- * The difference in the proposed increase in premium between a small business and larger group is almost 5% (11.7% for small business compared to 7% for larger groups in one case) From a risk perspective, a single small business may be less attractive than a larger business with many more people. However, given the huge number of small businesses in RI (well over 1400 just in manufacturing) relative to larger businesses, it is unclear, why the insurance company cannot virtually pool, multiple small businesses together and derive a lowered risk pool. When this is done, the difference between risk pools should be eliminated - completely.
- * This increase will likely have an adverse effect on the health risk and outcomes for small business owners. Given the future economic expectations, (increased inflation and a tightening economy), many of us will be forced to lower our plan quality and join cheaper plans which cover less. The insurance companies will earn lesser, unplanned costs faced by owners will increase more. No one will win.
- * We need to create a healthy ecosystem both for the continued existence and the creation of small business in RI. This proposed increase just makes it easier for small business to flee our state. Or for small business owners and families to go uninsured.
- * US Healthcare costs are the world's highest. And our health care outcomes are worse than many developed countries in the EU (<https://www.commonwealthfund.org/publications/fund-reports/2021/aug/mirror-mirror-2021-reflecting-poorly> [commonwealthfund.org]) To continue to be a competitive and well-running economy, it behooves us to solve this issue. By developing alternative solutions (from just premium increases) RI can take a leading role in solving this thorny issue.

I'm happy to discuss more if you wish. Please let me know.

regards
-Ragu Bharadwaj

Nyrasta LLC

care costs. There are many out of pocket costs with even the best of these plans. Not only have annual premiums increased significantly in recent years, so have the costs borne by the well-insured customers. These include co-pays for doctor visits and prescription medication and out of pocket costs for testing - be it lab work, x-rays, among other things. We even pay for lab work for "free" physicals.

4. Customers who are in their 50's and 60's are paying significant parts of their budget for health insurance. And it gets more costly every year. For those on private pay plans it is especially painful.

An example may help.

If we earn employment income of \$180,000 in 2023, our cost for Vantage Blue Direct \$3250/\$6500 will be between 25% and 30% of our estimated after-tax income (as independent contractors), based on the quoted \$ costs for our current policy. And consider - this is 25 to 30% of income for premiums only (not total health care costs) and the example is based on household income that is 2.5 x the average household income in RI. Consider the burden on a household with average income in RI.

5. Customers have limited choices and BCBS has a monopoly.

If an individual chooses to not carry insurance - ie self insure - and that individual gets sick and needs medical care, he / she will pay a much higher price than BCBS has negotiated.

If an individual gets seriously ill, the cost of needed care could bankrupt that individual. So what choice does a customer have?

6. Health insurance costs for those who are not covered by a corporate plan is painfully high. Independent contractors pay for all of their insurance and there is no advantage of a large pool.

Thank you for the opportunity to share our thoughts. We appreciate your consideration. Please call with any questions.

Diane Merdian

DLMerdian@me.com



King, Cory (OHIC)

From: Diane Merdian <dlmerdian@me.com>
Sent: Friday, July 8, 2022 10:38 AM
To: King, Cory (OHIC)
Cc: Diane Merdian
Subject: [EXTERNAL] : BCBS - Submission of written comments

I am submitting our comments on the proposed increase in premiums for 2023 for BCBS Health Insurance. We appreciate the opportunity to share our thoughts with the Office of the Health Insurance Commissioner.

My husband - Jason Anderson - is a consultant and I (Diane Merdian) am on his policy and am a financial consultant / board member. We have private pay insurance with BCBS of RI. We file and pay our taxes as independent contractors. Our taxes include federal, state, and both sides of FICA (as employer and employee).

We expect / hope to earn \$180,000 plus or minus in employment income in 2023. Our income varies, so it is impossible to know what we will earn with any precision.

The average household income in RI is \$70,000. So even as we pay additional taxes that many do not pay (the second part of FICA), we consider ourselves fortunate.

