Inquirer:

Empire HealthChoice HMO, Inc.

Each year for the past several years, BlueCross (and previously with Oxford) have asked for increases about 25%. While gov has typically limited to under 8% annual increases, no one's income rises that much each and my health coverage since ACA has more than doubled. I had individual PPO insurance with Oxford prior to ACA – I paid my co-pay and no more except when i had a minor outpatient surgery. With the ACA, PPO's were no longer available to individuals and may premiums and out of pocket skyrocketed. Now i have to pay $4k in out of pocket, not including copays, before i get coverage. I support a single-payer program and insurance for all. But I can't afford to pay for insurance and then have to pay out of my pocket too. Why isn't the government willing to stand up to insurance and drug companies and get healthcare costs in line like it is in other leading developed nations? Oh wait, you get free coverage as a gov employee so what do you care.

Inquirer:

Empire HealthChoice HMO, Inc.

The rates just keep going up up up up up! And now they are submitting a request for a 25% increase!!!!!!! This has to stop - it's just an unbelievable amount to be paying each month/year.

Inquirer:

Empire HealthChoice HMO, Inc.

I understand that most often, costs rise. But, an increase of 27.6% feels like robbery. Insurance used to have policies which charged high deductibles and low premiums. I already pay $443.36/month. THIS is NOT a bargain premium. Add to that a 27.6% increase and my monthly premium is exorbitant. I could handle a high deductible with a lowered premium. Now, I lose on both fronts. I rarely seek medical care with this model and it frightens me!

Inquirer:

Empire HealthChoice HMO, Inc.

As an individual with rheumatoid arthritis who cannot work all of the time my insurance raise to $700+ would mean I had to get a new insurance plan. I already pay a ton of money to co-pays, $11,500 in the past year as a matter of fact. Unless the new coverage would alleviate that considerably I do not want to see this outrageous raise approved. If NYC wants to see a mass migration of its middle class citizens with middle-incomes, this raise will be a final straw. I get my insurance through Empire HMO 2000 Silver, Blue Cross and Blue Shield. I ask this huge raise not be approved. Thank you for listening, resident of Greenwich Village
Is there a reason you are trying to hurt, punish, bankrupt tax payers? Increasing a premium which was just increased by almost 300% by another 27.6%. Does anyone use common sense in this department? We overpay for poor healthcare as is and now you want to increase it? For what reason? What can you possibly be thinking that makes you think this is a good idea? It's 100% not because healthcare is up because we all know that's bs.

**Inquirer:**

**Insurer:**

**Empire HealthChoice HMO, Inc.**

The proposed change to my premium of 23.6% seems outrageous particularly since my insurance already went up over $50 between 2015 and 2016. It's very difficult to make these payments when one is not in permanent employment (not by choice). PLEASE do not approve this proposed premium rate change.

**Inquirer:**

**Insurer:**

**Empire HealthChoice HMO, Inc.**

We just received a letter in the mail stating that in 2017 our premium may raise 24.9%. We are self employed, owning a small construction company. We currently pay $1,693.70 for a family plan and find it difficult. To raise our premium by 24.9% will be impossible for us to afford and we do not qualify for any assistance. I can say in owning our own business if we raised our prices that much in a year, we would be out of business. We will not be able to stay with Empire Blue Cross Blue Shield if this goes through. I only hope that we can find an insurance that we can afford when the time comes. I am sure that we are not the only ones that would find this very difficult. I hope that when the time come for this to be approved I hope that it is turned down, not just for me but for the thousands of families trying to survive.

**Inquirer:**

**Insurer:**

**Empire HealthChoice HMO, Inc.**

I wrote earlier about Empire's proposed 29.8% increase to my Platinum individual plan. Unfortunately I included the wrong ID number. The number above is correct. I would also like to add that if any increase is approved, this plan should then be required to add an out-of-network benefit which it currently does not have. As I stated before individuals seeking a Platinum plan have few choices in NYC. All of my doctors are with NYU Langone and Empire was the only individual Platinum plan that I could find which is accepted by NYU Langone. It is not right that Empire holds a virtual monopoly on this market in NYC. Thank you.

**Inquirer:**

**Insurer:**

**Empire HealthChoice HMO, Inc.**

These increases never stop and are financially crippling thousands of people. It would be cheaper for many people to have no insurance and pay for their medical care out of pocket, but we can be fined if we don't maintain a policy. The terrible policy I have now doesn't do anything for my health, but costs me $450 a month with a $6,000 deductible. The only way people with these policies can save any money is by never going to the doctor until the problem becomes urgent.

**Inquirer:**

**Insurer:**

**Empire HealthChoice HMO, Inc.**

I got a letter from my insurance company Empire HealthChoice HMO, Inc.

plan name: Empire HMO 4000 for HAS Bronze ST, INN, Pediatric Dental, Dep 25

Individual coverage.

HIOS ID number which is 2016 HOISID 80519NY0160002/ 2017 HIOS ID 80519NY0160002.
Yes, really I had to type that in.

This time they are asking for 27.6% !!!!

It just went up last year by something like 10% so I had to cancel my dental insurance!

My insurance is going to go from $443 to $565

Your job is to make sure that ?Premium rate increases are justified and not excessive?

Dfs.ny.gov/healthinsurancepremiums

This is excessive.

I tried to get the cheapest possible insurance because I really take care of my body and want to use an HSA.

My pay doesn?t go up 26% in a year.

Force the insurance companies to work on inefficiencies and do a better job rather than pass their inefficiencies on to the consumers!

I will change insurance if you proceed with this change and they will lose an insured that only uses the doctor for a checkup every other year.

The website that is referenced on this letter is a great indication of the inefficiencies in the system. The letter says that rates will change in 2017, and the webpage has a bunch of changes indicated for 2015-01. See attached.

Empireblue.com/ratefiling

Inquirer: [Redacted]
Insurer: [Redacted]

5 26 16

TO: DFS:

Regarding: Empire HealthChoice HMO, Inc.
My Empire Benefit Plan: Empire HMO 2250, Silver, Pathway Enhanced

I have individual Coverage

2016 HIOS ID 80519NY0160010 / 2017 HIOS ID 80519NY0160010

Once again, Empire BlueCross BlueShield (parent Anthem) is asking for a gigantic rise in premiums of 23.6%?far more than the average that other companies are asking for. (For 2016, Health insurers in New York filed for average 2016 rate increases of 13.5% for individuals who buy their own insurance, including sole proprietors, and a 14.3% average hike for the small-group market, according to data released by the state Department of Financial Services.)

This demand for an increase that has no basis in reality is all in the name of share holders and the financialization of the country, where only hefty profits matter, not business investment. In fact, no matter how they separate their many companies, ?affiliated foundation,?etc. Anthem, Empire Blue Cross/Blue Shield?s parent, saw hefty profits in 2015. See this Article:

Higher rates, membership fuel Anthem's quarterly profit

By  | April 29, 2015

(Story updated at 2:45 p.m. ET.)

Anthem raised financial guidance for the rest of the year after the Indianapolis-based health insurer posted $865.2 million in profit, a 23.4% jump from the same period last year. Premium rate hikes, large growth among its Medicaid health plans and lower medical claims all contributed significantly to Anthem's profitable quarter, the company said Wednesday. Earnings per share totaled $3.09, well above Wall Street's consensus prediction. Anthem's medical-loss ratio, or the amount of premiums that go toward paying healthcare services and procedures, was 80.2% in the first quarter?down from 82.7% in the prior-year period. Anthem joins UnitedHealth Group and Aetna among the blue-chip insurers that said their medical costs and utilization trends have not increased at all so far this year. First-quarter revenue increased 7% to $18.9 billion!!

Profits dropped some in first quarter of 2016, only because they were so huge in 2015. Profits come from premiums and it is absurd for any business to try to make them go up and up by gigantic percentages?markets fluctuate. Some months, my meager retirement mutual fund loses money, so why does Anthem/Blue Cross expect to never lose a dime in any quarter???? Additionally, and I quote Forbes:? Anthem appears poised to move forward with major plans and changes this year. It made a move last July to acquire health insurer Cigna for $54.2 billion, the largest transaction in the sector in history.?

Why should I pay for a loan and interest to buy Cigna, and why buy Cigna if health care is allegedly not profitable enough? Not to mention, Anthem?s negligence in Cyber security caused a huge breach, which they now seem to want us to pay for in increased premiums. Updated security is part of doing business and if Anthem has billions to buy Cigna, and gigantic sums to pay CEOs, they can invest in their business without charging the insured. In fact, most of our money is to go to HEALTH CARE SERVICES only.

Finally, what product in the world do you buy at a price, and THEN be told the price is nearly 25% more because the company did not make big enough profits? This amounts to bait and switch and nothing more than insurers being asked to make certain a company continues to make bigger and bigger profits, when that is NOT how it works in a free market. No company is guaranteed ever-increasing profits in a free market. Their costs are currently well covered, and this has been well documented in the media. It is excess profits they want us to pay for, nothing more. This is the largest insurer in the nation, and more and more clients, which they have courted and gotten, means more money based on volume, that is how a market works. In fact, they
continue to court more clients, knowing only a small percent have serious medical needs and that more clients, like Cigna's represent more profits.

I would suggest they cut CEO pay and bonuses, and stop wasting money ?marketing? to me, sending me endless letters about signing up to visit a physician online, for an even bigger fee than my primary physician, of course. And, while it may be commendable that Empire and its associates and affiliated foundation give millions to various organizations, such as the [ ] and [ ], this is a tax deduction for them and many of these groups are more political than health related. I would certainly hope that they don't need more profits from my premiums to get these tax deductions. If they want bigger profits, let them cut costs. And negotiate with big pharma MUCH better than they have.

As one of the millions of the self-employed, who it has been well documented use health insurance far less because of high deductibles, etc, I cannot afford an obscene increase like this, although clearly they are trying to game the system by asking for far more than they need, knowing they will probably get less than they ask for. In fact, I used it just once for an animal bite, the urgent care center I was encouraged to visit charged me $250 to take my blood pressure and tell me to go to a hospital. I had to pay this toward my deductible. I ended up paying the emergency room over $1000 in addition, toward a huge deductible. I have to wonder, what good is this policy at all? If they get more than a 5% increase, I will be forced to join the ranks of the uninsured. I now have zero profits, thanks to landlords and health insurers, in a State that is quickly killing what was once a middle class. So save the letters and the postage, Empire, and stop ?marketing? to me for even more expensive ?video care.?

[ ], Brooklyn, NY

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc

If the rate is being proposed to go up for this HMO by 25%, I feel Blue Cross should show both cause why the rates are going up (fuel, salaries, rent) AND show that the average salary of their customers has gone up by 25%. If not for the latter, then the rate proposal is ultimately not sustainable.

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc.

this increase is outrageous and i do not support it, last year it already went up enormously now a 1/4 %? just unacceptable...

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc.

Dear Sirs and Madams, Please find enclosed a letter from Empire. Empire is asking for a 27.6% change in my premium for 2017. My ex husband lost his job in 2015 and is not looking for a new. He is not paying alimony any longer and only pays sporadic child support. I started a dog walking business but I still have very few clients. I have no way of paying an increase of my premium. I hope you can help me with this. 1. The name of my insurer is: Empire HealthChoice HMO, Inc. 2. My Empire benefit plan is: Empire HMO 2000 X, Silver, ST, INN, Pediatric Dental, Dep 25, 3. I have individual coverage 4. My HIOS Identification number: 2016 HIOS ID 80519NY0160008 / 2017 HIOS ID 80519NY0160008 In the letter they say I have 30 days only to comment. I hope to get some help soon! Thank you in advance! [ ]

Inquirer:
Insurer:
Empire HealthChoice HMO, Inc.

I do not agree with the possibility of an increase for my health insurance HMO 600 Gold Plan . . . my wife and I are on a low fixed income and could not afford any increase forthcoming . . . MY Hios ID is 80519NY0160012 . . . Please contact me by U.S Mail regarding this matter.

Inquirer:

Dear One,

My insurer, Empire HealthChoice HMO, Inc., has submitted a request for a 29.6% increase in premium rates for 2017. My benefit plan is Pathway HMO. I have individual coverage. My HIOS identification number is 2016 HIOS ID 80519NY0160012 / 2017 HIOS ID 80519NY1060012.

I am writing to comment on this exorbitant price increase request. I work for a tiny nonprofit with an annual budget of less than $100,000 a year. As you can figure from that number, my salary is significantly less. The only benefit I get for my job (no pension) is my health insurance. How is a small nonprofit with only one staff person supposed to provide health insurance on such a budget when the insurance goes up every year? I have changed my health insurance five out of the past six years because of these ?criminal? rate increases, constantly chasing a more affordable premium that will still provide reasonable care with doctors I know and trust. The Affordable Care Act has done little to nothing to curb profiteering insurance companies from bankrupting individuals and small employers. The nonprofit for which I work is a religious nonprofit. My job is more a vocation, a ministry, than a job. That?s why I dedicate myself to it despite the financial limitations. (I was once a tenured college faculty member. I hold a Doctorate in Education.) I do not believe people and organizations doing good should have to risk bankruptcy because of the greed of private health insurance companies.

I suspect that not even you get a 29.6% pay increase every year. I suspect few if any companies get a 29.6% increase in their budget every year. How is it that anyone could even think to ask for such an increase, let alone agree to it? I would think your job is to protect the people from such corporate greed. Wasn?t the ACA supposed to limit allowable increases in premium rates? What?s going on here?

I urge you to say NO!!! to Empire. Their explanation of why they ?need? the increase is bogus, and anyone with any insight into the salaries of health insurance executives and health insurance policies that deny people vital health care as determined by people who neither know medicine nor the patients knows that the ?need? is bogus. Health insurance companies should be granted no greater premium increase than a cost-of-living increase of the poorest workers. And since they?ve been granted double-digit increases for years, they should have to wait for the rest of us to catch up to them. I recommend they get NO increase at all until that happens. As a matter of fact, a cut in their rates would be much more just.
STOP feeding corporate greed. Say NO!

Let’s civilize health care in the U.S.A. the way it is in just about every other developed country in the world. Dedicate yourselves to UNIVERSAL Health Care, Medicare for All instead of constantly approving ?criminal? premium rate increases for profiteering health insurance companies.

Sincerely,

Middle Village, NY 11379 (home address)

"War destroys. And we must cry out for peace. Peace sometimes gives the idea of stillness, but it is never stillness. It is always an active peace. I think that everyone must be committed in the matter of peace, to do everything that they can, what I can do from here. Peace is the language we must speak." Pope Francis

New York, NY 10014

(p); (fax)
Inquirer:

Empire HealthChoice HMO, Inc.

This proposed increase of 24.9% is absolutely absurd. People cannot afford this increase!

Inquirer:

Empire HealthChoice HMO, Inc.

To whom it may concern, Allowing the insurance Companies to raise my already high premium of $1382 a month for me and my husband by an additional 25% is absolutely ludicrous. I'm sorry if they can't run their company efficiently but punishing the policy holders is not the answer. These companies need to be privatized because you have a HUGE conflict of interest between the insured and the share holder. I'm in awe this is actually being considered. I will then be unable to afford this insurance and WILL cancel it. Let's get some common sense behind these decisions or it's going to collapse. Sincerely,

Inquirer:

Empire HealthChoice HMO, Inc.

Dear Madam/Sir,

I am writing to you regarding a 16 May letter that I just received from Empire Blue Cross Blue Shield, advising that they are proposing a premium rate increase of 27.6% which would increase our monthly premium by $305.

My husband and I are both freelancers and find such a large, one time increase outrageous. If such an increase were approved by the DFS, we would very likely be forced to cancel our plan with Empire Blue Cross Blue Shield.

We had a disastrous experience with United Healthcare through the Marketplace / Obamacare and thought we had finally found a decent and somewhat affordable plan with Empire Blue Cross Blue Shield, although we are permanently paying out of pocket for co-pays, deductibles, specialists, prescriptions, etc. which makes the word 'affordable' kind of a joke.

Below please find the following information about our coverage -

1. Our insurer is Empire HealthChoice HMO, Inc.
2. Our plan is Empire HMO 2000, Silver, ST, INN, Pediatric Dental, Dep 25
3. Our plan is Individual
4. Our HIOS identification number is 2016 HIOS ID 80519NY0160008/ 2017 HIOS ID 80519NY0160008

We sincerely hope that the DFS will not approve this increase.

Stop the madness of the cost of healthcare in this country!

Thank you.

Sincerely,

Inquirer:

Empire HealthChoice HMO, Inc.
I am writing to voice my concern over the egregious 23.6% increase in rates anticipated for 2017. This pushes the cost of insurance completely out of any affordable price range and leaves me falling completely through the cracks. I am not quite poor enough to be eligible for government subsidy but cannot afford to be paying an additional $120 a month for the plan I just started 6 months ago.

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc

The requested increase is insane. Last year they were given an over 20% rate increase, this year they request a 27% plus increase. This along with the continued increases in co-pays and the like are making insurance impossible to afford. Their costs could not possibly be increasing to justify this increase, the increase should be denied. The option to change plans is extremely difficult with the number of options - it is next to impossible to make a choice that fits one's needs.....for the last several years I have tried to navigate the options without much success. This must all be simplified.....we as a nation, a state can't continue like this. No one will be able to afford this insurance soon.

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc.

I was shocked to receive a letter from Empire stating they have requested another increase to the rates, this time 29.9%. Last year they received about 14-15%. How is this possible? I have had diminished service with my platinum level policy. Of 7 doctors I started with, only 2 still accept the plan. None of the new specialists my primary care recommended accept it anymore. For example, I had a choice of 2 dermatologists, one who had such terrible ratings nobody would go to her, and the other right out of school. She did not have the experience to deal with my health questions. Furthermore, a 29.9% rate increase has no relation to inflation in the healthcare industry or the economy as a whole. Empire has continued to make strong profits each year, and it did before they were given the 2015 increase. For this insurance, I cannot go out of network, or even get full service outside my 28-county area. I'm not covered 2 minutes across the river or in NJ or in the rest of NYS. I feel like a real second-class citizen, and the only way you will give them this kind of an increase is if somebody (or a group of people) are taking bribes in Albany. I wrote to you last year about the previous increase and never heard back. Please respond this time, and not with a boilerplate letter. I would like a name and contact number for somebody so I can follow up by phone or email please. Thank you for your time.

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc.

I find it outrageous that Empire Blue Cross Blue Shield is asking for an increase of 27.6% to the individual premium cost. Last year they got a 15% raise and individual premiums went from approx. $450 to to $550. Now they want another increase which would raise the premium to almost $700 a month which is unaffordable to most lower and middle income people. I thoughtnthe Affordable Care Act was supposed to reign in the rising cost of health care, but instead it seems to be accelerating it. Thank goodness for the subsidies but there is still no excuse for the health insurers to raise the cost of premiums to excessive and unaffordable highs.

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc.

I am submitting my comment to strongly oppose this outrageous rate increase to our premium. This affects hard working individuals who don't have access to group plans and already receive sub-par services despite the very high cost of premium. I am currently paying $750 per month and the 29.8% increase would make my premium unaffordable. As it is we are forced to work with a dwindling network of providers and too many subpar drugs that we have to settle for because brand names are not covered. I urge you not to approve this rate increase and consider the thousands of people who would be highly affected by this.

