I am opposed to Aetna Life Insurance Company's request to approve a change to my premium rates for 2017. Aetna has stated two reasons for their request: the overall rising cost of health care services in New York and the discontinuation of the Federal Reinsurance program.

According to research done by the New York State Health Foundation, insurance premiums in New York have risen dramatically and faster than household incomes. The high cost of coverage is felt by both employers and their workers and has adverse effects on New York’s economic growth. Despite its high rate of spending, New York does not consistently demonstrate better quality of care.

Secondly, the federal ACA Reinsurance Program was designed to assist in stabilizing premiums in the individual market inside and outside of the Marketplaces. It was not intended to be another funding avenue for insurance companies longterm. These increased costs, therefore, are not the responsibility of the consumer.

For these reasons, I am requesting that DFS deny Aetna Life Insurance Company's request to increase my premium rates for 2017. Approving an increase to premium rates will not address the systemic failures within the healthcare industry. It also will not ensure the continued solvency, safety, soundness and prudent conduct of the providers of financial products and services; protect users of financial products and services from financially impaired or insolvent providers of such services; or encourage high standards of honesty, transparency, fair business practices and public responsibility that fall within the scope of DFS's mission.
You’re the reason why people hate government and why Donald Trump is winning the election. I am shocked and appalled by you and other corrupt government agencies allowing the insurance companies to get away will one premium hike after another. Not only have I NOT been allowed to keep my doctor (as promised), but my premiums continue to go up and up, even though my wife and I are completely healthy. Do you think it's normal that a couple should need to pay almost $1000/month on premiums, with VERY limited access to physician networks, and high deductibles. This is an outrage, and you are responsible for letting insurance company run wild.

I have had the good fortune of being covered by great and affordable insurance through my union employer, for many years now. However, qualification for insurance is based upon how many weeks you work per year. I became pregnant last September and am about to give birth, and being pregnant in my line of business directly affects what you can and can't be hired for. In conclusion, I have not been offered any acting work during most of my pregnancy and will loose my insurance coverage at the end of June 2016. I have investigated the marketplace options, and any semi-decent coverage is entirely too expensive for my family to cover. That said, as I can't even meet the costs that exist currently for these insurance plans, any rate increase would be catastrophic to my family's finances. I implore you to not only refuse a rate increase, but I would ask you to keep exploring ways to offer lower rates to lower-income or income-variable families.

I am Is my bill going up 23 percent? Sent from my iPhone

Our family is already being priced out of medical care coverage. This has meant delaying needed surgery and scans for over a year because the premiums and deductibles more than we could afford. In turn it meant that when we did get the needed surgery, visits to the dentist for our son were curtailed until medical bills were paid. Increasing insurance rates will only make situations like our worse. In the meantime, insurance company CEO's waltz through their lives with fat paychecks and our representatives have gold standard health care. Two things should happen before rates increase again: 1). All representatives who are voted into office all get their insurance from the public marketplace and experience what their constituents do. 2) The CEO's and CFO's of the insurance companies should stop receiving paychecks that put them in the top income bracket.
I just got a bill from the new Dr. That I HAD to change to from my Dr. Of 30 years. After the insurance which I pay $314 monthly I now need to pay $220 for this visit. How can I afford to go to the Dr? A RATE INCREASE WOULD BE CRUEL..thank you

When is it going to stop!!! 10 percent increase again ,you must be kidding me!!! There has to be another solution !!! You are pricing the honest middle class American as myself out of the market. Sent from my iPhone