We are in our 50's and 60's - with one of us to be 56 at the beginning of 2023 and the other to be 63. Health insurance is important to us and there are few options in RI. In addition to paying what seem to us to be extremely high premiums, we pay additional money for our medical care. We pay thousands of dollars for co-pays (doctor visits and prescription medications) as well as payments for lab tests, x-rays, scan, etc, as needed.

We carry Vantage Blue Direct \$3,250 / \$6,500. Our annual cost in 2022 for this insurance costs us \$22,159.44. The proposed increase for 2023 of the "same policy" will cause our costs to go up to \$25,126.56 or a 13.4% increase (equal to \$2,967 increase).

I would like to make several points for consideration by the Office of the Health Insurance Commissioner.

1. Every year, our cost of insurance goes up more than the quoted "rate increase". This is true for all customers of BCBS who remain alive from year to year (who do not choose to downgrade their insurance). The 9.6% average rate increase cited by BCBS is irrelevant and misleading to customers. BCBS should represent the average rate increase assuming customers do get one year older every year.

BCBS indicates the "overall average rate increase proposed is approximately 9.6%, *not* including any applicable increase due to a change in age." None of us stay the same age and yet this calculation is presented (every year) as the rate increase. Our rate increase will be 13.4% this year if we keep our same policy - not 9.6%

2. The benefits of any given policy may, of course, change from year to year. We have not yet seen the details of what the policies will include for 2023, but it is often the case that some changes are made that will increase customers' costs for medical expenses that are not fully covered by insurance.

3. Insurance premiums paid by BCBS customers does not fully represent health

King, Cory (OHIC)

From: Brent Runyon <brentrunyon@gmail.com>
Sent: Wednesday, July 6, 2022 1:39 PM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : 2023 Rate Change Requests

Mr. King:

Regarding the rate increases referenced in this [press release](#), I have a few comments.

In a year when corporate profits continue to rise, when inflation is hurting middle and lower income Rhode Islanders, it is inconceivable to me that OHIC would consider allowing rate increases of these amounts. All corporations have increasing costs. Yet when their profits are growing beyond inflation, there are some years where corporations that work in Rhode Island should share some of the pain.

I do not support rate increases beyond 3%.

Brent Runyon
Providence

June 30, 2022

Office of the Health Insurance Commissioner
1511 Pontiac Avenue, Building #69-1
Cranston, Rhode Island 02920

Dear Commissioner:

I am writing to voice my opinion of Blue Cross & Blue Shield of Rhode Island's request for a rate increase for the Blue Cross – Direct Pay Class.

Our premiums for this insurance have increased each year of the past four years that I have had to use this insurance, each year approximately a \$100 per month increase. There has been no increase in benefits during that time. Since the last three years have been during a pandemic the use of the insurance has been less than average. Another increase to the premiums or deductibles or a decrease in reimbursables will be a hard burden to bear in these times. What justification other than greed is there for another increase?

Blue Cross & Blue Shield of Rhode Island is the only company that is available to me for health insurance in Rhode Island. Why is that? Why doesn't the Commission expand the number of companies who can provide individual health care insurance? Perhaps with some competition Blue Cross & Blue Shield of Rhode Island might keep their premiums in control and not subject the Rhode Island consumer to high premium increases every year.

Janet Fahy

Janet Fahy
Newport, RI
Janet_Fahy@msn.com

King, Cory (OHIC)

From: janet_fahy@msn.com
Sent: Friday, July 1, 2022 8:39 AM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : Blue Cross - Direct Pay comments
Attachments: 6.30.22 Blue Cross - Direct Pay Comment from J. Fahy.pdf

Thank you for the opportunity to comment on Blue Cross & Blue Shield of Rhode Island's request for a premium rate increase. My comments are attached.