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc.

Every year since Obama care was passed my rates have gone up and services have gone down. Now they want 20% more for 2017. It is wrong to required us to buy insurance that goes up 20% or more every year. My health care cost have gone up more than 60% over
the past 3 years. I object to any further rate increases and you should not allow them to raise rates in 2017. Send them a message, enough is enough, we not going to pay it, were not going to allow it. Voters are watching...

Inquirer:

Insurer:
Empire HealthChoice HMO, Inc.

Empire Blue Cross Blue Shield is proposing a 27.6% premium increase. That's an incredible hardship on myself and everyone I know. Lets see a transparent analysis of EBCBS's profit and loss over the past decade. Lets start with a 27.6% salary reduction for all EBCBS's managerial staff earning over $500,000 per year. Please protect us consumers.

Inquirer:

Insurer:
Empire HealthChoice HMO, Inc.

A 25% rate hike is INSANE and unfair. The rates are already astronomical as is - I'm paying $440/month for a very basic plan, and will absolutely go with another provider if you raise the rates as much as proposed.

Inquirer:

Insurer:
Empire HealthChoice HMO, Inc.

I received a letter from Empire Blue Cross Blue Shield dated May 16, 2016 advising me of a premium request to DFS for 2017. My current monthly premium is $507.33 without dental coverage and a $2250 annual deductible. If the premium increase for 2017 is approved, my monthly premium will have increased by 73.6% since 2014! Please understand this is a difficult financial strain, and I ask you to reconsider the proposed percentage rate increase of 23.6% requested by Empire for 2017.

Inquirer:

Insurer:
Empire HealthChoice HMO, Inc.

I received your letter dated May16,2016 regarding the rate increase. I would like to speak to a representative regarding this matter. As of now, I have the GOLD plan but will reduce it to a lesser plan because of this increase. This is a rather high premium for me to pay especially with the increase and would appreciate someone to contact me. Thank You! Please feel free to email me with the above email address or cell.

Inquirer:

Insurer:
Empire HealthChoice HMO, Inc.

I RETIRED AND NOW LIVE ON A FIXED INCOME. LAST YEAR THERE WAS A RATE INCREASE OF OVER 17.5%, NOW A POSSIBLE 27.6% INCREASE. THIS WAS SUPPOSED TO BE AFFORDABLE HEALTH CARE, BUT HOW AM I SUPPOSED TO AFFORD THIS INSURANCE IF WITHIN 2 YEARS THE RATE WILL INCREASE OVER 45%? I SEE MY DRS BEING PAID LESS AND LESS DRS ARE PARTICIPATING, SO IS THE INSURANCE COMPANY MAKING MORE MONEY THAN THEY ARE REPORTING? THIS IS OUTRAGEOUS, WHAT HAS HAPPENED TO OUR COUNTRY AND HEALTHCARE IN PARTICULAR? PLEASE DO NOT APPROVE THIS HUGE RATE INCREASE. IN ADDITION INCREASING THE DEDUCTIBLES, COPAYS, COINSURANCE, BENEFIT LIMITS AND/OR OUT-OF-POCKET MAXIMUM AMOUNTS WILL JUST ADD MORE BURDEN TO THE INDIVIDUALS THAT THIS PROGRAM WAS SUPPOSED TO HELP.

Inquirer:

Insurer:
Empire HealthChoice HMO, Inc.
March 28th, 2016

From: (father)
Policy registered under infant: [redacted]
Insurance Policy I.D. Number: [redacted]
Email: [redacted]

New York State Department of Financial Services
HIOS ID: 2016 HIOS ID 80519NY160046/ 2017 HIOS ID 80519NY0160046

To Whom It May Concern,

I’m writing in opposition to Empire HealthChoice HMO Inc. premium increase to my Platinum Child Only benefit plan.
The coverage is for my two children [redacted] and [redacted] only. Date of Birth 10/29/15.

I obtained health coverage through an agent of Empire in November 2015 upon the birth of my children. Four weeks after becoming a member, I received a notice of a premium increase effective within a week of receipt of the letter, all this without prior notice of the proposed increase or an opportunity to comment/oppose on the increase. Please find attached the original increase letter dated December 18th, 2015 as well as the appeal written to Empire in this regard and the response received. Please note the options given within a week of rate increase: 1) pay the higher rate or 2) obtain alternative coverage.

This abuse of superior bargaining power on the part of Empire has already left a new family of infant twins under increased financial strain. Prior to the birth of my children I did extensive research on policies and coverage and chose Empire for specific financial reasons that would make it affordable yet cover my children's medical expenses.

I recently received a second letter of an additional proposed rate increase in 2017 of 29.3%, which if approved would leave my family under even greater financial strain. I am attaching the letter here as well.

I propose that Empire use their considerable resources to find alternatives to cover their growing expenses and not be granted another opportunity to increase my rate twice within a year of becoming a member.

Sincerely,

[redacted]

A new father

Inquirer:

[redacted]

Insurer:

Empire HealthChoice HMO, Inc.

To Whom It May Concern:

We are insured by Empire HealthChoice HMO, in the Pathway Enhanced Network. We have individual coverage. Our HIOS ID # is 2016 ID 80519NY0160014/2017 HIOS ID 80519NY0160014.

We’ve just received noticed that Empire is requesting a 29.8% rate increase. TWENTY NINE POINT EIGHT PER CENT!

For many years we’ve had private insurance (we are freelancers) through Empire BCBS. Every year, like clockwork, they raised the rates, and in ten years our premiums quadrupled until they were more than $3000 a month! Yes, that is correct: more than THREE THOUSAND DOLLARS A MONTH. Since the ACA came into being, we’ve been able to switch plans and pay lower premiums (though some of that savings is offset by additional, and higher, copays, as well as coinsurance). And what we’ve seen is that, just as before, the rates go up and up and up. If we are hit with annual increases of 29.8%, in just three years we’ll be back where we were before the ACA, paying well over $3000 a month.
The letter from Empire gives two reasons for their request to increase premiums. We want to draw your attention to the second sentence in the second reason (we’ve added the italics): “In 2017, there will be coverage changes to all of our individual plans. The changes will include new prescription drug processes as well as changes to some deductible, copays, coinsurance, benefit limits and/or out-of-pocket maximum amounts.”

Does that sentence say, “Copays and coinsurance amounts will be decreased, and benefit payments will increase, so we need to make up the potential losses by increasing the premiums”? No, it does not. And since it does not, we strongly suspect that “changing” means that our out-of-pocket expenses?our copays and coinsurance?will be going up, while their benefit payouts will be going down. If we’re right, how is that an explanation for increasing premium rates? Of course, we could be wrong. It’s still not an explanation, no matter how you slice it. An the truth is we don’t trust BCBS to adequately assess their position or decide where to make up losses. Perhaps a rate increase of some percentage is necessary. But 29.8%? Really? We suspect that owners of individual plans—people like us who do not have employers to contribute—are hit disproportionately hard. And from what we understand, Blue Cross executive compensation is pretty high; maybe some executives could take a 29.8% pay reduction.

We ask you to look deeply at BCBS’ outrageous request. If you find an increase is justified, please set it at a rate that won’t hurt consumers so badly. Surely there must be other ways to cut costs and minimize losses.

Sincerely,

Brooklyn, NY

Inquirer:

Insurance:
Empire HealthChoice HMO, Inc.

My insurance provider raised their rates 14% last year. They are now requesting to raise their rates another 25% this year. I strongly object to these rate increases. My insurance costs have already DOUBLED since Obamacare. Before Obamacare I paid $200/month. I now pay over $400/month. With this new increase I will be paying more than $500/month. Please do not allow this to continue. Say NO to this rate increase.

Inquirer:

Insurance:
Empire HealthChoice HMO, Inc.

The proposed rate increase on this health insurance plan is unbelievable. At a 23.6% increase, my plan would skyrocket from a premium of $1014.66 a month to $1254.12. This compounded with what is already a high deductible of $2250 for an individual or $4500 for a family would make this insurance unsustainable. I am unsure how these companies expect people to continue to be able to afford health care at these astronomical prices. If I were to hit my deductible in a year, I would already be paying out almost $18,000 in health expenses. That is nearly 1/4 of my annual salary spent on just insurance, and that's BEFORE they even agree to cover anything as I must first meet my deductible before the insurance company starts paying out on my plan. The affordable care act was supposed to help make health insurance affordable for everyone, please don't let these private companies take that away from us again by hiking up the prices this high, or I fear my family and I will not be able to provide ourselves with insurance much longer.

Inquirer:

Insurance:
Empire HealthChoice HMO, Inc.

The proposed increase to health insurance plans, which appears to be happening across the board, is absolutely ridiculous. As a nation, we have not had sufficient access to quality health insurance for decades. Now, we are being forced to have health insurance and those of us who are not receiving government assistance are paying ridiculous amounts. The health insurance companies can't keep afloat because the executives are used to receiving unbelievably large salaries. Make cuts internally, don't raise the rates for full price paying members. Ask for more government subsidy, don't raise the rates for people who are already paying a high premium. Additionally, the rates were raised less than a year ago. Rest assured that if the intention is to raise rates by 29% annually, the majority of Americans will choose to pay the penalty for not having health insurance and/or pay for purely catastrophic policies and/or
travel elsewhere to receive treatment. Continue in this direction and lose all your paying customers. Good luck to you trying to make up the difference with the government.

Inquirer:

Insurer:
**Empire HealthChoice HMO, Inc.**

Dear DFS

my current BCBS monthly rate/charges for individual health coverage is $645.66 per month

BCBS has requested an increase of 29.6 % for next year ( my new rate if they stop there would be $836.77 )

has anyone noticed this is effectively a thirty percent increase all at once?

I cannot believe this outrageous proposal
With this increase Empire BCBS is effectively asking us, the insured, to either drop coverage or downgrade coverage

Please do not allow this increase

Thank you

Insurer:

Empire HealthChoice HMO, Inc.

My policy is Empire BC/BS an Anthem Co. Was not a choice in the pulldown menu above. As a NYS Freelancer, I am struggling to pay my insurance now over $500.00/monthly. I joined Freelancers Union to help bring our costs down. Now it's right back up to almost $700.00/monthly if the 2017 increases go through. Please help us!

Insurer:

Empire HealthChoice HMO, Inc.

I am self-employed and not using the exchange, and do not receive any subsidy. This 29.8% proposed rate change is outrageous. I already pay a lot ($750/month) for a premium policy (platinum, no deductible) to protect myself and my out of pocket expenses, but this rate change makes it nearly impossible for self-employed individuals to maintain that type of coverage anymore...which is totally unfair. With the affordable care act, freelancers like myself have already had better options like the freelancers union insurance and non HMO alternatives taken away...this will make having good coverage for self-employed people completely prohibitive.

Insurer:

Empire HealthChoice HMO, Inc.

The fact that you want to raise the rate of insurance 25% next year is absolutely absurd and cruel, since this is regarding the health of your customers. The rate has already gone up so much every year and my benefits keep going down. It's a disaster. If the rate is raised this much, I will be getting my insurance elsewhere. Shame on you.
Inquirer:

My name is [name]

I am writing to request the REJECTION of the Empire BlueCross BlueShield rate increase for 2017. A 27.6% rate increase seems outlandish and irresponsible to the consumer who may be forced to get inferior coverage or a higher deductible plan - which in turn causes financial set backs, anxiety for my family and frustration towards our health care system.

My insurer is Empire HealthChoice HMO
My Empire benefit plan is Empire HMO 2000, Silver, ST, INN, Pediatric Dental, Sep 25
I have family coverage for my Wife and myself
My HIOS id # is: 2016 HIOS ID 80519NY0160008 / 2017 HIOS ID 80519NY0160008

Thank you for taking into consideration my concerns when deciding to reject or accept the rate increase request. BlueCross BlueShield does not need any more profit from the individuals who are simply trying to have basic coverage and remain/promote healthy lives.

Sincerely,

Inquirer:

I do not understand how in the two years I have been enrolled in this plan, my premium could increase by a whopping 44 percent...14 percent last year, and now DOUBLE again to an additional 29.8 percent for 2017. How could it possibly be that costs have escalated that much in a two year period. This is simply a veiled attempt for the insurance company to increase it's own profits at their members expense, literally! When I enrolled my premium was approximately $650. Now it will be close to a $1000 a month for just for myself. This is simply outrageous and I hope that this increase will be reconsidered by DFS. I have also reached out to Senator Chuck Schumer to add his input into this disaster.

Inquirer:

I do not understand how in the two years I have been enrolled in this plan, my premium could increase by a whopping 44 percent...14 percent last year, and now DOUBLE again to an additional 29.8 percent for 2017. How could it possibly be that costs have escalated that much in a two year period. This is simply a veiled attempt for the insurance company to increase it's own profits at their members expense, literally! When I enrolled my premium was approximately $650. Now it will be close to a $1000 a month for just for myself. This is simply outrageous and I hope that this increase will be reconsidered by DFS. I have also reached out to Senator Chuck Schumer to add his input into this disaster.

Inquirer:

Dear Sir/Madam, I am writing in regard to the proposed 25% rate hike proposed by my health insurer Empire for the Empire HMO 2000 Silver Plan I have for my family. Current monthly premium is $1577.19 for me my wife and my son. Honestly proposed hike of 25% is outrageous. This plan has a high deductible, high copay, labs we have to pay out of pocket and pharmacy prescriptions are barely covered and must be filled through an online vendor of Empire's choice. What I am saying is this plan is very poor already but being an individual who owns their own business this is what I am left with. If anything these premiums should be going down not up. These insurance company ghouls care about one thing and that is a PROFIT. These outrageous premium hikes need to be stopped. I have been paying for my own insurance for 10 years now. 9 years ago our plan had gone up to about about $1800. After that we had to find cheaper insurance and over the years we did but with less benefits. When my current plan was introduced it was about $1300. That's great right? Turns out I get far less from my new plan. The main difference from 9 years ago to today is I used to be able to choose my doctors, there were no deductibles, low copays and prescriptions were mostly covered. Now the prices are rising again all the while getting far less from my current plan. If the proposed hike goes into effect my plan will be about $1972 per month which is insane. That could be a mortgage payment. Apologies for the rant but these prices are already out of control. Raising premiums would be really tough. Thanks for listening.

Inquirer:

Inquirer:

Dear Sir/Madam, I am writing in regard to the proposed 25% rate hike proposed by my health insurer Empire for the Empire HMO 2000 Silver Plan I have for my family. Current monthly premium is $1577.19 for me my wife and my son. Honestly proposed hike of 25% is outrageous. This plan has a high deductible, high copay, labs we have to pay out of pocket and pharmacy prescriptions are barely covered and must be filled through an online vendor of Empire's choice. What I am saying is this plan is very poor already but being an individual who owns their own business this is what I am left with. If anything these premiums should be going down not up. These insurance company ghouls care about one thing and that is a PROFIT. These outrageous premium hikes need to be stopped. I have been paying for my own insurance for 10 years now. 9 years ago our plan had gone up to about about $1800. After that we had to find cheaper insurance and over the years we did but with less benefits. When my current plan was introduced it was about $1300. That's great right? Turns out I get far less from my new plan. The main difference from 9 years ago to today is I used to be able to choose my doctors, there were no deductibles, low copays and prescriptions were mostly covered. Now the prices are rising again all the while getting far less from my current plan. If the proposed hike goes into effect my plan will be about $1972 per month which is insane. That could be a mortgage payment. Apologies for the rant but these prices are already out of control. Raising premiums would be really tough. Thanks for listening.

Inquirer:
Attention of DFS

1 - Insurer > Empire HealthChoice HMO Inc
2 - Plan > HMO 6000 - Bronze | (the ID card say plan 254
3 - Coverage > Individual
4 - HIOS ID > 2016 HIOS ID 80519NY0160004 / 2017 HIOS ID 80519NY0160004

I find the notice of Premium Rate Increase of 27% absolutely outrageous!! I'm a very healthy individual of 46 y.o. of age, which requires a Dr. visit for regular check up once a year, and I already had about a 10% Premium increase from 2015/16. When I asked the reasons, they said that rates are based on general public health and they get balanced between healthy and un-healthy individual, and also the rising cost of medical institution and medicines.

The system of health insurance is a failure, it should be only one rate for all, or a portion of your income, paid with taxes, like every other civilized country in the world.

It's ridiculous that I have to pay $ 5247.6 a year, just to live with the terror of an emergency, and also because my life which doesn't incur to be involved in the SAD diet (Standard American Diet), where the American corporate food industry start poison their citizen at early ages, creating the large unbalance of health problems between individual who care about what they eat and not.

At times when I want to have someone notice the phenomenon, all I have to do is to tell them that America | USA is the only place on earth where "poor" people is fat! Why: because of disgusting foods sold at 99cents like Mc Donald breakfast or others brands.

Sorry for the rant, but I'm totally against any Premium rate Increase!!

Thank you

Skype: [redacted]
Ph. +1-[redacted]

Inquirer:

Insurer: Empire HealthChoice HMO, Inc.

Please explain to me what part of affordable is the threat of raising much needed health insurance by 29.6%!!! What other industry has the hubris to give themselves such a raise at the expense of those they serve! Health care is not a luxury it is a necessity. SHAME ON YOU! As someone who is too young to retire and too old to rehire, and currently making do on my $425.00 weekly unemployment as I continue to be ready, willing and able to work -- I am in the untenable position of being squeezed to death between much needed health insurance, much needed housing, paying taxes and generally being a good citizen who has contributed to society all my work life. Again, SHAME ON YOU! Do not approve this hijacking of health care coverage. After digging deep into my pockets after I lost my job (agency outsourced to a 3rd party provider, all jobs were eliminated) I recently elected a managed health care plan provided by Empire BCBS as the only plan that my three longstanding providers accepted. Mind you, this is an HMO! Imagine my shock to learn, I will not be able to afford a managed health care plan should this rate hike go into effect. DO NOT APPROVED THIS PROPOSED 29.6% INCREASE

Inquirer:

Insurer: Empire HealthChoice HMO, Inc.

I urge you to reject Empire's proposed rate increase. Today I received a letter announcing Empire plans to increase our premiums 29.8%, from $2139.67 a month to 2777.29 a month. That's a $7651.46 increase for the year for a yearly payment of $33327.48. The cost of this insurance plan alone is 1.65 times the U.S. Federal Poverty Guidelines for a family of 3. If this rate increase goes through, we will be dropping this insurance plan. Thanks for your consideration. (2016 HIOS ID 80519NY0160014 / 2017 HIOS ID 80519NY0160014)

Inquirer:

Insurer: Empire HealthChoice HMO, Inc.

I received a notice that my rate is going to increase by 27.6%. That is an exorbitant increase for a health insurance plan. As a small business owner and entrepreneur, this is asking for an exceedingly high monthly cost for me to pay out of pocket.
In your notice, you list some of the following things as reasons for my rate going up:
- Changes in the federal transitional reinsurance program: what is this?
- Changing pool of customers: Is this really a valid reason? Please explain why is that something my premium should go to pay for?
- Your letter doesn't provide sufficient details.
- Experience with provider networks: what does this mean and why do I need to pay for it?