I received the letter dated May 16, 2016, informing me of the request to change premium rates for 2017 by 20.5% if approved by New York State Department of Financial Services. I would like to express my opinion that this rate increase should not be approved. My primary objection is that I pay a monthly premium of nearly $1000.00 now and another 20.5% increase to that premium is not going to solve the problem of high medical expense, it will merely give insurance companies more money to then declare a profit. I certainly would like to know where the money goes with this government mandated healthcare and health insurance law. If I add up my monthly premium, plus what I pay out of pocket and subtract out the actual coverage the insurance company provides, I am paying too much now for the coverage I receive. I am sure my overage is either going to pay for someone else that has higher medical expense or into the pockets of the insurance company. I know my physicians and health care providers are not seeing any increase in pay for their services as my bills indicate that the insurance companies are mandating how much they will pay the physician and providers for the services they provide.
ZERO RATE INCREASE, I MEAN ZERO, NADA, NONE!!!!!!!!!!!!!!!!! AND
NO INCREASE IN THE OUT OF POCKET INCREASE LIKE WE HAVE
EXPERIENCE IN THE PAST SEVERAL YEARS since the so called the
AFFORDABLE CARE ACT. I am writing to you to give you my deepest
displeasure of the proposed 13.3% increase in my premium for the upcoming
2017 year. My employer gave me this notice today. Our company will not be
making up the difference in premium increase. If there is no increase in the out of
pocket increase which I doubt will happen, it will cost my hard working family
close to $1,000 MORE PER YEAR. I don't think there should be any rate
increase at all. My premium and OR deductible have RISEN every year since the
affordable care act went into effect. I and most of the real world call it the
unaffordable care act for those who actually work for a living in the private sector
and have to pay a good share of the premium. I can say it maybe an accessible
care act for those who don't have health insurance, but certainly NOT the
affordable care act. When will the government get the real true picture. I don't
think anyone who doesn't works in the private sector gets the real picture of the
state of this economy from our view, the private sector. It is either a RATE
INCREASE or OUT OF POCKET INCREASE every year. IT SEEMS TO ME
THAT WE, THE WORKING CLASS ARE SUBSIDIZING MANY OF THOSE
WHO CHOOSE TO NOT WORK. I am more than willing to help anyone get off
their feet and absolutely willing to take care of anyone who can't or is not able to
work or care for themselves. I no longer want to pay for people who can work
and don't have to work. There could be plenty of jobs cleaning up the city of
winter debris. This is all on the shoulders of the working class. That is ME and
my working brothers and sisters. NO ONE CARES ABOUT US. THE PEOPLE
THAT PAY THE BURDON OF THE POLICIES THAT ARE SUPPOSED TO
BE IN OUR INTEREST. I vote a ZERO INCREASE!!!!!!!!!!!!!! and NO OUT
OF POCKET INCREASE!!!!!!!!!!!!!! Yours truly, One mad, hard working NY
State tax payer.

Good afternoon, I am pleased to take time out of my schedule to write a letter
about my disapproval of such a request. First off, you're not a health company...
you're a money company. And it saddens me that you can't seem to make due
with the allotted $377.65. So I will make it simple. If I see a rate increase I will
terminate this wonderful policy. Thus cancelling the $161, I pay (which I
desperately need) and freeing up the expense of you keeping a record on me. If
government and I were paying you and you actually kept us healthy that's one
thing. But you do not care about the health of the people you just care about the
bottom line. How much is left over for the ceo and trustees to rake in. Those who
get executive insurance packages and get hair-plugs and Viagra covered on there
plans, while I scrounge up the necessary funds just to pay a doctor for one visit;
just for them to schedule me for another visit. How am I gonna pay for this one I
wonder? And that's what I do I wonder, because secondly I do not go to the
doctor. I have had this plan and I never once saw a doctor under it. My last
insurer is being sued. M.M. Sent from my iPhone
Please be advised that we are a middle class family and we work very hard. We barely have enough money to make our basic needs and it is very difficult to pay the premium that we already pay. In fact, we have so much difficulty with it, that we can't even go to the doctor. My husband takes medication for his sugar and his pressure, and we aren't able to get blood work for him. We have not seen the doctor in follow up because we can't afford the visit!!Please do not raise the rates or the situation will become even worse. We work so hard to make ends meet, I don't know what we will do if you make the rates even higher. America is becoming a country where the middle class suffer immensely. We are not eligible for any benefits and we can't afford to pay for Oxford or Aetna. As a result, we cannot receive the care that we need!! Please consider LOWERING your rates so that my husband can see the doctor!!!

I'm very disheartened to hear about the sudden abrupt increase in our insurance plan. I'm 22 years old just started working for this company and already have enough bills, and am not looking forward to a raise in my insurance. I know there are more cost effective insurance plans out there and will be sure to be in communication with my HR rep discussing other plans, unless something is done about this. I don't think we should be in business with an insurance company that raises rates on clients randomly. That's plain unethical. Please do something about this increase or else I will be motivated to encourage another insurance plan within our company.

How shameful to continue to increase health insurance contracts for users while therapists have not received ANY increase in their fees since managed care began and in fact have instead had their fees decreased over the years by every managed care insurance company!!!

We are paying enough for health insurance coverage through the marketplace. I am self employed and I haven't had a rate increase in many years. Why do health insurance companies keep getting rate increases every year? They knew when they proposed these policies that certain government supports would end at specific times and their rates were set according to this. If I have to keep tightening my belt I want them to do the same. There is too much corporate greed.