Janet Fahy
Janet_Fahy@msn.com

King, Cory (OHIC)

From: Meg Hetfield <meghetfield8@gmail.com>
Sent: Thursday, June 30, 2022 1:38 PM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : Blue Cross- Direct pay, increase in fees 9.6%

Hello,
I CANNOT afford this increase. I will be 60 years old in 1/2023. If this goes through I will have to drop BCBS of RI direct pay.
This is way too much for health insurance.

Margaret Hetfield
Bristol, RI 02809

King, Cory (OHIC)

From: Gail Agronick <gagronick@gmail.com>
Sent: Thursday, June 30, 2022 11:48 AM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : United Health Care Rate Increase

I strongly oppose this rate increase. Already, my family has put off treatment and/or forgone other essentials because of healthcare costs.

Gail
Sent from my iPhone

King, Cory (OHIC)

From: Nina Barta <mellonabeeb@gmail.com>
Sent: Thursday, June 30, 2022 10:45 AM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : Big Premium Hikes

Hello

I am saying that I do not want to see health insurance premium increases for the elderly on Medicare (many are on fixed incomes). Particularly now with the inflation that is occurring, it would be a hardship.

Thank you.

Nina Barta

King, Cory (OHIC)

From: Jeffrey Campopiano <jeff@campopiano-eng.com>
Sent: Wednesday, June 29, 2022 11:55 AM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : Blue Cross Rate Hike

Dear Agent,

Responding to your correspondence, I must reply that an increase in insurance rates is a poor way to treat American citizens.

The insurance agencies dominate the headlines with outrageous profits for their financial quarters and unchecked salaries for their upper echelon directors.

Please do not allow the insurance companies to gross a more intolerable sum as they rape the American economy, charging a dollar and providing not even a dime.

Thank you for this chance to speak my voice.

Good Day,

Jeffrey Campopiano

King, Cory (OHIC)

From: Laurie Sturdevant <lauriesturdevant@verizon.net>
Sent: Tuesday, June 28, 2022 9:10 PM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : BCBS Proposed Health Insurance Increase

Dear Commissioner Patrick Tighe,

I am writing to you in response to the letter I received about Blue Cross & Blue Shield seeking the approval for increased rates for Direct Pay Plans. I appeal to your office not to approve these increases, these increases will continue to cause a significant financial burden for myself.

My health insurance premiums have already increased so much in the past five years, these proposed increases are simply unsustainable. These costs cause me great concern for my very senior years, as a great percentage of my income now pays for something I can't afford to be without yet rarely use. In addition my current monthly expense severely limits my ability to invest for my future financial stability.

I have calculated that since I have been enrolled in the mandatory Rhode Island Health Insurance program, that when I am finally eligible for Medicare, I will have spent nearly \$200,000 paying premiums. This is a staggering amount for a policy where the deductible is so high, that it is not a benefit for me to have health insurance. Health insurance for me is now an unaffordable luxury. Increasing the monthly rate is unthinkable.

I am 61 years old, I take excellent care of my health and lifestyle choices. On average, my yearly medical cost put toward my deductible is about \$400.00. I should qualify for a good health bonus. As I understand, BCBS, will increase the rates by 10%, not including increases for age. I should not be lumped into a group by age. It is ignorant to buy a product "health insurance" without knowing what the financial burden will be for the upcoming year ahead. Furthermore, since I have been a BCBS customer, the history of the insurance policies are always rising deductibles, higher co-pays and less service.

This year, my primary healthcare provider cancelled my yearly check up in May, which was scheduled a year in advance, it was rebooked for September. Truly, I am dismayed with the direction of the healthcare business, it no longer represents caring for people.

My most recent experience with the enormity of this cost was when I went to CVS to pay my bill and the cashier asked me if my monthly fee was for a family plan. I replied, "no, just myself". The clerk was shocked.

If the proposed increase is approved as outlined I will need to make a serious decision as to whether I can sustain this health care expense or simply take the penalty charged by not enrolling. Being able to afford a forced requirement from the State of Rhode Island should not be a luxury. The cost of health care should have consideration for a persons actual health history, not simply a demographic and age component.