The letter also mentions there will be coverage changes to all individual plans. How will my coverage be changed? Am I going to receive less coverage for more money? Am I going to receive more coverage for more money?

What are the alternatives to paying a higher rate on my insurance? This letter is almost useless in explaining any details that the average american would understand.

Please find below the information you require from me:
1. Name of insurer: Empire HealthChoice HMO, Inc
2. Name of Empire benefit plan: Empire HMO 2000, Silver, St, INN, Pediatric Dental, DEP 25
3. I have individual coverage.
4. HIOS identification number: 2016 HIOS ID 80519NY0160008/ 207 HIOS ID 80519NY0160008

FYI: I visited the website listed that contains a "plain english summary of rate change". There were so many documents and plans, I have no idea what I am looking for and I hate to see what the actual documents contain as 'plain english'.

If I don't get sufficient information regarding the above, I plan on taking this to my NY state senator so that proper action can be raised in congress. To receive a notice that a rate is going to be raised by 27% is absurd when inflation hovers around 3%.

Thank you,

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc.

I received notification that CareConnect was requesting a 27.6% rate increase in my case, 33% in the case of my husband. This is outrageous. We're getting less service, for one. Example: My mother got breast cancer at age 47 and died of it later. Because of that history, I am supposed to get both a mammogram and a sonogram. But last year -- my first with Empire Blue Cross Blue Shield -- was the first time my sonogram was not fully covered; I had to pay $250 out of pocket. This approach defies logic; instead of encouraging preventative care, this system discourages it, leaving us all to pay for the consequences of full-blown cancer (or pick your illness) down the road, costing us all more. Second, I'm 60 years old and self-employed. My various income streams are dwindling. Insurance is now my biggest monthly expense. If this is approved, it'll be $707/month instead of $553, which was already a stretch. And finally, from everything I've read, there has been no break put on the astronomical rate increases of insurers (and pharmaceutical companies, whose recent business practices are even more outrageous). I see this as price gouging. Please make it stop!

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc.

Empire raised their rates in 2015 by 12.6%. There is no possible justification to approve an additional increase of 29.8%. This increase results in an additional $223.72 per month for each of us. This will cause us to have to change our insurer and start, once again, with new medical professionals who will accept a new plan. It is wrong for companies to secure your confidence only to come back and rape you with exorbitant rate increases. As the industry is already limiting the services and quality of services they provide, regulators should be more concerned with the proper and appropriate business practices that are equally fair to the consumer as well as the corporations they are responsible for regulating. Increasing Empires profits by severely strapping its members is neither a winning combination, nor is it the right thing to do!

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc.
My current monthly premium is $590.76. Expensive but I am happy with my care options. Empire is asking for 29.8% increase so monthly that would be around $767. or over $2,000. a year increase. How many people can afford that? The costs are so inflated. Can't we work on abuse within the system vs. asking working people to pay MORE?

Inquirer:

Insurer: 

Empire HealthChoice HMO, Inc.

I understand that most often, costs rise. But, an increase of 27.6% feels like robbery. Insurance used to have policies which charged high deductibles and low premiums. I already pay $443.36/month. THIS is NOT a bargain premium. Add to that a 27.6% increase and my monthly premium is exorbitant. I could handle a high deductible with a lowered premium. Now, I lose on both fronts. I rarely seek medical care with this model and it frightens me!

Inquirer:

Insurer: 

Empire HealthChoice HMO, Inc.

To whom it may concern: Empire HealthChoice HMO is my insurer? I am an individual on the HMO 2250 Silver plan in New York City. Apparently, they have requested a rate increase. I respectfully request that you do NOT grant the increase? and what is more, that you do what is necessary to refrain from putting the onus on the consumer to spend more as we continue to receive less. In addition to my monthly premium, I pay a sizable deductible before any assistance kicks in. My expenditures are more than ever and my coverage is less? and I am not able to freely choose my doctors on this plan? I must stay within their limited network. This is unhealthy and unconscionable. As it stands, the ?healthcare? system in NYC is not about the health and wellbeing of individuals, it is about the business and profit of providing medicine and medical services. Please inspire insurance companies and pharmaceutical companies to bring down the egregious costs to consumers rather than allowing them to increase our expenses while decreasing our coverage. Thank you for your consideration,

Inquirer:

Insurer: 

Empire HealthChoice HMO, Inc.

A 25% rate increase? Unaffordable, untenable, unacceptable. It's outrageous.

Inquirer:

Insurer: 

Empire HealthChoice HMO, Inc.

The proposed rate increase is outrageous. The networks are poor, their customer service and computer systems are a joke and they do not really pay for much of anything until you have spent an amazing amount of money. How can they possibly justify this level of rate increase when the overall inflation rate has been basically flat. Isn't time for insurance companies to become more efficient and find ways of lowering costs by working with the medical industry? If you grant them outrageous rate increases you will never force them to work to lower costs and improve patient outcomes. The most obvious solution is to remove these middlemen and provide medicare for all, allow for medicare to negotiate drug prices and change the way doctors and hospitals are paid. My family, while on vacation has used the healthcare services in Canada and Switzerland. How do these systems manage to provide superior care for so much less money? Maybe it is time to challenge the insurance companies and healthcare providers to try harder to find better solutions. Continuing to grant rate increases will not achieve this goal.

Inquirer:

Insurer: 

Empire HealthChoice HMO, Inc.

This is an outlandish request! They want to raise our premium 27.6%. We've already paid an increase of over 10% for 2016. We are freelance and we didn't even make that much more on our income last year. If we now caught up with that and also made the 27% more then I am the Queen of England. And we have fewer benefits each year. Basically what was once a PPO has become a kind of Major Medical policy, one which would help us if we were threatened with a fatal illness and which already incentivizes us not to have preventative care. The Obamacare legislation that entitles us by law to some minimums of preventive care hardly costs what we are already paying. The insurance company lies and cheats, claiming that a blood test or x ray costs $568. But they are kindly charging us
only $68. Everyone knows they negotiate with the providers and probably pay them $20. over that. We are not idiots. We are educated and we know when we are being lied to. I suspect that they are requesting 27% so that they can compromise and take an increase of 10%. And we are not even going to make that much more. (The inflation rate is less than 2%, so they say). Medical care is not something that we can choose not to buy. And in this country the health companies can do whatever they want. It is basically a kind of extortion on people's health. Is there any purpose in wiring you about this? Do citizens have any rights at all? It will be interesting to find out. But thanks for asking, I guess.

Inquirer: 

Insurer: Empire HealthChoice HMO, Inc.

To Whom It May Concern,

I am writing to express my complete indignation at the proposed 29.6% increase for 2017 premiums in the below described policy with Empire Health Choice HMO Inc. This follows a whopping 36% increase which we, who make very little money as artists and educators, had to absorb between 2015 (monthly premium $542.88) and 2016 (monthly premium $738.32). All of this when the national inflation rate is LESS THAN 2.5% and our incomes continue to decline!

How dare you exploit people in this manner? It seems that its OK to guarantee the health of insurance and pharmaceutical companies at the expense of the working population that struggles to make ends meet. Where will this end?

Inquirer: 

Insurer: Empire HealthChoice HMO, Inc.

We are outraged by our insurance company's proposed increase. They just raised our premium 5 months ago by a substantial amount. This new proposed amount will force us to cancel our policy as we can't keep paying for what we feel is a useless policy. We had decent insurance at a reasonable cost but lost it thru the ACA. Now we're forced by law to have a policy that is exorbitant with ridiculous deductibles. We still go to our private doctors and self-pay because no decent doctor in this area will take our insurance. They say welfare pays better. When my wife needed a referral for a colonoscopy she had to contact Empire to get a doctor they would approve of because our Doctor can't do a referral if they don't take our insurance. The doctor Empire assigned her to refused to give my wife the referral until he had done all kinds of tests that he said were necessary. He also started writing all kinds of expensive prescriptions. My wife went along with his recommendations so she could get the referral. After she finally got the referral and had the colonoscopy done, she returned to her private doctor and found out she didn't need the prescriptions or the tests this other doctor recommended. Then the insurance company informed her the tests were unnecessary and refused to pay anything for them. As she investigated further she found out that the prescriptions she does need were costing her more by going thru insurance than if she had just used the CVS discount card. So as of this point her sleuthing has led us to the conclusion that this insurance company doctor makes his money by getting kick-backs from the testing facilities and the pharmaceutical companies for unnecessary tests and prescriptions. So we're getting ripped off every way possible by the insurance company and the doctors they send clients to. To increase their premiums is a slap in the face to hard-working, self-employed people like us. Add to that the cost of our private doctors who let us self-pay and its just unmanageable at this point. Please don't allow this increase to go thru.

Inquirer: 

Insurer: Empire HealthChoice HMO, Inc.
Insurer: **Empire HealthChoice HMO, Inc.**

Before Empire raises premium costs it needs to develop clearer communication and systems between providers, clients and Empire. We as a family have spent hours on the phone working with Empire to rectify errors in charges and coverage. These kind of errors waste valuable time and resources. Additionally, many many hours are spent processing the referrals. If this process was streamlined, money could be saved. Thirdly, I suggest offering incentives for going paperless in order to reduce the money spent on paper and postage and the personnel it takes to get a document created and in the mail. Please work on fixing these resource drains before you increase the premiums paid by the consumer.

Inquirer:

**Empire HealthChoice HMO, Inc.**

As a household with two hardworking, college graduates and self-employed New Yorkers (in business and self sufficient for 16 years), I find it incomprehensible to be facing a rate hike of 29.6% in the coming year. We are not low-income. We are not wealthy. We are stuck in the in-between income strata that does not qualify for subsidies. I thought this was supposed to be Affordable care? We are both in our early 50s and it seems that just when we reach the point in our lives when we really need secure, reliable healthcare, instead we are expected to somehow find an extra $4,585 next year. It’s bad enough that we struggle to keep seeing doctors we've entrusted with our well-being for decades (no out-of-network coverage). Deductibles are high. Networks are limited. This premium increase request is audacious and untenable. These companies have significantly increased enrollment among the previously uninsured under ACA. Please protect middle-class consumers by doing the right thing. Do not approve a astronomical increase that will compromise the health and financial stability of our family and many, many others.

Inquirer:

**Empire HealthChoice HMO, Inc.**

I'm not of Medicare age. I'm not employed by any company. I'm a divorced self-employed artist. Over one half of what I make in a year goes to insurance premiums and medical care and now I receive notice they intend to raise the premiums 27.6%!!!! I spend an inordinate amount of my time just trying to reach this company by telephone. It seems obvious to me that the systems in place to serve those who have insurance policies is hugely inadequate. If Empire Blue Shield/Blue Cross wants to cut costs, they can start with the paperwork that tells me I can get this shocking info in Tagalog or Chinese. They can streamline their process so that in order to be cared for, I don't have to visit multiple doctors first. My experience since joining this plan in March is that they are chocked with weird rules. To get treatment by a specialist, I need first to make an appointment with one of their assigned PCPs who must refer me to a specialist, who refers me to another specialist who requires still more referrals. Meanwhile my ailment worsens, now requiring medication which is complicated by a mailorder system. Half the doctor visit is spent watching the doctors and staff struggle with their computers to make all this work AND ON TOP OF THE CONFUSION THEY WANT TO RAISE MY MONTHLY PREMIUM of $553.40 --27.6%. I protest. And while I'm complaining: last year I was living in California. Had an Anthem policy in Central California but was forced to change to a new Anthem policy when I moved to Los Angeles. The money I applied toward the first policy's deductible became negligible and had to start from scratch with the LA Anthem policy. Both Anthem Blue Cross and Anthem Blue Shield neglected to send me tax forms 1095 A and B in a timely way so that I had to spend days/weeks fighting the IRS to get a refund which is still held up due to insurance issues. I suspect the IRS doesn't believe one can spend this much yearly income on health insurance. Help. Medical insurance is killing me.

Inquirer:

**Empire HealthChoice HMO, Inc.**

The premium rate increase for 2017, that Empire Health Choice is requesting is over 25% which is utterly excessive. I'm writing to you to request that you deny that rate increase. I have a hard enough time paying what they charge now. Thank you for your cooperation and consideration of my comments.

Inquirer:

**Empire HealthChoice HMO, Inc.**

In response to my current plan Empire HMO 2000 X, Silver which I currently pay $918.80 for myself and spouse asking for a 27.6% increase for 2017. At my current price this is not affordable healthcare. I have laid out close to $831.83 in deductibles for first five months of coverage in 2016. This is on top of our monthly premium. I originally choose this plan with the hope that it would keep my costs down but this plan is slowly bankrupting my household budget every month. The $918.80 premium is close to 30% of my individual NET pay. This is not affordable healthcare and I have come to the conclusion that unless you are extremely poor this
Obamacare is a huge scam on the working class of America. When I called to explain that unfortunately my estimate that I could pay my monthly premium was miscalculated and I could not continue to pay this I was told I had to wait until new enrollment if I wanted to change plans. If I stop paying I will be penalized and I can't buy Catastrophic Coverage anywhere in NY State. To avoid being penalized I am now looking to enroll in a Healthcare Ministry as my only option in order to stop being price gouged by Empire Blue Cross Blue Shield and be in compliance with Obamacare. If more working class people like myself and spouse continue to drop out it won't make a difference how much an increase this company and others are asking for. These exchanges are going to collapse and all you will have left is the low income people on Medicaid. I have lasted five months paying $918.80 and have decided I just can't afford to feed and house my family as well as pay this outrageous monthly premium. This is just not affordable to the working middle class citizens of NY State. Do what you wish with Empires request but for now I have decided this just does not work for my spouse and myself. Who can afford to absurd a 27.6% increase in premium ????

Inquirer:
Insurer:
Empire HealthChoice HMO, Inc.

Empire Blue Cross is proposing a 27.6% rate increase for next year. This is unacceptable. For one thing, my current plan makes me pay out of pocket for most routine medical visits. Without greatly improving coverage, I don't believe a rate increase is justified, fair or moral.

Inquirer:
Insurer:
Empire HealthChoice HMO, Inc.
Attn: President, New York Commercial
New York State Department of Financial Services (DFS)

Please explain to me what part of "affordable" is the threat of raising much needed health insurance by 29.6%!!! What other industry has the hubris to give themselves such a raise at the expense of those they serve! Health care is not a luxury it is a necessity. SHAME ON YOU!

As someone who is too young to retire and too old to rehire, and currently making do on my $425.00 weekly unemployment as I continue to be ready, willing and able to work -- I am in the untenable position of being squeezed to death between much needed health insurance, much needed housing, paying taxes and generally being a good citizen who has contributed to society all my work life. Again, SHAME ON YOU!

Do not approve this hijacking of health care coverage.

After digging deep into my pockets after I lost my job (agency outsourced to a 3rd party provider, all jobs were eliminated) I recently elected a managed health care plan provided by Empire BCBS as the only plan that my three longstanding providers accepted. Mind you, this is an HMO! Imagine my shock to learn, I will not be able to afford a managed health care plan should this rate hike go into effect.

DO NOT APPROVED THIS PROPOSED 29.6% INCREASE

Name of Insurer: EmpireHealth Choice, HMO, Inc.
Empire Plan: Empire HMO 600 X, Gold, ST, INN, Pediatric Dental, Dep 25
HIOS ID #: 2016 HIOS ID 80519NY01600
Individual Coverage

LCSW
New York City

Inquirer:
Insurer:
Empire HealthChoice HMO, Inc.

To Whom It May Concern,
I received a letter from Empire BC BS yesterday regarding a proposed increase and I would like to offer my strong comments and experiences.
This proposal is shocking and completely disheartening and detrimental in many ways. Those of us who (1) live in New York, (2) are self-employed and, (3) thus NOT participating in employer-based plans OR (4) not participating in government supplemented "marketplace" plans have few options from which to choose; and all are HMO's.

2016 was the 3rd year in a row I have had to change insurance plans because the Insurer dropped their INDIVIDUAL PLANS IN NYS. When selecting a new plan for January 2016, only Empire BC BS offered Providers where at least a few of the doctors I have regularly used participate. A doctor/patient relationship takes time and is an important element in maintaining one's health; perhaps NOT to a 25 year old, but certainly to an ageing individual. Having to change doctors yearly is not ideal.

With few options and a desire to have excellent coverage (despite being healthy and without chronic or acute illness), I chose a plan that is quite honestly a hardship for me to afford. I sacrifice other things to be able to make this monthly payment; which is an outrageous $750.76 per month. (FYI, None of the providers I see will accept Marketplace plans.)

I am not dissatisfied with my plan, but a rate increase for 2017 is too soon and too much! It seems incongruous that those of us that are not supported by employers, who do not take advantage of government subsidized plans, and who have so few options, are getting an increase. But not just a small increase, but a whopping 30% increase! This is truly outrageous and inexplicable to me. I, and I am sure thousands of others, are being priced out of these plans. I am paying a higher premium this year than I did with my prior insurer last year. I know I will not be able to handle another increase and I will once again have the same issues of starting this awful process all over again. Where does this end and what recourse do we have to delay this increase and reduce the huge proposed amount?

I appreciate your consideration of my comments and ask that you please PLEASE DENY the 2017 proposed increase.

Kindly acknowledge receipt of this email and please advise if it or other details should be sent to any other person or organization.

Sincerely,

Susan Greenberg
Empire BlueCross BlueShield, Pathway Enhanced - Platinum Plan. INDIVIDUAL coverage
HIOS ID# 2016 HIOS ID 80519NY0160014/ 2017 HIOS ID 80519NY0160014

Inquirer:

Insurer:
Empire HealthChoice HMO, Inc.

I was just recently informed that my health insurer intends to raise it's rates by 25% next year. My current coverage is $480 a month just for myself and I still have a high deductible, most of my health care I end up paying out of pocket which makes me not want to utilize services as it quite expensive and I worry about not getting the care I should. If they are able to raise rates even higher I'm not sure how my family will be able to afford it! Before the affordable care act my insurance was more affordable, I know that act has helped many but if the rates increase it is going to be very difficult to afford health care!

Inquirer:

Insurer:
Empire HealthChoice HMO, Inc.

I just received a notice that my Health Insurance provider, Empire Blue Cross Blue Shield will ask for a 27.6% increase in my premiums. This is unacceptable. They claim that medical costs are rising along with a changing pool of customers....Cost of Living
increase? Who get a 27% increase in anything? No one I know, how 'bout you? I ask you to reject this outrageous proposal, which would make healthcare, once again, unaffordable.

Inquirer:

Insurer:
Empire HealthChoice HMO, Inc.

To whom it may concern: My family has Empire HealthChoice HMO, Inc, individual plan. ID number: 2016 HIOS ID 80519NY01600107/2017 HIOS ID.

I find it outrageous to increase the health insurance premium by 19.3%!! It's excessively high and makes it no longer affordable.

if you go ahead and raise the premium with that amount, I will discontinue the plan and choose another insurance company.

A few percentage points I would be ok with, but 19.3% I find offensive.

Best,

Inquirer:

Insurer:
Empire HealthChoice HMO, Inc.

I have Empire Blue Cross Blue Shield, Anthem Pathway Enhanced. I'm very worried about the dramatic rise in rates and hope there's a way to keep them from rising that much. I am freelance and must pay insurance out of pocket for myself, my husband, and our soon to be here first child.

Inquirer:

Insurer:
Empire HealthChoice HMO, Inc.

Dear Superintendent of Insurance: 1. An increase of 29.8% is not only grossly unfair but is totally unreasonable. Bear in mind, that this is the premium for a couple and not for a family. I have no group that I can go to, and the New York State of Health is the only available avenue for health insurance. It is already a compromise in that I cannot go out of network, but to now increase the premium by nearly a third is a financial hardship that is unacceptable. We are trying to come out of the most serious recession since 1930, and this sort of increase just adds fuel to a fire that is impossible to meet. 2. The notice indicates that if you qualify for the financial assistance Advanced Premium Tax Credit, then this 29.8% increased premium is your reduced premium. I do not qualify for the Advanced Premium Tax Credit so that means my premium will even be higher. I shudder to contemplate an even higher premium. I pay the premium without any financial assistance. 3. The net result of this premium increase is that we are being asked to pay a huge increase in premium, and we are getting a lot less for our buck. It behooves the Superintendent of Insurance not to allow such a steep increase in premium. If I cannot go to another insurance company, and I cannot afford this extreme premium increase, what has become of AFFORDABLE Healthcare, which was the very reason we went down this road in the first place. This sort of increase causes health insurance to become UNAFFORDABLE. 4. Please come up with a fairer and more reasonable solution. I vehemently oppose this premium increase. Very truly yours,

Inquirer:

Insurer:
Empire HealthChoice HMO, Inc.

I have Empire Blue Cross and just received an notice regarding a 24.9% increase. That is outrageous! A $147 increase! I am a widow, 63 years of age and trying to pay the $594.28 is hard. I called NYS of Health but they told me I am locked in until December. My health has changed for the better and I do not need the expensive Gold health plan. Why can I not change to a Silver or Bronze? At the end of the year I will be cancelling NYS of Health.
Inquirer:  
Empire HealthChoice HMO, Inc.

I have just received notice that Empire Blue Cross/Blue Shield is requesting that my premium be raised by 29.8% from $750.76 to $974.49. This is for an individual Platinum policy. These policies for individuals are not easy to obtain in New York City and the selection is very limited. I had previously been with Oxford but they dropped all individual policies in NYC last year. The limited availability of these individual plans in NYC forced me to go with Empire. I am sure many others in my position were forced to make the same choice when Oxford discontinued it's coverage. There are not many options available to New Yorkers who would like a Platinum plan. I, like many others, have a preexisting condition and require the best plan I can afford regardless of the hardship it may cause me. An increase of 29.8% would cause me a hardship that I feel I would be forced to try to afford. If I took a less expensive plan, I would be paying out more in deductibles which would be a hardship as well. Though named the Affordable Health Care Act I can't help wondering who this act is really affordable for? If insurance customers aren't hit with high premiums then they are hit with high deductibles! Empire does not deserve this increase. They hold an almost monopoly on the individual Platinum Plan market in NYC - especially since my doctors are [redacted] based as all of mine are. My medical team works well together, can cross reference each others information easily plus I have a good relationship with all of them. I am not willing to give them up and I should not have to. Insurance companies are motivated by greed and should not be run as for-profit entities. That is the only way that the average citizen will get the proper of health care that they are entitled to. Thank you.

Inquirer:  
Empire HealthChoice HMO, Inc.

I am appalled by the proposed increase. I found the 2016 rates bad enough compared to the plan I had in 2015 and 2014. Empire is proposing a 27.6% increase next year. They justify the increase with the rising cost of care, changes in federal transitional reinsurance program, changing pool of customers, and experience with provider networks. This increase is not affordable. And isn't it It early in the year to be able to determine that calculation?

Inquirer:  
Empire HealthChoice HMO, Inc.

I received a letter stating Empire Blue Cross Blue Shield wants to increase my health care premium 29.6%. That is an outrageous increase well in excess of any measure of health care inflation. Will the state of NY and its elected officials allow individual purchasers of insurance to be ripped-off? I can't afford to live in NY anymore.

Inquirer:  
Empire HealthChoice HMO, Inc.

Last year, I had an Empire Blue Cross Blue Shield HMO that provided better coverage at a lower cost. This year, since my daughter turned 19 and I added her to my plan, I pay $735.88 per month, have a family deductible of $4,000 and out-of-pocket maximum of $10,400--which are outrageously high. I have more medical bills than I can pay as I now struggle to pay the $735.88 per month. A 23.6% increase in premium would put me in a situation where I would be forced to drop my insurance, which would be potentially life-threatening to my husband, who has a medical condition that requires monthly monitoring. I appeal to the department to do the right thing by preventing Empire BCBS from increasing their premiums by double digits. Thank you.

Inquirer:  
Empire HealthChoice HMO, Inc.

I, vehemently, oppose a premium increase! As it is, monthly premiums, deductible, out of pocket, copays are already quite costly and I will never see the day Empire pays for medical expenses 100%~

Inquirer:  
Empire HealthChoice HMO, Inc.

I can not afford the increase. The company receives over 500.00 from me monthly as it is.
Inquirer: [Redacted]
Insurer: Empire HealthChoice HMO, Inc.

Empire HealthChoice HMO, Inc.

Insurer Name: Empire HealthChoice HMO
Benefit Plan: Empire HMO 4000 for HSA, Bronze, ST, inn, Pediatric Dental, Dep 25
Individual Coverage
HIOS ID #: 2016 HIOS ID 80519NY0160002/2017 HIOS ID 80519ny0160002

To Whom It May Concern:

I'm writing to express my deep concern about the proposed rate change of 27.6% to my health insurance premium. I currently pay $443.46, which would bring my premium to approximately $565.85 per month.

Such an increase would cause considerable financial strain for me with increasing living and transportation costs in New York City. Additionally, I work as a freelancer, so my income varies per month and consistent employment is not a reality.

An increase of 27.6% violates the spirit of the Health Care Exchange, which is designed to offer affordable health insurance for individuals such as myself, therefore I strongly urge you to oppose Empire's proposed increase and opt for a minimal increase more befitting of the needs of the insured of New York State.

Thank you for your consideration.

Sincerely,

[Redacted]

Inquirer: [Redacted]
Insurer: Empire HealthChoice HMO, Inc.

I just received a letter from Empire Blue Cross Blue Shield indicating they are proposing a 29.6% increase in my insurance premium for 2017. This is unacceptable - my insurance went up 15% in 2016 and this new increase will be a hardship I can't handle. 29.6% is not fair or possible for most of the population to afford. I understand an increase is needed but somewhere between 5-8% would be manageable. Please do not allow this outrageous request to go through. Thank you.

Inquirer: [Redacted]
Insurer: Empire HealthChoice HMO, Inc.

I am appalled by the proposed 27.6% increase Empire BlueCross BlueShield has proposed for the State's approval for the Empire HMO 2000 SILVER plan for 2017. I would strongly suggest that this increase be DENIED. Any increase more than a few percentage points far outweighs any inflation or increase in salary. A double digit increase in health premium would severely cripple the household budget and ability to spend on other household necessities. Please do not allow the insurance companies to increase coverages to cover their inability to manage their costs or expense. Thank you.

Inquirer: [Redacted]
Insurer: Empire HealthChoice HMO, Inc.

I am writing because I am opposed to a 23.6% increase to my current Empire HMO 2250 Silver, NS INN, Pediatric Dental Dep 25 Health Insurance Oversight System (HIOS) identification number 2016 HIOS ID 85019NY0160010 / 2017 HIOS ID 80519NY0160010. The current deductible for this plan is $2550.00 and OOP Max is $6500.00 for an individual, this is extremely high considering the current premium paid $507.33. A 23.6% increase should not be approved and deductible and OOP max should be lowered.

Inquirer: [Redacted]
Empire HealthChoice HMO, Inc.
The cost of living has insignificantly increased in the New York State in the past several years. Last year your offices inappropriately gifted Empire with a totally unconscionable 12.9% increase in their rates. This year Empire is egregiously asking for an additional 22% increase on top of last year’s 12.9% bump up that you were incredibly commercially biased enough to give them. How can a two year total 34.9% increase be justified in a time when the cost of living increase is flat as evidenced by no increases to social security recipients. This approaches criminality on the part of your offices. Do your job this time. That’s what you are paid to do. Honor your responsibility to the citizens of New York State. Instead of an increase, I urge you to decrease Empire down 34.9%. Remember, bureaucracies that don’t serve the public ultimately will be held accountable by the citizens.

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc.
I have received a letter from my insurer advising that they are requesting a nearly 25% rate increase. My insurance rate is already way too high. My husband and I together pay $1,450 per month (my individual rate is $725.10). This is as much as our home mortgage. We absolutely cannot afford an increase and I do not believe one is warranted. We are both in good health: we do not have any medical issues, neither of us take any medication for any conditions, neither of us smoke, we exercise regularly, eat healthily. At this point our insurance premiums are higher than even our routine check ups. I do not see any justification for this and simply cannot afford yet another increase!

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc.
This rate increase, 27.6%, is outrageous Health insurance premiums are high enough!

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc.
My Carrier is Empire Blue Cross BlueShield. They are not listed on the pulldown menu. I received a letter that they are requesting a 29.8% increase for 2017. This is ludicrous totally wipes out the benefit I received from the Obamacare program. I implore you not to grant their increase as it will force me to downgrade my coverage to a premium I can afford, rather than the coverage I need. They are a greedy company that is taking advantage of the limited choices we consumers have on the exchange. Please help me millions of others like myself in the same position. Sincerely,

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc.
I am responding to the 25% proposed rate increase. I think this is outrageous. I can barely afford the amount I am currently paying and I can see if they needed to raise 5% but with the proposed increase I will have no option but to look for another carrier.

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc.
A rate increase of 23.8% is absurd and unaffordable. My income will not increase in 2017; it is likely to go down given the state of my industry. No other expense will see nearly this percentage increase; not Manhattan real estate, tuition, food, or energy. This level of increase would create a more than eightfold increase in premiums in ten years. Health care is already outrageously expensive – it is our single largest expense other than our mortgage.

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc.
I am deeply concerned about the proposed increase to our health insurance plan. Currently our plan costs almost $600 more than before we were forced to purchase through the state plans. We have lost many doctors as many do not accept any state plans in our area. Having two special needs children, our doctor specialists are extremely important. We already use our plan to the fullest extent, meeting our deductibles each year and meeting, or coming close to meeting, our out of pocket max. This is already a huge expense.
Increasing the amount of money we pay for this health care will put us in a dangerous financial position. We make too much money to be eligible for aid with the cost of coverage, yet the rate of increase is posing a real financial strain. We simply can not afford it. If this increase goes through, it will cost us almost the same amount of money each month as our mortgage. That is unfathomable to me. The affordable care act is simply not affordable for the middle class yet we are the ones who keep paying more. Please consider this message with the greatest attention. Thank you for your time.

Inquirer:

Insurer: **Empire HealthChoice HMO, Inc.**

The increasing costs for healthcare coverage in NYS and the lower Hudson Valley make it extremely difficult for any family or individual to afford the health coverage they need. We are a family with special needs children who requires a plan which our specialists and surgeons participate in. In our area that selection is extremely limited. This year alone we saw our family cut of from one of the largest network of providers, due to the NY State of Health plan options. We had to choose between our son's specialist surgeon and multiple doctors. Two years ago, we were paying approximately $950.00 a month for our family. Since that time we have witnessed an unsteady and frightening increase to healthcare costs and coverage that has impacted the care and treatment we receive. Our current Empire plan is the minimum at which we can select for coverage and at maximum of what we can afford to pay, when combined with Co-pays, coinsurance, durable medical equipment costs and prescriptions. The Affordable Health Care acts hardly affordable in NYS and I do not see where the needs of NY citizens are being met as compared to the Health Insurance providers who seek large increases every year. If only my income would increase 27.6% every year, then perhaps all things would be equal. Empire BlueCross does not offer any insight as to what the cost increase will do to benefit the consumer. I strongly oppose this increase. I implore the DFS to deny this request. A healthy New York is a strong New York.

Inquirer:

Insurer: **Empire HealthChoice HMO, Inc.**

I am supporting both myself and my 17 yo son My health insurance was raised 27 percent--i will now pay 1,300.00 per month This is frightening. We are not sick, and use doctors infrequently. However, if that should change we need to be covered. Why 27 percent??? This is frightening

Inquirer:

Insurer: **Empire HealthChoice HMO, Inc.**

The Insurer has requested a 25.1% increase. This is an unreasonable amount and would cause undue hardship to policy holders. Please limit the increase to the CPI.

Inquirer:

Insurer: **Empire HealthChoice HMO, Inc.**

I have purchased medical insurance for myself and my family since 2003 when my husband lost his job after 9/11. Over the years, it has become increasingly more difficult to find affordable health care. Obamacare is the biggest fraud that was ever imposed upon the self-employed. I have gone from having PPO coverage - now being lumped into an HMO. Of all of the companies that I have had contracts with since 2003 (GHI, Oxford and Empire Blue) Empire is by far the worst. I contracted with them in December 2015 for coverage as of January 2016 because Oxford had revamped their networks, thus removing most of the physicians that I see. It took the better part of 6 weeks just to get an insurance card from Empire. It took over three months and numerous email messages to find out that I could not keep my primary care physician of some 32 years. Empire actually had the gall to assign a primary care doctor. Another two months - and several requests to get this changed. I almost passed out when I read the notice that I received yesterday, stating that Empire has applied for an almost 30% increase in the premium. Fortunately for me, I will become Medicare eligible in September 2017. I will purchase a Part D policy and a Medigap supplemental policy. I will happily cancel my coverage with Empire. That said, I do feel very sorry for all of the self-employed individuals who are stuck with this carrier.

Inquirer:

Insurer: **Empire HealthChoice HMO, Inc.**

They are requesting a premium increase of 27.2%. This is OUTRAGEOUS! I'm already paying a hefty $437.30 per month for a bare-bones catastrophic health plan with a SIX THOUSAND DOLLAR DEDUCTIBLE, and now they want to charge me $118.95 per month MORE?!? This is COMPLETELY UNREASONABLE given the parent company, Anthem, had a first quarter 2016 net income of 703
MILLION DOLLARS! In light of that information this premium request has no compelling grounds for being granted outside of pure GREED. Please reject it, remind them of their huge profits, and tell them to keep the premium rate for 2017 right where it is at $437.30 per month. Thank you.

Inquirer: 

Insurer: Empire HealthChoice HMO, Inc.

I am writing to make a public comment on the proposed health insurance premium rate change requested by Empire Blue Cross Blue Shield. My insurer is the Empire HealthChoice HMO, Inc. My individual-coverage plan is the Empire BCBS HMO 1000 X, Gold, NS, INN, Pediatric Dental, Dep 25, a Multi-State Plan, HIOS identification number 2016 HIOS ID 80519NY0330005/ 2017 HIOS ID 80519NY0330005. The requested rate increase of 23.7% for 2017 is obviously a staggering figure. It would amount to a $153.63 per month increase above the $614.53 per month I already pay, for a new monthly premium of $768.16. The vague reasons Empire BCBS provides for its rate increase — the rising cost of medical care, a “changing pool” of customers, the company’s “experience” with provider networks, changes to prescription “processes,” and so on — should each be explicitly tied to a specific dollar-amount contribution to the overall increase that the company is requesting. I cannot find any such dollar-specific information in their so-called “plain-English” summary on the BCBS website. Customers deserve to know that information. Much more important, though, is that this company's extremely expensive service is very poor. The company repeatedly denies claims erroneously, forcing the customer to spend large amounts of time contacting the company (by phone and by email) to rectify the mistakes, and creating a tremendous barrier such that some customers often give up and pay for claims that should not have been denied. And even when customers don't give up and pay what they should not have to pay, they must spend so much time correcting the mistakes that they effectively lose time and money. I have many examples of these kinds of mistakes, but let me share one that is easy to understand. Earlier this year, I sought relatively inexpensive in-network outpatient behavioral health services — services for which my plan plainly specifies that I do NOT need a PCP referral. The first two claims that my provider filed (each totaling a reimbursable amount of $76) were denied by Empire. When I called the BCBS customer service line for an explanation (and waited on hold for an hour to do so), the representative erroneously stated that I needed a PCP referral for the service, when that was plainly incorrect. I had to stay on the phone much longer to have a more knowledgeable supervisor examine the details of my plan and discover that I was right — this service did NOT need a PCP referral. The supervisor’s explanation for the error was an “automated computer glitch” that had denied the claims. I asked why a computer was making a decision about claim approvals, and the supervisor did not have an answer to that. The supervisor agreed to have the denials reversed (though he said that the reversal could take as much as 30 to 45 days). Given that I knew I would be using this service again, I asked if the underlying problem would be rectified — namely, that the computer glitch would be fixed, as I did not want to have to again spend hours communicating with both the provider and with Empire to correct future mistakes. The supervisor said he would make a note about the problem but would not declare that it would not happen again. Sure enough, several more claims of this type were erroneously denied, requiring me to make several more time-consuming calls to the company to have the denials reversed. Even though I had informed BCBS about this problem, the company failed to fix it. And when on my third call about an erroneous denial, I asked for BCBS to compensate me for the enormous amount of time I was spending to correct the company's (not my) mistakes, they said they had no way to do that. All they could do was to keep making the corrections and tell me to call back when it happened again. The effect of an experience like this (and this is only one of many such experiences I have had with BCBS) is that some customers will simply pay the charge they should not have to pay. Others will be faced with stressful overdue bills from a provider that they cannot afford to pay while the insurance error slowly gets resolved (if it ever does). Others, like me, eventually decide to stop seeking the service, even when it is a service to which the insurance plan entitles them and, often, when the service is essential to the member’s health. Indeed, I have decided to stop seeking this service (a service to which I am entitled under my plan) ONLY because the aggravation it took to get BCBS to process my claim correctly was itself harming my health. How is that for irony? A health insurance company’s mistakes were harming my health, causing me to NOT seek care for a health condition! This, dear regulators, is an appalling state of affairs. I, like many people, pay more to my health insurance company than I pay to any other company with which I do business. I personally pay $7,374 per year to BCBS every year just in premiums (NOT counting the $1000 deductible and the $6,850 in out-of-pocket costs for which I am responsible). For such a wildly expensive service, you would expect the company to make very few mistakes — and when they do make errors, to rectify them instantly (not after 30 to 45 days) and then compensate the customer for the very significant hassle that the company’s errors caused. If, for example, a company from which I buy a magazine subscription accidentally fails to mail me one of my issues, they fall over themselves to make up for the error — by adding 2 extra issues to my subscription (for free!). And the amount of money I pay to a magazine company is miniscule compared to what I pay to BCBS. Nevertheless, this staggeringly incompetent company is now requesting a 23.7% increase to my health insurance premium — so that my total yearly BCBS premiums (before deductibles and out-of-pocket costs) will rise from $7,374 to $9,218. This kind of increase may cause me to have to go (illegally) without health insurance altogether, as it is simply unaffordable. Although my income is not low enough to qualify for a subsidy under the Affordable Care Act, it is still too low for me to afford that kind of cost for health insurance — just for the premiums alone! I strongly urge you not to honor Empire BCBS's request for this exorbitant increase in premiums. The effect will not only be devastating to the health of many insured people, but you’ll be granting a huge increase in revenue to a company that is not even competent at doing its basic job of processing claims according to the terms of members’ plans.