I hope you will understand and give weight to impact your proposed increases mean to those of us in good health and are being pushed out affordable health care programs,

Sincerely;

Laurie Sturdevant

Sent from my iPad

King, Cory (OHIC)

From: Dennis Smith <lionfish.arts@gmail.com>
Sent: Tuesday, June 28, 2022 10:15 AM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : Blue Cross - Direct Pay premium increase written comment

Hello Cory,

I am writing to inform you of my opinion on Blue Cross' direct pay product.

This is the first year I have been "in the marketplace" for insurance in RI, bby next year my company should be offering insurance.

So the insurance product I have is WORTHLESS. It is actually, in my estimation, fraudulent. I pay roughly \$520 per month for the equivalent of a few hundred dollars worth of medical care a year.

The plan has a high deductible, over \$4000, which I was not informed of when buying the plan. This means I had to outlay \$10000 before ANY "insurance benefits" are actually applied to medical expenses. For \$6000 a year, I get 1 physical and 2 dentist cleanings. A value of a meager fraction of the insurance cost. This is not insurance, this is extortion in which the government is complicit with the fleecing of American citizens.

It's a bet where there is no chance the insurance company loses money. If someone's health crashes to the point where they would need this coverage, they without a shadow of a doubt would be unable to afford the "premium" and would in all likelihood lose "coverage".

Blue Cross requesting a 9+% raise on programs that offer such horrible "benefits" is a cash grab and nothing more. It is laughable that this is even considered "insurance". I have never paid so much for a program that provides nothing. I'll have paid well over \$7k by the end of the year including premiums and expenses and Blue Cross will have covered... a physical and two dentists cleanings.

I am afraid to seek out medical care because every visit comes with hundreds to thousands of dollars in uncovered costs.

If you want to continue to be complicit with the continued defrauding of citizens, by all means approve the raise in rates. I already see that the government is complicit in this crime by penalizing tax-paying Americans who do not buy into this corporate, for-profit health care system.

I could not more strongly express that I think this product is no more than theft, and that Obamacare and the insurance marketplace is a disgusting exploitation of working class Americans.

Sincerely,

Dennis M. Smith
13 Fourth Street
Smithfield, RI 02917

King, Cory (OHIC)

From: sue day <suesday_99@yahoo.com>
Sent: Monday, June 27, 2022 5:58 PM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : Health insurance rate increase requests

Mr. King,

I am stunned the insurance companies are requesting these rate hikes. I have read that during the "pandemic years" routine health check-ups and elective surgical procedures were virtually non-existent. Folks didn't maintain immunizations for kids, didn't have routine annual testing/screenings, avoided hospitals/clinics/doctors' offices.

I have not read that health insurance administrators reduced their salaries during that time. Maybe that happened. I have not read that there were tremendous spending by the insurance companies during those years. And even if everyone who delayed "treatment or care" during the pandemic wanted to catch up, there is limited time and space for all the necessary care to be delivered. It's hard to imagine, with staffing shortages, nursing home closures, etc that insurance companies have spent all that might have been saved during the pandemic and then some.

Health care costs are exorbitant in RI. Taking steps to lower costs should be a priority, but not on the backs of the insured!

Thank you for your time.

Best, Sue Day

King, Cory (OHIC)

From: Kimberly Dieterich <kimberly@springline.yachts>
Sent: Friday, June 24, 2022 3:21 PM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : Policy Increase for Blue Cross Direct Pay

Office of the Health Insurance Commissioner

1511 Pontiac Avenue, Bldg #69-1

Cranston, RI 02920

To Whom It May Concern:

We're writing regarding the notice for increase to BC/BS Direct Pay Customer Policy.

We currently spend \$1,826.67 for the Blue Solutions 1700/3400 Plan for my husband and myself. With BC/BS being the only health insurance available in RI we don't even have a choice.

We were paying \$1,880 for the Vantage Blue Direct. Due to the policy cost, we switched our plan to the above mentioned for a measly savings and a lot less coverage.