With urgency, 

Inquirer:
Insurer: Empire HealthChoice HMO, Inc.

Please name me any other business that is allowed to increase their rates at more than 10% a year consecutively? No one gets those kinds of increases. Why does the government allow insurance companies to increase their rates? It is unfair and unjust. Please do not accept these increases. Thank you.

Inquirer:

Insurer: Empire HealthChoice HMO, Inc.

This increase is unjustified, and will leave me no reasonable affordable options. Please do not allow this increase to take effect. Thank You.

Inquirer:

Insurer: Empire HealthChoice HMO, Inc.

I already have to pay an absurd premium with a huge deductible, the latter of which already makes me reticent to seek out specialists and other care that isn't covered by my primary care visit copay. At this rate I'm better off dropping insurance and paying the penalty. I'm not getting regular work currently and health insurance is just emptying my savings account. With the economy in the toilet, how do you expect people to live when they make less money and then you jack insurance rates so much?

Inquirer:

Insurer: Empire HealthChoice HMO, Inc.

I am writing to object to the rate increase on our Empire Blue Cross Blue Shield policy. In 2016 we were hit with a 52% rate hike over 2015 rates. The new increase will add an additional $174.00 to our premium, making it almost impossible for us to maintain the insurance. I ask the State to please consider the economic impact of such a catastrophic increase and the likelihood of creating mandatory insurance that is actually unaffordable. Thank you.

Inquirer:

Insurer: Empire HealthChoice HMO, Inc.

I think the proposed percentage increase by the insurance company is outrageous! Not only is A LOT higher than any inflation, I already pay a very high premium price. I pay monthly $750.76 (plus an additional $64 for dental insurance) and no in-network doctor I go to is over $200. And I am a health active human being, who goes to the gym daily, and who doesn't need to go to many doctors, besides doing my annual visits. And the health insurer already obligates me to go thru very unfriendly procedures, as get referrals and sign up to mail delivery prescription services, despite the very premium price I already pay. So I really don't understand such outrageous percentage increase the health insurer is proposing. It is disgusting and it should be illegal such enormous increase. I am highly against it! Please help me in not accepting such absurd increase!

Inquirer:

Insurer: Empire HealthChoice HMO, Inc.

Proposed 2017 rate increase is absurd. Last 3 years rates have risen to $796.28 from 708.53 while the stock price has increased to 134 from 108. If the business model is so difficult there would not be mergers and consolidations in the industry. There is absolutely no justification for any rate hike.

Inquirer:

Insurer: Empire HealthChoice HMO, Inc.

I am under the Empire Blue Cross/Blue Shield HMO 250. I strongly object to the proposed increase in my insurance. They have asked for approx. a 19.9 % increase each year since I moved to NY. I am an individual and the payments are difficult as is at the current high rate of $667.39 a month. At this rate if they increase each year like this I will not be able to afford insurance at all. It seems that perhaps they are trying to get anyone with pre-existing conditions to leave their policies so they can selectively choose who their policy holders in this way. Are all policy holders receiving this high rate increase across the board? HIOS ID number provided in notice:
80519NY0160115/2017 HIOS ID 80519NY0160115. Please, please do not accept these high rate increases. I am sure the insurance companies are still making acceptable profits even if not the astronomical ones they used to make prior to the insurance changes that have made access for millions of uninsured to be insured in this country. Please email a confirmation that you have received my comments. Thanks, [Name]

Inquirer:

Insurer:
Empire HealthChoice HMO, Inc
I am protesting a proposed rate increase to my insurance!!!!!!! 24.9% is outrageous!!!!! We cannot afford the insurance now even with the subsidy!!!!!!! Every year it gets worse and worse!!!!!!! This healthcare plan is a disgrace!!!!!!! I expect a timely response and I will be contacting my senator!!!!!

JLE465M80575

Inquirer:

Insurer:
Empire HealthChoice HMO, Inc.
The amount of the proposed increase is horrifying. This is supposed to be affordable healthcare. I am self-employed. How could I possibly afford $678.12 a month? That is with a tax credit. Quality healthcare should not be a luxury. It's not a purse or a pair of shoes. It's human necessity. I should not be broken by the cost of my health insurance. These are people you're dealing with. Have some reasonable acknowledgement that human lives are at stake. Please do not implement an increase that is such a flagrant display of lack of humanity.

Inquirer:

Insurer:
Empire HealthChoice HMO, Inc.
I received a notice from Empire Blue Cross Blue Shield, an Anthem company, that they are requesting an increase of 25.1%, which will cost me almost $500 more per month for my family of 4. I do not receive any credits or assistance and feel that this premium increase is outrageous . Please do not grant this increase. Thank you.

Inquirer:

Insurer:
Empire HealthChoice HMO, Inc.
I object to the the proposed $23.8% increase in premium rates for my healthcare plan. This is a substantial increase and for me equates to a $3508 increase in healthcare costs annually. This is my first year with Empire and to receive such a substantial increase in what would be only my second year with Empire (2017) would force me to change healthcare providers should the increase be approved.

Inquirer:

Insurer:
Empire HealthChoice HMO, Inc.
a 29.8% increase?????? nothing goes that high!!! please do not agree to this request from Empire

Inquirer:

Insurer:
Empire HealthChoice HMO, Inc.
I am both a provider (psychologist) and insured consumer with this plan. I have not had so much as a cost of living increase by this insurer since I joined their network years ago, yet they constantly increases premiums. I find it outrageous that they are requesting a 27.6% increase in premiums when they don't even give providers cost of living increases! How can I afford these products when my income stays level for 30 years and premiums go up and up? However, I do want a quality product with a wide network of doctors and hospitals, not a narrow-network plan. I suspect that much of the premium increase goes to executive pay rather than claims payments. I know they are not paying ME 27.6% increase in my fees every year!

Inquirer:
Insurer:

Empire HealthChoice HMO, Inc.

Please stop raising our rates. I can barely afford health care as is.

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc.

I just received notice that my insurance company has filed a request to raise my health insurance premiums by 29.8%! This is a significant and egregious amount which would raise my monthly payment by $217.50 per month! This increase is too much, and would make my health insurance unaffordable. I would have to switch to a lesser plan and compromise my health care. Speaking as someone who is currently being treated for breast cancer, this is a scary proposal for me. I don't want to have to compromise my health care so that the insurance company can increase its profit margins due to the rising cost of health care (this problem is systemic and cannot be solved by placing the burden on the health insurance consumer). Please DO NOT approve this request made my insurance company to change my premium rate by 29.8%.

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc.

Just received a notice that BCBS is requesting a 25.1% rate increase for 2017. Totally outrageous!! Glad I am almost eligible for medicare, I am 64 yrs old, healthy and really don't need the Pediatric dental or prenatal care I am now paying for in my policy. What a ripoff. Cannot chose most of my prior providers, the process of getting the insurance is a nightmare not to mention trying to estimate my per diem income for the next year. There has got to be a better solution.

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc.

I am writing to vigorously protest the medical insurance premium rate increases proposed by Empire HealthChoice HMO, Inc. (an Empire BlueCross BlueShield company). The premium rate increase proposed for my plan is 27.6%. The currently monthly premium for my plan is $443.46 ($5,322 annually), for individual coverage with a high deductible of $4,000. I am 58 years old, self-employed and medical insurance premiums are my single largest expense. This proposed premium rate increase would increase my annual costs by $1450, money that I would prefer to invest in the expansion of my business. In today's economic climate, many small businesses such as mine are struggling to recover from the financial crisis of 2008-2010. We cannot afford additional expenses for medical coverage, especially an increase of 27.6%. Medical costs are not increasing at that rate and I believe that there is no justification for a rate increase of this magnitude. In light of the strong financial condition and profitability of Empire BlueCross BlueShield, I am protesting this proposed premium rate increase. Empire's parent company, Anthem Inc, recorded $39.2 billion in operating revenue last year for an operating gain of $3.3 billion. Have compensation packages for the company’s executive management been reduced, or at least capped? What else is the insurance company doing to manage its costs and provide incentives for its members to better manage their health and reduce costs? I urge you to deny the rate increase. Sincerely,

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc.

I just received a letter from my health insurance company that they want to increase my premium by 27.6% next year. How that can even be a consideration is beyond me. What becomes more expensive by 27.6% in one year? The reasoning is vague as to why this is happening. I want to see a detailed expense sheet explaining why 27.6% is a realistic request. The bill is already $443.46/month and has a $4,000 deductible, so it's basically an emergency-only plan. This is insurance I will probably never use, only got it because it was the cheapest plan that let me keep my doctor provided something does go wrong. I am absolutely the kind of person to have in the pool to make plans affordable, dumping money in and never taking anything out. A 27.6% increase would make this insurance unattainable to me. I live in NYC, a high cost of living, so I am not considered poor enough to receive government subsidies, and this bill is incredibly difficult to pay every month as it is. Empire HealthChoice HMO needs to find a better solution. I understand inflation increases of things, somewhere between 1 - 4%. 27.6% is ridiculous. If this is the sort of thing that is going to happen every year, then the ACA — which I have been in favor of as a stop-gap measure to eventual Universal coverage — is proving to be a failure. Please deny Empire HealthChoice HMO's request and work with them, in association with us, the customer, to find a better solution. I am willing and desire to be included in the conversation, but paying 27.6% more to an already hefty bill is ludicrous.

Inquirer:
Insurer:
**Empire HealthChoice HMO, Inc.**
The prices are already too high. I would prefer to have single payer and go to my preferred doctors than to raise the prices.

Inquirer:
**Balaban, Tamara**

Insurer:
**Empire HealthChoice HMO, Inc.**
I am a hard working occupational therapist. I am paying a lot for my monthly premium and it covers so little. I can't afford for my rate to go up 27.6% since my salary doesn't go up to meet that amount

Inquirer:
**[Redacted]**

Insurer:
**Empire HealthChoice HMO, Inc.**
I just received a letter with a proposed premium rate change of 27.2%. In the past 2 years the increase has been over 40%! Right now I can barely cover my health insurance payments. If the rate increases I'll have to leave the system as I will not afford the monthly payments. Please seriously reconsider the proposed rate changes.

Inquirer:
**[Redacted]**

Insurer:
**Empire HealthChoice HMO, Inc.**
I have just received notice of a proposed 22.3% increase in premium charge for Empire Blue Cross BlueShield HMO 2750X for HSA, Silver, NS, INN, Pediatric Dental, Dep 25, a multi-state plan. This is outrageous and should NOT be approved. Having gone from a group plan at lesser expense that covered and paid for way more we are stretching now as I have been unemployed for 7 months. This plans features a very high deductible and no out of network coverage. It is in short, mediocre at best despite the very high premiums we are currently paying of $1471.57 for my family. The notice make clear there will be further changes too affecting other key elements of the plan. Before any consideration is given to approving this increase DFS should insist on getting some clarity on what else will be changed. Will co-pays increase? Will the list of providers be reduced? Will benefit limits come down while out of pocket maximums go up? To ask for such an excessive increase when the plan is at best, mediocre, should bear the highest scrutiny from DFS. Please feel free to contact either me or my wife to hear more about our objections. Thank you for your consideration.

Inquirer:
**[Redacted]**

Insurer:
**Empire HealthChoice HMO, Inc.**
It is outrageous that Empire BlueCross BlueShield wants to raise their already too-high rates again.

Inquirer:
**[Redacted]**

Insurer:
**Empire HealthChoice HMO, Inc.**
I am writing to express my extreme displeasure with the 25 percent rate hike proposed by Empire Blue Cross Blue Shield. For more than $400 per month, I already get coverage so bad I would call it useless. The plan covers almost no prescriptions, no matter how many times my doctor says I really need it, and I have spent thousands of dollars this year on doctor visits and prescriptions. I don't even want to go back to the doctor to deal with some medical issues because I know I'll just be out more money. This is not how healthcare should be in America, and I'm tired of lining Blue Cross Blue Shield's pockets. Would I not incur a penalty by the IRS for not having health insurance, I would go without and just pay out pocket -- *that* is how useless this insurance is. Please do not allow them to raise their rates any more.

Inquirer:
**[Redacted]**

Insurer:
**Empire HealthChoice HMO, Inc.**
I cannot afford to pay 25% more for my health insurance in 2017. My plan went up by 12% in 2016 and my benefits went down. You should not allow Empire Blue Cross Blue Shield to raise my rate by 25% nor anyone else's.

Inquirer:
Insurer: Empire HealthChoice HMO, Inc.

I've been notified by Freelancers Union that Empire BlueCross BlueShield proposes to increase rates by 25% next year. That is preposterous.

Inquirer:

Insurer: Empire HealthChoice HMO, Inc.

The proposed rate increase to my plan of 16.9% would be too hard of a financial burden for me. That would put the monthly premium at close to $800! There was a similar hike last year and I don't see an end to these increases which are far above the rate of inflation. I need to have faith in our government to control the cost of our health care. Please disapprove this requested rate increase.

Inquirer:

Insurer: Empire HealthChoice HMO, Inc.

Name of Insurer: Empire Health Choice HMO, Inc. Benefit Plan: Empire HMO 1000 X, Gold, NS, INN, Pediatric Dental, Dep 25 Coverage: Individual HIOS ID number: 2016 HIOS ID 80519NY0160107 / 2017 HIOS ID 80519NY0160107 My health insurance company, Empire Health Choice HMO, Inc., has notified me that they are applying to the New York State Department of Financial Services for a rate increase to my policy. If the change is approved, my premium rate will increase by 23.8% effective January 1, 2017. I currently pay a monthly premium of $614.13. Their proposal would raise my monthly premium to $760.29. Their annual attempts to raise rates by such exorbitant amounts, well above any reasonable cost-of-living or inflation measures, are unacceptable. I urge you to disallow their proposed increase. Sincerely,

Inquirer:

Insurer: Empire HealthChoice HMO, Inc.

I am outraged that Empire BC/BS is requesting a 25.1% increase in premiums for 2017. This is roughly a 45% increase in premiums over 2 years . I thought the Affordable Care Act was to make insurance affordable! My insurance premiums will go from $600 a monthly in 2015, to $865 a month in 2017. HELP!!!

Inquirer:

Insurer: Empire HealthChoice HMO, Inc.

Hello,
I just received notification of a proposed rate increase next year. As a solo entrepreneur living in Manhattan, it's already difficult enough to cover my own health insurance, let alone a 27% rate increase!

I have individual coverage for Empire BlueCross Blue Shield
My HIOS ID number is:
2016HOIS ID 80519NY016002/2017 HIOSID

Thank you for making sure this increase, or any increase in our health insurance, does not happen.

Thank you.

Diana

Freelance Journalist. Editor. Digital Strategist.

LinkedIn: [link]
Twitter: [link]

Inquirer:
Insurer: Empire HealthChoice HMO, Inc.

Empire told me my premium is going up 19.3% even though they are dropping my son because he turning 26 years old I will be 65 going on medicare.....19.3%, you have to kidding me. No wonder Trump will be the next president!

Inquirer:

Insurer: Empire HealthChoice HMO, Inc.

Didn't they just raise the premiums dramatically last year!!!

Inquirer:

Insurer: Empire HealthChoice HMO, Inc.

I just received an email from the Freelancers Union president informing that Empire Blue Cross / Blue Shield intends to raise premium rates next year by 25%. Even though this hasn't been approved yet, I am writing to voice my discontent for this proposal. If they do this, I will switch insurance companies to one that offer a more affordable premium, and one that includes dental. It is a shame that health care costs are out of control in this country, and the NY health exchange concept doesn't seem to keeping health costs down. They appear to be skyrocketing in the past few years since instituting the ACA. I encourage the health exchange to look into this, and I will also be writing Congress members (Senators, State Reps.) regarding this matter. Thank you.

Inquirer:

Insurer: Empire HealthChoice HMO, Inc.

I've been informed Empire Blue Cross Blue Shield is purposing a 25% increase in premium rates for next year. Rates were already raised substantially for 2016 making them almost unaffordable. My current premium is $450/month with a $6000 deductible. With most medical costs going against my deductible first my annual health care costs are astronomical making me reconsider having insurance all together. I would love to be included in any conversation/debate about the rising cost of insurance in NY. Very Best, Christine

Inquirer:

Insurer: Empire HealthChoice HMO, Inc.

To whom it may concern, I am writing in regards to our insurance provider, Empire Healthchoice HMO's recent request to increase our monthly premiums by 29.6%. This increase would mark the third increase in the 3 years we have been with Empire. We were originally on a platinum plan with a monthly premium of approximately $1200, which steadily increased to $1500 per month over the course of 2 years, an overall increase of 25%. Unable to continue paying at that rate, we downgraded to a Gold Plan which lowered our premium back down to its original levels. This new premium increase would bring our monthly payments towards $1600 per month - higher than our original platinum plan and with higher deductibles and fewer benefits. Simply put, Empire's citation of the rising cost of medical care is far out of line with the actual rising cost of medical care (approximately 3% - see http://www.forbes.com/sites/mikepatton/2015/06/29/u-s-health-care-costs-rise-faster-than-inflation/#37cc51b06ad2). This shift in cost is also significant since a 29.6% increase is in no way reflective on any shift in real wages or a negative decrease in overall basic monthly expenditure (rent, utilities, food). Healthcare costs are skyrocketing with little or no transparency from providers or insurers, meaning that the patient is often left footing the bill for economic rationalizations which they have very little agency in determining. Enough is enough. We simply cannot be bullied into rising premium increases from our Insurance provider who benefit from consumer inability to shift and shop around because of regulatory measures preventing us from doing so. Simply put, we, the patients are bearing the burden of a healthcare system which is increasing costs with little ties to the economic reality we live in. This shift in the burden of costs paid by the patient is in no way sustainable. I am happy to discuss the matter further if required. Kind regards

Inquirer:

Insurer: Empire HealthChoice HMO, Inc.

Dear NY DFS: I was completely shocked to see a proposed 30% rate increase to my already-expensive $750/month individual Healthcare plan. Insurance companies in the US continue getting away with murder -- they continue to focus on squeezing every last dime out of their customers by increasing premiums and reducing benefits, and this rate proposal is a perfect example. By allowing
this, New York State is supporting a continued squeeze of the consumer whereas these dollars could be otherwise used for personal savings/investment or to help our local economy in a more tangible way. I would hope this offensive increase is not supported by NY State, who I already trust to manage our hard-earned tax dollars. Sincerely Respectfully Yours, [Name]

Inquirer:

Insurer: Empire HealthChoice HMO, Inc.

I recently received a letter from my insurance company Empire Blue Cross informing me that they are filing to raise my premiums by 27% (!) next year. I have been a type 1 diabetic for 35 years and cannot survive without a decent health plan. I don’t buy the argument that medical costs keep rising but, even if I did, a 27% premium is absurd. I will be forced, once again, to downgrade my coverage and risk suffering the potentially debilitating complications of my condition. I know I am not alone in voicing this opinion, but something has to give. The current situation is untenable. Every year I pay more and more for less and less. I’m not lying when I say I am losing sleep over this. Hopefully I won’t wind up losing my eyesight and my feet as well.
----Original Message----

Scarsdale, New York 10583
Email:  
Tel:  
You are a(n): CONSUMER

Your Questions and/or Comments have been recorded as follows:

*  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *

I received a notice from Empire BCBS dated 05/16/2016 notifying me that the company is requesting a 29.6% premium increase to my current monthly premium of $645.66. I've read that health care costs were up between 6% and 7%, so how can Anthem justify a double-digit increase. I want to let you know that my earning are flat and that I cannot pay these rates and still make my monthly expenses including rent, utilities, food, transportation. Health care costs are unaffordable. I think I'd do better not paying for health insurance and just take my chances that I won't get sick or hurt. It will be cheaper to pay the penalty tax for not having health insurance.

*  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *  *

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Ms.  
New York, NY 10031
County New York
Addressed to: Governor

Issue 1 44200 Health Insurance

Correspondence Number:  
Date Of Correspondence: 05/25/2016  
Date Received: 05/25/2016  
Date Entered: 05/25/2016  
Referred To: DFS  
Date Referred:  
Incoming Correspondence:

Dear Governor: My premium in 2014 for individual coverage was $561.94. This years it rose to $645.66. Now Empire BlueCross is proposing a further increase of 29.6%. This would bring the premium to more than $800 per month. From $561 to more than $800? And increase of 60% in two years? I've been a Democrat all my life and a consistent supporter of President Obama, but it appears the Affordable Health Care Act has only produced unaffordable care.

Yours truly,

**************************************************************************
I am currently paying $691 per month for a policy from blue cross blue shield. For that amount, I am rejected by a large number of physicians, hospitals and clinics. Stony Brook University Hospital, a state facility, rejects my plan. And I am not even on the exchange, which is anathema to the health care community.

Blue Cross is currently petitioning for a 25 percent rate hike. Are you going to allow this kind of extortion to continue? This is not affordable, it's not about health, or care, or any kind of sane public policy -- unless willful destruction was your objective. Who do you represent?

I have just been informed that Empire Blue Cross is requesting a 25.1% premium rate increase for 2017. I find this to be an unreasonable request. I am an independent freelancer and my rates don’t increase at that rate. I would be out of work if I asked for a 25% increase. Empire BCBS had an increase of 14% for 2016 and I had a $79 per month increase in premium payments. At 25%, it would be $172 per month increase. Please do not approve this rate hike.

Regards,
Mr. Cuomo,

I am writing because of a notice I recently received from my healthcare provider, Empire BCBS. The notice indicated that Empire is seeking approval of an increase in premium for 2017 of 19.2%. The notice discusses the spiraling rates of healthcare and also mentions a change in deductible and plan coverage. Mr. Cuomo, I am not one to offer compliments freely, however I do when I believe they are merited. I feel you have done an excellent job for the state of NY and you show considerations for all citizens and their problems. I was also a fan of your father, so erudite and caring, qualities we do not see often in elected officials. I believe you too possess these qualities. I am not one to generally raise my opinion to these levels, as I am aware that I have a role and responsibilities as a citizen of NY and the US. Only once before, in the name of gun control, have I written to an elected official to voice my opinion. My concern is twofold, first that the increases are stifling to retirees and people with low income. Secondly, that there is no end to these increases. The spiraling cost of medical care is an endless argument, certainly they are not growing at a rate 15 times inflation. The drug companies and the doctors seem to be unrestrained in how much they charge, sometimes to the point of comical levels. As an example, this past October, I had arthroscopic surgery on my knee, the surgeon invited into the OR a non-participating PA. The cost to me directly was over $5,000.00. The procedure was 15-20 minutes long and the individual was not a licensed physician. I hear a great deal about Obamacare being the cause of all these problems. Like most things in society that are problematic there is no one cause. Can we have a limit on charges, can we have coverage that is affordable universally. I do not know if denying or limiting the request from Empire would cause insolvency or cause employee cutbacks. That certainly is not my wish. I feel strongly that it is unfair that the user always pays. When is it time for providers and the suppliers to play their role and contribute to the quality of life.

Thank you for hearing my thoughts.
Inquirer:

Empire HealthChoice HMO, Inc.

To Whom it may Concern, This is in reference to a rate increase letter I received from my insurer, Empire HealthChoice HMO, Inc. My name is [redacted] My wife [redacted] and I are on an individual coverage plan under the Empire BlueCross BlueShield HMO 2750 Silver 25 Msp plan. The member number is [redacted] Our HIOS identification number is 2016 HIOS ID 80519NY0330003/ 2017 HIOS ID 80519NY0330003. We already receive an Advanced Premium Tax Credit to help pay our insurance premiums. have recently lost my main source of income. The proposed 22% increase in our premium is a higher increase than we have ever experienced in our lives; that plus the already very high deductible will make it untenable for us to maintain insurance. Insurance should not be a luxury item, but that's how it's starting to look. I am writing in the hope that you can help us out by denying this increase, or at least making something more reasonable like 5-10%. Thank you for any help you can render. [redacted]

Inquirer:

Empire HealthChoice HMO, Inc.

DO NOT LET THEM RAISE MY HEALTH INSURANCE PREMIUMS. I CAN NOT AFFORD IT!

Inquirer:

Empire HealthChoice HMO, Inc.

2017 HIOS ID 80519NY0160008 I received notification that Empire Blue Cross wants to raise my premium by $100 per month. This represents a 20% increase. Last year it was also raised $100 per month which was a 25% increase. That is a substantial increase in a 2 year period. Given the economy and the fact that I have not received a raise in over 5 years carrying this insurance is becoming a burden. Whatever happened to the affordable heath care? While I recognize that increases are inevitable they should be reasonable. Please take action to limit the increase on my class of policy to $20 per month.

Inquirer:

Empire HealthChoice HMO, Inc.

if a rate increases of 19.2% is allowed than you failed!! these increases are not sustainable by the avarage family. i should not have to make a choice between food or maintaining a health insurance policy. Its unacceptable and excessive. you need to stop the greed, please hear me. thank you.

Inquirer:

Empire HealthChoice HMO, Inc.

objecting to the requested 19.3% increase requested by Blue Cross. This was touted as affordable health care but has steadily increased since I joined. 19.3%increase is obsurd, who gets that kind of a pay raise increase? Request you deny or reduce this increase.

Inquirer:

Empire HealthChoice HMO, Inc.

Empire Blue Cross Blue Shield has requested an outrageous increase of 23.6% increase. I pay a high monthly premium of $507.00, with NO dental and No vision, and a high deductible and copay which I can barely cover. Any increase would be a hardship, their request is unacceptable! NYS cannot approve their request, it would leave thousands of New Yorkers with no choice but to have no health insurance. The AHC is supposed to make health care AFFORDABLE not UNATTAINABLE!

Inquirer:

Empire HealthChoice HMO, Inc.

Hello. I believe this requested rate increase to be wildly excessive and feel strongly against the proposal. I currently pay 2-5x my peers living in other states as it is. The reasoning behind the increase (rising health care costs) cannot possibly be 25-30% YoY. This must mean the insurance company is recovering from drastic mis-pricing errors in the initial year of the Marketplace. Passing such a large
cost for that error to the consumer is absurd. No other industry or professional would be able to stay in business with such business practices. Consumers should not have to bear the brunt of the insurance companies gross incompetencies. I hope fellow consumers express similar views and more reasonable (both economic and moral) proposals are presenting in the future.

Inquirer:
Insurer:
**Empire HealthChoice HMO, Inc.**

I would like to ask DFS to disapprove the requested rate change in amount of 24%. During the last two years my premium rate has been constantly increasing up to 17%. Any additional increase would not comply with customers expectations and would become a tough burden for family budgets. Moreover, the reasons requesting the rate change are vague and do no seem clear enough.

Inquirer:
Insurer:
**Empire HealthChoice HMO, Inc.**

I do not believe that Empire Bluecross Blueshield deservers a rate increase of almost 30%....they do not perform that well and getting through to them by phone is a nightmare at best....try 5%.

Inquirer:
Insurer:
**Empire HealthChoice HMO, Inc.**

Hi - Prior to introduction of the ACA, we had an individual catastrophic plan through Empire Blue Cross at a monthly premium of about $370. It did not cover much, but it was good for our needs, as we are healthy and were willing to pay out of pocket for some care. We do not qualify for any subsidies. The ACA prohibited that catastrophic plan, and it is no longer offered. So, we signed up with Empire for a Bronze plan for a monthly premium of about $1080. Last year, the premium on this Bronze plan rose to $1246. Empire has proposed an increase for next year of 27.2% to a monthly premium of $1585. I am writing to ask that you please try to keep any premium increases as low as possible. As you can see from the above numbers, the increases are staggering. Thank you for your attention to this,

Inquirer:
Insurer:
**Empire HealthChoice HMO, Inc.**

My current monthly premium with Empire is $507.40. That's already with financial assistance or that number would be higher. Empire is attempting to alter by rate by 27.6%, which would make my monthly premium $647.44. I'm young and I'm healthy. I cannot pay such a high monthly premium. I am penalized if I don't have health insurance but I can't afford to pay for health insurance. So this has one of two outcomes. I spend all my money, thus ensuring that I can never save money, lowering my quality of life or my health suffers because of a subpar plan or no plan at all. It really is that black and white. We have become a nation willing to prey on others to advance our own interests. That is not ok. Do not be complicit in making health insurance something unattainable for millions of people. This is a capitalist system dressed in a universal healthcare system's clothing. New Yorkers deserve better.

Inquirer:
Insurer:
**Empire HealthChoice HMO, Inc.**

Hello, I'm writing today to express my absolute horror to discover that Empire BlueCross BlueShield has requested a rate increase of 27.6% for 2017. From 2015 to 2016 my family was pushed out of a PPO with Freelancer's Union into what we were told was an 'equivalent' HMO 2000 Silver plan with Empire BlueCross BlueShield. The harsh reality is that our premium increased over $200/month and our experience, quite literally, changed overnight from simply seeing our preferred providers and having the bills paid to prolonged fights with BCBS over every single visit and prescription. What we get from BCBS can not even be called 'customer service', it is 'customer contempt'. The very idea that they could continue to drain our time and money to only resist providing the very service that they claim to provide FOR AN ADDITIONAL $430 EVERY SINGLE MONTH is criminal and CAN NOT BE ALLOWED. Empire BlueCross BlueShield should be required to EARN that rate increase first by providing quality service which includes pulling quality providers back into the fold and allowing for customers to receive the medications that they and their doctors prefer—not what BCBS was able to strongarm to a highly profitable rate. Thank you for your time and consideration.

Inquirer:
Insurer:
**Empire HealthChoice HMO, Inc.**
29.8% - I'm just in shock. 1/2 that amount is still hard to comprehend. My employer has been very generous and is paying 80% of my monthly health care plan bill-but my 20% cost and the portion of all medical bills that are my responsibility have increased tremendously. The previously approved health care increases have already affected my ability to receive a yearly increases in pay-now with this figure I worry that my employer will cut back the amount they will provide or just stop all together. This year I have also taken on the responsibility of elder care of my 2 parents. I am single person over the age of 60-this huge requested increase -even half that amount will be disastrous financial burden for me.

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc.
I am writing to speak up about the proposed health insurance rates from Empire BlueCross BlueShield. As a self-employed writer, managing the exorbitant costs associated with health insurance is a daily struggle. Many other self-employed and low-income individuals barely scraping by who are also dealing with serious health issues are facing the same problem when it comes to increasing health insurance rates. The proposed rate increase is horrifyingly extreme, and will force myself and many others to not receive required medical care due to simply not being able to afford it. My monthly health insurance premium is currently $443.46. The proposed percentage change to my premium is 27.6%. This proposed rate increase would bring my monthly premium to $565.85, an outrageous, unaffordable amount. I could hardly afford the increases for this year and last year. An increase that immense is simply inhumane. Asking people who can hardly afford the basic health insurance plan I am on and often do not visit doctors for both preventative and necessary care because of the high fees involved to then pay even more for their health insurance is an abusive, degrading mistreatment of individuals in need of affordable health care. Furthermore, the despair associated with attempting to afford alarmingly high monthly premiums exacerbates existing health issues by causing extreme stress and anxiety. I implore you to please NOT approve this egregious proposed monthly premium increase, as an advocate for the care and well-being of individuals who are already paying intolerable amounts for their health insurance coverage. Thank you for your consideration.

Inquirer:

Insurer:

DO NOT RAISE OUR RATES!!!!!!! THEY ARE ALREADY SO EXPENSIVE!!

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc.
Although understanding that healthcare costs continue to rise, I do not believe that a 25.1% increase in rates for a 1 year period on top of compounded rate increases in previous years serves anyone well except for the insurers. The government, insurance companies, hospitals, drug companies and providers must find a way to slow the growth in costs. Given a fixed income, a $250.00 per month increase is burdensome at best and at worst it is predatory. Again, an increase in line with inflation or inflation plus 2-3% might be called for but the amount in question is completely outrageous and must not be allowed. Thank you,

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc.

I am DEVASTATED BY THE ABUNDANT GREED OF EMPIRE BLUECROSS BLUESHIELD. IN THREE YEARS MY INSURANCE RATES HAVE DOUBLED.... YOU ARE WHAT IS WRONG WITH THIS COUNTRY.... PROFITS OVER PEOPLE, SUBSTANDARD SERVICE - YOU'VE MADE ME A PRISONER OF YOUR BLOOD SUCKING GREED.... I SINCERELY HOPE THAT THE 'POWERS' THAT BE (CORPORATE GREEDY BASTARDS) AND THEIR FAMILY FACE SOME HORRIFIC MEDICAL CRISES WITH NO LIFE LINE.... YOU ARE HORRIBLE MONSTERS WHO SHOULD BE EXPOSED

Inquirer:

Insurer:

Empire HealthChoice HMO, Inc.

June 5, 2016 New York State Department of Financial Services: Re: Notice of proposed premium rate change Empire HealthChoice HMO, Inc. Empire HMO 2000X, Silver, ST, INN Pediatric Dental, Dep 25 HIOS identification number: 2016 HIOS ID 80519NY0160008 / 2017 HIOS ID 80519NY0160008 I am submitting comments in regard to letter dated 05/16/2016 concerning an increase in premium rates for 2017. I am totally appalled that an increase in premium rates is even being considered. I as an individual am currently paying
$509.36 monthly. I live on a fixed income and the current rate I pay is far more than I was paying when I was enrolled in a group plan. My co-pays are higher and I am now subject to a $2000.00 deductible. It is very disturbing to me to think that I could be facing an increase for 2017. Any increase of any amount weather large or small would cause undue hardship. Sincerely, [Name]

Inquirer:

Insurer: Empire HealthChoice HMO, Inc.

Dear DFS, I'm writing to comment on Empire HealthChoice HMO's application to the State for a 27.6 percent increase in monthly premiums. Their request to you is ludicrous and unmerited. I have an Individual policy, with absolutely zero out of network coverage -- insurers will not offer Individuals out of network coverage. Empire HealthChoice's networks are small, so I absorb 90 percent of my own medical expenses out of pocket. My wife and I are both self-employed and have Individual polices; we're solidly middle class (she's a psychiatrist, I'm a journalist), but the cost of our health insurance has risen intolerably. We're both in our 50s, and these expenses will continue to increase in the next 15 years, before we qualify for Medicare. If they increase each year, how will we maintain coverage for us and our son? The DFS needs to do more to protect everyone from rapacious health insurers -- and particularly those of us who hold Individual policies, which leaves us with no negotiating leverage. You are our leverage. And there are lots of other Individual policy holders, whose incomes are less than ours, who are struggling or unable to pay for health insurance. Please pay more attention to Individual policy holders. Sincerely, [Name]
Dear Sir or Madam -

I was notified by Anthem Empire BlueCross BlueShield that my health insurance premium would be going up by almost 25%. Last year it went up almost 20%. I find this to be outrageous price gouging, and I will no longer be able to afford this plan. Please don't allow this greed to continue.

Thank you,
Inquirer:

Empire HealthChoice HMO, Inc.

This increase in my premium rate is unfair and is destroying our way of life. This is the 2nd year in a row that Blue cross is raising my premiums close to 30%. Our premium is already close to what we pay on the mortgage of our house. We are a married young couple who rarely go to the Dr but have this insurance for major issues through the market place. We will be paying $2,000 a month for two young healthy people if this rate hike is passed. This is CRAZY and unfair! We have used less than 10% of the $ value of what we have paid into the system in the last two years. We are self employed so we have no other choice but to buy through the market place. If our premium is raised I will have no choice but to drop out of the platinum program to buy a higher deductible plan. This will hurt the collective HMO as a whole, as we will be paying a lot less into the system and pay only for our Drs visits. The whole system will have less money in it because of the program that we would like to be in. This is a very bad business decision on Blue cross' part. It defeats the purpose of having people like us, who are young and healthy in the HMO who are already paying insanely high premiums. We are being bled out by the insurance companies. This is not only going to hurt the HMO but is hurting local economies because we have so much less money to spend outside of our Health Insurance. We are working to pay for health insurance! This is a disgusting way of life! This is mis-management and poor lack of business foresight is going to kill this HMO, for certain! Please do not let them hurt us with this increase. I am begging you to help us and deny this increase! Thank you for your time and concern. Sincerely,

Inquirer:

Empire HealthChoice HMO, Inc.

The requested increase of 29.6% is outrageous. Please deny this rate increase for Empire HMO 600 Gold, St, INN, Pediatric Dental, Dep 25 2016 HIOS ID 80519NY0160012/2017 HIOS ID 80519NY0160012

Inquirer:

Empire HealthChoice HMO, Inc.

I wish to formally register my disapproval over the proposed rate charges to Empire Blue Cross in 2017.

Inquirer:

Empire HealthChoice HMO, Inc.

I find it apaulling! Increase for what? This increase will make my monthly payment $556.60! You call this affordable?! Twice within the last month I have not been able to get prescriptions filled because they were not covered and would have each cost me an additional $500+. One was for an epi pen, I have severe reactions to shellfish and strawberries and and the other was for a cream to treat a skin problem in my ear. In 1989 I had a basal cell carcinoma removed and have to get annual check-ups. Under my current plan I now have to go to my primary care to get a referral for this. I was told by Blue Cross that they can see this but because of paragraph....I still need a referral from my primary. I had to go and spend money at my primary to get a referral and the in network dermatologist is not covered! In May of 2014 when I first took out this coverage it was $397 per month. They have increased it every year. This is a disgrace! Americans have all kinds of doctors and medicines and we can not access them! Please do not approve this increase. Maybe the pharmaceutical industry needs to be looked at. $545 for an epi pen that costs $35 to manufacture?

Inquirer:

Empire HealthChoice HMO, Inc.

I am a freelancer with an annual income that fluctuates greatly. The past three years have been difficult, and I have barely cleared enough to cover rent, food, and utilities.A 25% proposed increase for my medical insurance premium will certainly strain any savings I have. My Insurance is Empire Blue Cross Blue Shield, Pathway Enhanced, HMO. I didn't see that offered above, so I chose the one that sounded close to it. I would like to find a reasonable option.
Inquirer:

Insurer:

**Empire HealthChoice HMO, Inc.**

I have had the Dubin Breast Center perform various mammograms and unnecessary biopsies and since this event my insurance company reports my insurance will increase by 20%. I am supposed to have affordable healthcare but this would increase my rate by $100. Please help me.
To Whom it May Concern:

I am writing not only to protest the grotesque and absurd almost THIRTY PERCENT RATE INCREASE (30%) your vile company is trying to pose upon me and my husband, both of whom are young, active, healthy people with no children and no known medical problems.