Our current policy is still prohibitively expensive to the point where we've discussed dropping our coverage all together and saving \$1,000/mo. for any catastrophic incidents that may arise.

To say I'm appalled would be an understatement. BC/BS wants more money yet the coverage remains the same or worse yet, coverages are dropped and changed to their benefit.

People can barely put food on their tables, afford gas and are struggling to make ends meet. Yet BC/BS has the audacity to ask for an increase from direct pay customers only and not any other plans? Pay more for what? To pay for those already getting government hand outs while the rest of us work 50-60 hours a week and continue to struggling? Unacceptable. How many dropped policies will it take for you to understand people have had enough?

If the rates are increased, we will drop our coverage immediately. I'm done with this cabal guised as health insurance!

Rick and Kimberly Dieterich
3C Spyglass Circle - Hope Valley RI 02832

King, Cory (OHIC)

From: Minh Le <riboating@yahoo.com>
Sent: Friday, June 24, 2022 9:50 AM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : Blue Cross rate increase.

Dear Commisioner,

In your review of the Blue Cross request for a rate increase, I am writing to urge you to consider that according to the U.S Bureau of Labor and Statistic "from May 2021 to May 2022, the Consumer Price Index for All Urban Consumers increased 8.6 percent." Therefore the approximate increase request of 9.6% from Blue Cross is not in line with the CPI figure.

Thank you for your time.

Respectfully,

Daniel D. Le

King, Cory (OHIC)

From: donaldloeb@cox.net
Sent: Thursday, June 23, 2022 4:35 PM
To: King, Cory (OHIC)
Subject: [EXTERNAL] : BCBS - Direct Pay_ Submission of written comments

Office of the Health Insurance Commissioner
1511 Pontiac Avenue, Building #69-1
Cranston, RI 02920

Blue Cross – Direct Pay
Submission of written comments

Dear Commissioner,

Blue Cross & Blue Shield of Rhode Island has filed a rate filing requesting increases in premium rates for the Direct Pay class. I would like to submit my comments.

I think the rate increase should be denied or made drastically smaller than the purposed 9.6%, plus the change in age increase. My wife and I pay 100% of our premiums through health source RI. Currently, in 2022, we pay individually \$727.71, combined \$1455.42. The purposed increase, plus age increase will bring our premium up to \$831.37, combined \$1662.74. A total increase of \$103.66 individually, \$207.32 combined, or 14.24%.

The current cost of medical insurance is out of control and this increase is unacceptable. I ask that you do all that you can to deny or drastically decrease the purposed increase.

Thank you,

Don Loeb
Warwick, RI 02886
[REDACTED]

Office of Health Insurance Commissioner
1511 Pontiac Avenue Building #69-1
Cranston, RI 02920

To Whom It May Concern,

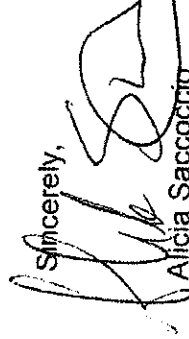
Unfortunately, this all may be in vein, as I'm sure a decision as already been made. However, I feel it is important to let you all know that it is quite a shame to hear that not only deductibles may go up, but co-pays and whole plans by almost 10 percent. We pay more than \$2,600.00 for a family plan, and seems every time we turn around there is a bill sent to us for blood work, xrays, etc. Even with such a high premium, we still pay out of pocket with each doctor visit.

I'm sure you are all aware that food prices have gone up as well as gasoline and every other thing in out lives. Us working, middle class people are barely making it each month keeping up with bills let alone the price hikes.

The increase in health insurance will definitely prove to be a burden on us, and we may have to consider alternate plans for us. We have to decide what is more important, the roof over our heads or health insurance.

Because we are working people, we do not qualify for assistance, so unfortunately its us hard working people will be penalized once again, we never get a break.

I am asking that you do the right thing and not increase prices on the people that are hurting the most.

Sincerely,

Alicia Saccoccio