We currently pay $1300 a month as a couple for a terrible HMO (which, as of June 1, I have not used once) with a $600+ deductible per person.

We live in Manhattan, NYC. We pay the highest apartment rent in the entire country, only one of the two of us is working (I lost my job in September of 2015) & now your vile insurance empire is requesting that we pay $380 more per month than we're already paying -- for a total of $1,780.40 per month!!!!  A 29.6% increase in a home with 1 income source & the highest cost of living in the USA. That is criminal. I haven't even used the insurance once, so you people are truly making out like bandits with our money. I see people around the country on social media sites complaining about paying $300+ per month for insurance. Imagine if they were in our shoes.

Beyond that, we are only 34 and 44 years of age. My husband's NYC doctors don't even take insurance so he pays you people and then pays the doctors on top of that. I take ZERO prescription pills & my husband takes a cheap generic pill for gout; we are not and have not contributed to your so called rising medical care costs. Additionally, because of this plan, I had to give up a lifetime of wonderful doctors who I trusted in NJ because I am no longer permitted to cross the George Washington Bridge for quality medical care. I am 100% dissatisfied and disgusted with this plan, this erroneously named "affordable" healthcare abomination, & the arrogance with which you think you can charge people whatever you want with no regard to common sense or to their situations.

No person in his/her right mind would ever continue coverage with a company like this, particularly one that requires referrals for any doctor visits outside of a general practitioner, at a rate of $1780/month. That's (far) more than a family of four would pay, and it's more than every single person I know, regardless of their health problems, pays for insurance. We will not do it; you people better rethink your plan. I will be voting FOR Bernie Sanders next week and AGAINST the private insurance industry; you can bet I won't be the only one.

*This name is rather ironic considering the fact that we no longer have any choices.

? Plan: Empire HMO 600, Gold, ST, INN, Pediatric Dental, Dep 25

? I have individual coverage and this plan is paid for by us for husband and wife.

? HIOS: 2016 HIOS ID 80519NY0160012/ 2017 HIOS ID 80519NY0160012

With regrets,

To whom it may concern,

I have been sent a notification stating that Empire HealthChoice HMO, Inc is filing for a 27.6% increase on the Empire BlueCross Blue Shield HMO 4000 X Bronze plan I have individual coverage for.
The HIOS ID number:
2016 HIOS ID 80519NY0160002/ 2017 HIOS ID 80519NY0160002.

I am completely AGAINST any rate hikes for this insurance plan. It costs me and my partner $886.92 a month as it is, and for that, we have a huge deduction and cannot go outside of network. It is already too expensive for too little health care.

If the cost does go up, Empire BlueCross BlueShield will lose my business. And I will consider the DFS to be immoral and anti-consumerist.

Thanks,

Dear [Name],

My name is [Name] and I have individual healthcare coverage through Empire Blue Cross Blue Shield. My plan is the Empire HMO 2000, Silver, S1, INN, Pediatric Dental, Dep 25 plan and my Identification Number is [Identification Number]. My HIOS number is 2016 HIOS ID 80519NY0160008/ 2017 HIOS ID 80519NY0160008. When I enrolled in this plan a little over a year ago the premiums were $471 monthly. A few months after I enrolled the rates went up to $553 representing over a 17% increase. Now they want to raise it again but by 27.6%! That is crazy! Please do not let this happen. If enacted, my premium would go up to $706, representing a 50% increase in my premiums in less than two years! This is immoral and untenable. I implore you to not allow this to go through. I understand that healthcare costs in general have gone up and that healthcare companies cannot be put in a position in which they are forced to lose money but can someone please explain how with a national CPI rate of 2% and 0% interest rates, both for about the past ten years, healthcare costs can go up by 50% in two years?!!! It defies logic. I am unemployed and doing my best to get by; I desire to spend my capital on STEM education so that I may gain the skills necessary to get back in the workforce. Please do not force me to instead spend my capital on exorbitant healthcare fees, which will only keep me in a perpetually depressed financial state and more than likely requiring government financial assistance. Thank you for your time and understanding.

Appreciatively,

[Name]

Name of Insurer: Empire HealthChoice HMO, Inc.
Name of Empire benefit plan: Pathway X Enhanced
I have individual coverage
HIOS identification number: 2016 HIOS ID 80519NY0160008/2017 HIOS ID 80519NY0160008

I currently pay $750.76 for individual coverage through the Affordable Care Act. I am in New York. The insurance company is asking for a 29.8% rate increase. That would add $210.21 to my premium making it $960.97. If you keep increasing the rate it will no longer be affordable. The cost will be close to what I was paying for private insurance when Obamacare became available and I was forced to switch

I am not receiving 29.8% more income from my job. I make too much money to get any government assistance with my insurance so the increase will all be on me. Where am I supposed to get the extra money from. With high cost of rent and high cost of medical care it leaves very little money left to live.

Is this so their rich executives can by more houses and cars?

Tell them NO!

To whom it may concern,
I am writing to comment on the proposed premium rate increase of 29% by Empire Blue Cross Blue Shield. I have individual coverage from Empire HealthChoice HMO, Inc. The name of my plan is Empire HMO 600 Gold and my HIOS identification number is 2016 HIOS ID 80519NY0160012/ 2017 HIOS ID.

I have purchased insurance through the Individual Marketplace Plans for 2015 (Health Republic, Oscar) and 2016 (BCBS). My experience with all of them has been very aggravating and frustrating in that the network of doctors and other health providers that accept these insurance plans is very narrow. What I have found is that two of my doctors may take one plan, two different ones may take another and the others don't take any of the Obamacare plans. One of my doctors who I went to in the past when I had "traditional", non-Obamacare insurance told me that she doesn't accept any of these plans because they reimburse doctors at about 20% less than traditional insurance. I tried to buy "traditional" insurance but found that I can't buy it as "individual" (at any price). I don't quality for any subsidies and feel that I am paying high premiums for poor insurance. I am OPPOSED to an rate increase when the network of doctors and providers is so narrow. If BCBS or any Obamacare plan wants to increase their premiums they should reimburse the doctors at a comparable rate to traditional insurance and widen their network.

RE: Empire HealthChoice HMO
Bronze 4000 Plan
Individual Coverage
HOS Identification Number: 2016 HIOS ID 80519NY0160002 / 2017 HIOS ID

I am writing to comment on the proposed 20.5% rate increase for the above plan.

I'm at a loss to understand this. 20.5% raise? Really?

The explanation for the rising cost of medical care? is vague and un-convincing. This term seems to have become a catch-phrase to dissuade further exploration into what this rising cost? actually is. Where is the money going?

I have a plan with a $4000 deductible and high copays. It is outrageous for my monthly premium and no doubt my copays/deductible (this is hinted at in the letter) to go up by 20.5%.

I myself AM a healthcare provider who is in-network with the above company. I haven't seen my reimbursement rate go up by even 0.5%, let alone the exorbitant 20.5% they are proposing for my premium. Where is this raise going? Certainly not back into the pocket of the consumer nor the healthcare provider. No doubt buffering a profit margin?

We simply cannot continue with this sort of blatant greed cloaking itself in vague terms like the rising cost of healthcare? when the healthcare provider and consumer are the ones getting squeezed.

Please don?t allow this.

Thank you.
I am writing to you to request that the proposed rate increase by Empire HealthChoice HMO, Inc. be denied. My information for your purposes is as follows:

The insured:

Empire HMO 600, Gold, ST, INN, Pediatric Dental, Dep 25
Health Insurance Oversight System (HIOS)
2016 HIOS ID 80519NY0160012 / 2017 HIOS ID 80519NY0160012

The current monthly premium I pay is $1291.32 for myself and Ms. [redacted] in individual coverage. This in itself is a large monthly premium for two people. We have combined made one visit to a physician in the first 6 months of this year. We pay what is for us, an enormous amount, and in return cost very little to Empire. They inform me that they intend to raise my premium by 29.6% starting in 2017. That would take my insurance costs from over $15,000 a year to nearly $19,000 a year. That is far more than I can afford to pay. I ALREADY pay more for health care than I do for rent.

What is more, I have had a terrible experience with Empire as I had to make an unplanned visit last year to an urgent care center for a head wound. Because it was not in network, I was forced to ask for reimbursement. After claiming that my first claim for was not found, I sent another with USPS tracking. They claimed that this claim for too could not be found. Then I submitted a third claim form which they indicated was missing a diagnosis code. I went to the provider to ensure that the proper code was written, they could not understand the problem as they had written the code in for me themselves. When I spoke with customer service at Empire, they regretted to tell me that they could not THEMSELVES internally communicate with the claims department NOR COULD I. I was not allowed to find out the nature of their issue with my claim form, and the health care provider was also at a loss. I resubmitted the claim form, apparently correctly guessing that they wanted the diagnosis code (which was written on the form already) to be written one line over. HOWEVER, at that time the claims department came back with another issue with my claim form that up until that point they had not mentioned. I was by this time working exclusively through a very kind customer service agent named Ms. [redacted] who was very apologetic that they did not tell me all of their issues at one time, but she too was unable to communicate with their own claims department due to some type of firewall placed between Claims and Customer Service. I made the correction that was indicated and submitted my claim for reimbursement for a fourth time. IT WAS REJECTED YET AGAIN for another small piece of information that they had never mentioned in any of the previous three attempts.
Once again, Ms. [redacted] was genuinely upset on my behalf, but once again she was powerless to help me anticipate what the claims department wanted from me. At this point, I ABANDONED my claim. It had taken up months of the calendar and so much of my time in its pursuit, that for my own emotional well being I had to eat the expense and let go of the pursuit. I genuinely believed, and stated this to Ms. [redacted] at the time, that their claims system was designed to discourage people like me from successfully making a claim. I cannot prove this, of course, but the fact that they not once but twice stated that my forms had never arrived (even when I had tracking confirmation that it was taken in by them)...the fact that their company is designed so that neither I, nor their representatives assigned to interface with the insured, are able to speak directly to the people assessing my claim forms, is ludicrous. It is incredibly inefficient and ineffectual on behalf of the insured. The salient question is whether this inefficiency is due to incompetence or something worse. I give Empire too much credit to believe that this is accidental. It is in their interest to make it virtually impossible for claims for reimbursement to be fulfilled.

You may ask yourself why I would stay with a company like this. Why not change? Believe me I wanted to find someone else. But the fact is that I am stuck unless I abandon my doctor. He takes this insurance. And as a freelancer in New York, I do not have access to PPO insurance. I have to pay out of pocket for HMO insurance...very expensive HMO insurance...and yet many health care providers refuse to take it because it is HMO. And honestly, would any other company that sells insurance to individuals be any better? OSCAR is not accepted by most doctors. The Freelancers Union is very expensive and limited in the doctors you can see.

Please deny their request. Please. I already pay a huge amount of my income to insurance that I rarely use but do not want to be without just in case of disaster. How can raising my rate be justified?

I look forward to your response.

--

Dear Sir/Madam,

I received a letter from my insurance carrier, Empire Bluecross Blueshield, that they are requesting a rate hike for my medical insurance policy. According to this letter, the proposed rate hike is 27.2%. That will add about $120 to my existing monthly premium of $437.30. I am currently working part-time at a college, making no more than $30,000/year. Such big increase in my premium would definitely create financial hardship on my part. I am therefore requesting that such a rate hike be disapproved. My detailed information is as follows:

My name: [redacted]
Insurance carrier name: Empire Health Choice HMO, Inc.
Type of Coverage: Individual
Dear Sir or Madam,

I am VERY, VERY opposed to such a hefty increase, $29.8%, for one-year for Empire Blue Cross Blue Shield for 2017. I was paying $685 a month in December 2015 and this monthly premium jumped to $750 in January 2016. How can it be increased again by nearly one-third?

The price is already a hardship as a single person paying for my bills and health insurance on my own. And outrageous! Let the chairman, board of directors and senior managers of the company reduce their annual salaries, their bonuses and pension payments, instead of creating more financial hardship for the policyholder.

I have Empire Health Choice HMO 0 Platinum, ST, INN Pediatric Dental.
I do not use the pediatric or dental coverage as I do not have children, but wanted the most comprehensive coverage.

I am not submitting my ID number because I wish to preserve my privacy and avoid fraud in case this information is passed along.

Thank you for considering my comments and refusing Empire’s outrageous request.

Best Regards,
source. Do not open attachments or click on links from unknown senders or unexpected emails. To whom it may concern: I received a rather alarming notice from my health insurance company, Empire HealthChoice HMO inc., alerting me that they are proposing to raise my rather high premium by 23.7%. I?m a self-employed freelance book publicist, and like so many others in this gig economy, I have to hustle to have enough work each year. I?m a single woman, and bear the brunt of all my expenses. I was startled to learn that another independent publicist I knew paid less per person for her family plan. Please deny the requested rate change. Thank you.

Empire HealthChoice HMO inc Empire BlueCross Blue Shield HMO 1000 X, Gold, NS, INN, Pediatric Dental, Dep 25, a multi-state plan Individual coverage HIOS ID 2016: 80519NY0330005 / HIOS ID 2017: 80519NY0330005

To whom it may concern -

I ask you with a kind heart... PLEASE DO NOT APPROVE THE PREMIUM RATE INCREASE for Empire HMO!!

A 23.6% increase is OBSCENE - considering how much we're paying already! I beg of you. As a freelancer, I'm barely making ends meet as it is. This increase would destroy me financially. I'm already struggling to meet the premium as it is.

Thank you for you time and consideration.

All best,

Maria T. Vullo, Acting Superintendent
NYS Department of Financial Services
Health Bureau ? Premium Rate Adjustments
1 Commerce Plaza
Albany, NY.12257

June 6th, 2016

Dear Acting Superintendent Vullo,

The application for an 29.8% rate increase by the Empire HealthChoice HMO represents an egregious abuse by a NY State approved health insurance provider and must be denied.
I purchased INDIVIDUAL coverage from Empire HealthChoice HMO, Inc. My HIOS identification number is 80519NY0160014/ 2017HIOS ID 80519NY0160014. Now only five months later into the previous increase of 18.4% (I am paying $750.76) I received notice of their request for a rate hike of 29.8%.

If you approve this increase, I would be obliged to leave Empire and would probably once again lose my doctors, hoping that I would be able to find others who are associated with the new plan. Does NY State?\'s iteration of the Affordable Care Act advocate for continuity of care and affordability for the consumer?

I am financially stretched and rely on your conscience, consideration and sense of fairness. While our country has embarked on a more affordable and inclusive health system, please do not let its aims be eroded by the insurance industry?\'s greed that in my case would squeeze the middle class beyond endurance. Profiteers are heavily represented by lobbyists, but who represents the public?

Please deny Empire any rate increase and please implement more robust oversight. Is legislation needed to protect the consumer? I look forward to hearing your reply and decision.

Sincerely,

[Name]
[Address]

Hello, I'd like to know if anyone is reading this and if someone can please respond and address/answer my concerns. It's been a couple weeks and I've heard no response or acknowledgment.

Thank you!

Executive Coach and Communications Consultant

[LinkedIn ~ Facebook]

On Tue, May 24, 2016 at 11:52 AM, [Name] > wrote:

Hi,

I am very concerned about the continued increases of premiums for healthcare, the constant changes of what is and what is not covered, and this latest proposal of yet another 29.8% increase for the coming year.

My insurer as a private/individual is Empire HealthChoice HMO. I pay a VERY high premium ONLY because it was the only plan that my doctors and specialists (whom I've been with for years) accepted under the new system. VERY disappointing. Just 5 months ago, my premium increased from $655 to $750 per month (!)...an approximate 15% increase. With this new proposal, you are intending to raise my premium ANOTHER 30% or $223.50 per month to a new monthly premium of $973.50. That is a 45% increase in the course of 13 months - ridiculous for anyone but particularly for one individual's plan with no flexibility.
Beyond the ridiculous cost, I have often also had to pay OOP for various additional things that were surprisingly not covered and not clearly stated as not being covered, and I have spent far too much of my own time moderating billing and charges between my Dr's offices and Empire. The changes are never-ending and make no sense. Too much of the Dr's time is wasted on process causing more mistakes, billing confusion and higher expenses for me as an individually insured, small business owner. Dr's blame the insurer, then Empire blames the Dr's. The gov't system to healthcare and ObamaCare in particular, is an incredibly flawed system that is only getting worse. This is costing people far too much in money, time and frustrations. Yes, you've managed to mandate and get more people signing up for healthcare. On the flip side, you've also significantly increased our costs, made it very difficult for people to maintain their doctors they've always had, and significantly decreased quality of service and healthcare overall. Who wins, those who make more money off of us.

In the notification letter I received, it is noted that there is a 30 day comment period but no mention as to what that comment action would produce. I do hope this serves as my official response and 'vote' to NOT increase these premiums ANOTHER 30%... and I do hope you have enough respect to respond directly. This is very frustrating and I cannot imagine how people in a lesser socio-economic situation are managing to get even decent healthcare support.

Please advise what will happen from here, what I can expect in follow up and your next steps. From the letter received, there is nothing indicating a potential non-approval of this rate increase. I hope you fairly evaluate the cost and burden placed on individuals of all plans and not just look for how to make more money from this system.

Thank you!

Insurer Empire Blue Cross

Individual coverage monthly 1275.82
id number
HIOS 80519NY0160014/2017

TO WHOM THIS MAY CONCER
EMPIRE BLUE CROSS WANTS MY INSURANCE TO B E RAISED BY 29 PERCENT.
THIS IS TOTALLY UNFAIR.
PLEASE DO NOT APPROVE THIS. THEY ALREADY INCREASED IT PREVIOUSLY.

THANK YOU
Please note that I had a major increase in January already. How can they do it again?

Hello,
I just received notification of a proposed rate increase next year. As a solo entrepreneur living in Manhattan, it's already difficult enough to cover my own health insurance, let alone a 27% rate increase!

I have individual coverage for Empire BlueCross Blue Shield
My HIOS ID number is:
Dear Sir/Madam:

I just received a notice from Empire Blue Cross/Blue Shield that they are applying for a 27.6% increase. I cannot afford the health insurance premium I have now as I suffer to pay my current monthly premium of $553.40 - much less the new monthly premium of $704 they are requesting!!!

PLEASE DO NOT ALLOW THIS INCREASE!

The profits made by insurance companies are already sky high and I will be forced to out of the insurance pool because I won't be able to pay any longer.

Please help. Please.

Thank you,

Hello this is ... I currently have empire hmo 2000 and received a letter in regards to a premium increase of 27.6 this is outrageous. This would go from 1577 to almost 2000. I def am not willing to spend that amount of money on something that doesn't provide good coverage. I am disgusted with the way insurances handle and deal with everything. I want to find out what am I supposed to do come 2017 because i am not going to pay 2000. When will i know of the official increase.

Please advise

Price hikes of nearly 40% in just two years? With a reduction in benefits?
Without slowing the rising cost of health care? How is this possible?

Shouldn't a larger pool of people with medical insurance mean LOWER prices?

Unbelievable.

Why are the insurance companies allowed to do this without opening their books to policyholders?

As advocates on behalf of those policyholders, why are you not demanding a precise public accounting of what these companies are earning and spending?

I have an individual Silver policy with Empire HealthChoice HMO.

2016 HIOS ID 80519NY0160008

I may not have it much longer.

Hello,

Ny insurer is Empire HealthChoice HMO, Inc
I have an individual Empire HMO 600 Gold Plan
My ID is 2016 HIOS ID 80519NY0160012 / 2017 HIOS ID 80519NY0160012

I was just informed of a request by Empire BCBS to raise my premium by an insane 29.6% which I obviously object totally. No company managed by competent management raises their prices by such percentage. I propose to sack its incompetent management in proportion with the premium increase, i.e. for a 5% premium increase, the top 5% managers of Empire BCBS are fired. For the proposed 29.6% increase, the top 29.6% managers of Empire BCBS are fired without any kind of severance package. Being irresponsible should have a cost that policy holders and payers should not bare!

Hello,

Just received a letter informing me of a 2017 increase to the cost of my already exorbitantly priced health plan. Below is the information as requested by the letter received -

Name of Insurer = Empire HealthChoice HMO, Inc.
Name of Empire Benefit Plan = EMPIRE HMO 250 X, Platinum, NS, INN, Pediatric Dental, Dep 25.
I do in fact have Individual Coverage.
My HIOS Identification Number is as follows - 80519NY0160115
I presently pay $413.39 a month for my coverage and that is with the APTC. The cost would be upwards of $600 without the APTC. The $413.39 amount is more than my student loans monthly. It is more than my rent monthly. ANY increase would be substantial, as I live pay check to pay check.

I am forced to choose this insurance company/level of service due to a lack of availability in the market. My necessary medications are not covered on other plans. My necessary practitioner visits are available pretty much only through United Healthcare (which is much more expensive) and this plan I have now.

For a single, working-class individual this proposed increase of 19.9% is not only unmanageable but frankly insulting. This places my monthly total (assuming I am approved for my APTC again) at $496.07.

I would like to formally contest this increase in any manner which I am able. Any assistance which you may be able to provide me would be greatly appreciated.

Thank you for your assistance in this matter,

[Name]

My insurer is Empire HealthChoice HMO, Inc. My plan is Empire HMO 0 X, Platinum, ST, INN, Pediatric Dental, Dep 25. I have individual coverage. My HIOS identification number is 2016 HIOS ID 80519NY01600014/ 2017 HIOS ID 80519NY0160014.

I am writing to protest the proposed 29.8% increase in the 2017 premium rate. It is outrageous and unjustified. There was a 7% increase in 2015 and an 18% increase in 2016. Even these were way above the rate of inflation. There is no reason to grant further increases. The insurance companies should not be allowed to reap large profits off the ACA. Health care is a right, not a privilege! Please deny Empire's requested increase.

Sincerely,

[Name]

Insurer Name: Empire HealthChoice HMO
Benefit Plan: Empire HMO 4000 for HSA, Bronze, ST, inn, Pediatric Dental, Dep 25
Individual Coverage
HIOS ID #: 2016 HIOS ID 80519NY0160002/2017 HIOS ID 80519ny0160002

To Whom It May Concern:

I'm writing to express my deep concern about the proposed rate change of 27.6% to my health insurance premium. I currently pay $443.46, which would bring my premium to approximately $565.85 per month.

Such an increase would cause considerable financial strain for me with increasing living and transportation costs in New York City. Additionally, I work as a freelancer. so my income varies per month and consistent employment is not a reality.
An increase of 27.6% violates the spirit of the Health Care Exchange, which is designed to offer affordable health insurance for individuals such as myself, therefore I strongly urge you to oppose Empire's proposed increase and opt for a minimal increase more befitting of the needs of the insured of New York State.

Thank you for your consideration.

Sincerely,

[signature]

My HIOS identification number is 2016 HIOS ID 80519NY0160012/2017 HIOS ID 80519NY0160012. I received a notice of increase possibility of 29.6% for 2017. I don't really understand since my income is now 50% of what it was last year. I am now on social security disability. Is there anything that can be done to avoid this increase as I won't be able to afford it on my limited income. thank you and please contact me with a possible solution.

[signature]

Maspeth NY 11378

Empire HealthChoice HMO, Inc.
Empire HMO 600 X, Gold St, Inn
Individual Coverage 2016 HIOS ID 80519NY0160012/2017 HIOS ID 80519NY0160012

I am both shocked and dismayed, but not at all surprised that once again, the state and insurers are in collusion to once again justify their existence but requesting an almost unbelievable rate hike of 24.9%. Did anyone actually stop and think how this increase, multiple times higher than the rate of inflation, will affect the families that have to pay for it. Obviously, the answer is no.

Are you not aware that unless people have benefit of working for the state, or any municipalities that pays 100% of insurance costs, that this increase will be an unmanageable burden for all. The majority of us in the private sector has seen our paychecks basically stay stagnant for many years. This increase will no doubt cause many to drop their coverage, with the unintended result of even high medical costs for all.

I would love to hear your explanation in favor of this onerous increase.

[signature]

HIOS ID: 2016 HIOS ID 80519NY0160014/2017 HIOS ID 80519NY0160014

Dear Sirs
Managing Director

Dear members of the DFS,

I have received notice that my premium might be about to increase by 27.6%. Added to my monthly premium of $413.46, I will have to pay an additional $82. I have been working as a freelance writer since losing my job in 2011. My income varies greatly depending upon how much work I have in any given year. I find that my Bronze coverage from Empire Blue Cross does not cover many of the medical costs I incur, or at most I must pay significant charges over and above what Blue Cross pays. In addition, the cost of that coverage has increased several times since I signed up, and I am asking you to deny this additional increase they are asking for.

My insurer is Empire Health Choice HMO, Inc.
My benefit plan is Bronze coverage
It is individual coverage, for me only
MY HIOS identification number is 2016 HIOS ID 80519NY0160002
2017 HIOS ID 805 19NY0160002

Thank you for your attention to my request.

Sincerely,

[Name]
I find the notice of Premium Rate Increase of 27% absolutely outrageous!! I'm a very healthy individual of 46 y.o. of age, which requires a Dr. visit for regular check up once a year, and I already had about a 10% Premium increase from 2015/16. When I asked the reasons, they said that rates are based on general public health and they get balanced between healthy and unhealthy individual, and also the rising cost of medical institution and medicines.

The system of health insurance is a failure, it should be only one rate for all, or a portion of your income, paid with taxes, like every other civilized country in the world.

It's ridiculous that I have to pay $ 5247.6 a year, just to live with the terror of an emergency, and also because my life which doesn't incur to be involved in the SAD diet (Standard American Diet), where the American corporate food industry start poison their citizen at early ages, creating the large unbalance of health problems between individual who care about what they eat and not.

At times when I want to have someone notice the phenomenon, all I have to do is to tell them that America | USA is the only place on earth where "poor" people is fat! Why: because of disgusting foods sold at 99cents like Mc Donald breakfast or others brands.

Sorry for the rant, but I'm totally against any Premium rate Increase!!

Thank you

Skype: 
Ph. +

To Whom It May Concern:

At first one is tempted to think that our insurer -- Empire Health Choice HMO -- misplaced the point, and that their real rate increase request is 2.44%, not 24.4%. Surely, after jacking up the prices 12% or thereabouts the year before, they are not coming back with an appeal for double that this year? all the while increasing the deductibles and otherwise reducing benefits.

But it appears that they are, and that is simply outrageous. DFS must deny anything close to last year?s increase, let alone this year?s.

We?re counting on DFS to do the right thing. Thank you.
Dear Madam/Sir,

I am writing to you regarding a 16 May letter that I just received from Empire Blue Cross Blue Shield, advising that they are proposing a premium rate increase of 27.6% which would increase our monthly premium by $305.

My husband and I are both freelancers and find such a large, one time increase outrageous. If such an increase were approved by the DFS, we would very likely be forced to cancel our plan with Empire Blue Cross Blue Shield.

We had a disastrous experience with United Healthcare through the Marketplace / Obamacare and thought we had finally found a decent and somewhat affordable plan with Empire Blue Cross Blue Shield, although we are permanently paying out of pocket for co-pays, deductibles, specialists, prescriptions, etc. which makes the word 'affordable' kind of a joke.

Below please find the following information about our coverage -
1. Our insurer is Empire HealthChoice HMO, Inc.
2. Our plan is Empire HMO 2000, Silver, ST, INN, Pediatric Dental, Dep 25
3. Our plan is Individual
4. Our HIOS identification number is 2016 HIOS ID 80519NY0160008/ 2017 HIOS ID 80519NY0160008

We sincerely hope that the DFS will not approve this increase.

Stop the madness of the cost of healthcare in this country!

Thank you.

Sincerely,

Empire HealthChoice HMO, Inc.
Individual
HMO

I am writing because I am opposed to a 23.6% increase to my current Empire HMO 2250 Silver, NS INN, Pediatric Dental Dep 25 Health Insurance Oversight System (HIOS) identification number 2016 HIOS ID 85019NY0160010 / 2017 HIOS ID 80519NY0160010 Plan. The current deductible for this plan is $2550.00 and OOP Max is $6500.00 for and individual, this is extremely high considering the current premium paid $507.33. A 23.6% increase should not be approved and deductible and OOP max should be lowered.

By the way, this is my HIOS ID number: 2016 HIOS ID 80519NY0160010/2017 HIOS ID 80519NY0160010

To Whom it May Concern:
I am writing to strongly urge you to deny the proposed increase to Empire BlueCross BlueShield's premium rate for the Empire HMO 2250, Silve, NS, INN, Pediatric Dental, Dep 25 health insurance offering.

My husband and I are already paying $1014.66/month to achieve barely adequate levels of health care. The proposal to increase premium rates by a whopping **23.6% (that's $233 PER MONTH)** is both absurd and offensive. This plan is already restrictive beyond belief and makes me feel that my health care is out of my hands. My health is a matter for bureaucrats to decide with no regard as to what is best for me or my needs. Paying $1k/month for that privilege is already sickening; to pay an additional **$2,800 PER YEAR** for it is unacceptable and will force me to drop the plan and move to an even less adequate offering.

I hope you seriously consider the proposal and fully understand the very negative consequences it will have for the people of New York. When the time comes, say no to this egregious request.
I just received a notice from Empire of NY that my rates will increase by 22% for 2017
Empire increased my rates 16% in 2016
and I filed a complaint as that is more that the regulated amount permitted to increase rates.
Nevertheless the rate still increased.

I have an individual plan and am appalled that empire health choice hmo is permitted to do this
every year, with such unchecked profits.
I would like to register my complaint and have some regulator stop this greed and unchecked
cruelty.

Thank you for your help

My insurer is EMpire HealthChoice HMO, INC
I have individual coverage
My plan is EMpire HMO 600 Gold ST, INN, Pediatric Dental, Dep 25
My HIOS id number is
2016 HIOS ID 80519NY0160012 / 2017 HIOS ID 80519NY0160012

According to your website DFS: on average insurers requested 10.4% rate increase in the
individual market and DFS reduced the average more that 30% to 7.1%
which is below the average increase in health care costs of 8%.
Unfortunately this has not been true for Empire Blue Cross.
A brief history:
As you know, a breach in the security of Anthem /Empire Blue Cross was released to the public, a
massive privacy violation of over 80 million people. They have yet to be held accountable for this
lack of oversight.
In 2013, Anthem agreed to pay $1.7 million after it allegedly left the data of 612,000 customers
exposed. That data included names, addresses, phone numbers, birthdates, Social Security
numbers and health information.

Government pressure should be applied vigorously, clearly this has happened before and they
have been slapped on the wrist. They are a company with unbelievable wealth and profits. Their
primary job should be to safeguard their clients health and privacy and they should be held
accountable by government and watchdog groups.

In 2010, Senators Boxer and Feinstein put pressure on Anthem Blue Cross of California (the parent
of Empire Blue Cross of NY)
due to their extraordinary increase of 39 percent to individual health insurance policies.

Three years later, premiums increased dramatically.
In 2009 a $5000 deductible policy premium was $180.
In 2011 it was $264.
In 2012 it increased by 19.6% to $316.
For 2013 it increased by another 14.2% to $361.
In 2014 and 2015 the premiums rose by nearly 10% each year.
2016 over 16%. and now the proposal is 22%.
My premium is over $700 this year and will be over $840 next year.

Blue Cross Anthem/Empire blames the rate increase on rising medical costs, while their profits soar.
They have the audacity to fault the affordable health care act for "forcing people to get health insurance" and "driving up premium costs."
I am disgusted by the power of the insurance companies, their impunity and ability to frighten and impoverish individuals.
Please continue to fight for the citizens of New York
We need your voice, your authority, your regulation and your help,
now more than ever.

I received a notice that my rate is going to increase by 27.6%. That is an exorbitant increase for a health insurance plan. As a small business owner and entrepreneur, this is asking for an exceedingly high monthly cost for me to pay out of pocket.

In your notice, you list some of the following things as reasons for my rate going up:
- Changes in the federal transitional reinsurance program: what is this?
- Changing pool of customers: Is this really a valid reason? Please explain why is that something my premium should go to pay for? Your letter doesn't provide sufficient details.
- Experience with provider networks: what does this mean and why do I need to pay for it?

The letter also mentions there will be coverage changes to all individual plans. How will my coverage be changed? Am I going to receive less coverage for more money? Am I going to receive more coverage for more money?

What are the alternatives to paying a higher rate on my insurance? This letter is almost useless in explaining any details that the average american would understand.

Please find below the information you require from me:
1. Name of insurer: Empire HealthChoice HMO, Inc
2. Name of Empire benefit plan: Empire HMO 2000, Silver, St, INN, Pediatric Dental, DEP 25
3. I have individual coverage.
4. HIOS identification number: 2016 HIOS ID 80519NY016008/ 207 HIOS ID 80519NY0160008

FYI: I visited the website listed that contains a "plain english summary of rate change". There were so many documents and plans, I have no idea what I am looking for and I hate to see what the actual documents contain as 'plain english'.

If I don't get sufficient information regarding the above, I plan on taking this to my NY state senator so that proper action can be raised in congress. To receive a notice that a rate is going to be raised by 27% is absurd when inflation hovers around 3%.

Thank you,

[Name redacted]
Dear DFS

my current BCBS monthly rate/charges for individual health coverage is $645.66 per month

BCBS has requested an increase of 29.6% for next year (my new rate if they stop there would be $836.77)

has anyone noticed this is effectively a thirty percent increase all at once?

I cannot believe this outrageous proposal
With this increase Empire BCBS is effectively asking us, the insured, to either drop coverage or downgrade coverage

Please do not allow this increase

Thank you

Dear One,

My insurer, Empire HealthChoice HMO, Inc., has submitted a request for a 29.6% increase in premium rates for 2017. My benefit plan is Pathway HMO. I have individual coverage. My HIOS identification number is 2016 HIOS ID 80519NY0160012 / 2017 HIOS ID 80519NY1060012.

I am writing to comment on this exorbitant price increase request. I work for a tiny nonprofit with an annual budget of less than $100,000 a year. As you can figure from that number, my salary is significantly less. The only benefit I get for my job (no pension) is my health insurance. How is a small nonprofit with only one staff person supposed to provide health insurance on such a budget when the insurance goes up every year? I have changed my health insurance five out of the past six years because of these ?criminal? rate increases, constantly chasing a more affordable premium that will still provide reasonable care with doctors I know and trust. The Affordable Care Act has done little to nothing to curb profiteering insurance companies from bankrupting individuals and small employers. The nonprofit for which I work is a religious nonprofit. My job is more a vocation, a ministry, than a job. That?s why I dedicate myself to it despite the financial limitations. (I was once a tenured college faculty member. I hold a Doctorate in Education.) I do not believe people and organizations doing good should have to risk bankruptcy because of the greed of private health insurance companies.

I suspect that not even you get a 29.6% pay increase every year. I suspect few if any companies get a 29.6% increase in their budget every year. How is it that anyone could even think to ask for such an increase, let alone agree to it? I would think your job is to protect the people from such corporate greed. Wasn?t the ACA supposed to limit allowable increases in premium rates? What?s going on here?
I urge you to say NO!!! to Empire. Their explanation of why they ?need? the increase is bogus, and anyone with any insight into the salaries of health insurance executives and health insurance policies that deny people vital health care as determined by people who neither know medicine nor the patients knows that the ?need? is bogus. Health insurance companies should be granted no greater premium increase than a cost-of-living increase of the poorest workers. And since they?ve been granted double-digit increases for years, they should have to wait for the rest of us to catch up to them. I recommend they get NO increase at all until that happens. As a matter of fact, a cut in their rates would be much more just.

STOP feeding corporate greed. Say NO!

Let?s civilize health care in the U.S.A. the way it is in just about every other developed country in the world. Dedicate yourselves to UNIVERSAL Health Care, Medicare for All instead of constantly approving ?criminal? premium rate increases for profiteering health insurance companies.

Sincerely,

[Name Redacted]

Middle Village, NY 11379 (home address)

To Whom It May Concern,

I received a letter from Empire BC BS yesterday regarding a proposed increase and I would like to offer my strong comments and experiences.

This proposal is shocking and completely disheartening and detrimental in many ways.

Those of us who (1) live in New York, (2) are self- employed and, (3) thus NOT participating in employer-based plans OR (4) not participating in government supplemented "marketplace"plans have few options from which to choose; and all are HMO's.

2016 was the 3rd year in a row I have had to change insurance plans because the Insurer dropped their INDIVIDUAL PLANS IN NYS. When selecting a new plan for January 2016, only Empire BC BS offered Providers where at least a few of the doctors I have regularly used participate. A doctor/patient relationship takes time and is an important element in maintaining once's health; perhaps NOT to a 25 year old, but certainly to an ageing individual. Having to change doctors yearly is not ideal.

With few options and a desire to have excellent coverage (despite being healthy and without chronic or acute illness), I chose a plan that is quite honestly a hardship for me to afford. I sacrifice other things to be able to make this monthly payment; which is an outrageous $750.76 per month. (FYI, None of the providers I see will accept Marketplace plans.)
I am not dissatisfied with my plan, but a rate increase for 2017 is too soon and too much! It seems incongruous that those of us that are not supported by employers, who do not take advantage of government subsidized plans, and who have so few options, are getting an increase. But not just a small increase, but a whopping 30% increase! This is truly outrageous and inexplicable to me. I, and I am sure thousands of others, are being priced out of these plans. I am paying a higher premium this year than I did with my prior insurer last year. I know I will not be able to handle another increase and I will once again have the same issues of starting this awful process all over again. Where does this end and what recourse do we have to delay this increase and reduce the huge proposed amount?

I appreciate your consideration of my comments and ask that you please PLEASE DENY the 2017 proposed increase.

Kindly acknowledge receipt of this email and please advise if it or other details should be sent to any other person or organization.

Sincerely,

Empire BlueCross BlueShield, Pathway Enhanced - Platinum Plan. INDIVIDUAL coverage
HIOS ID# 2016 HIOS ID 80519NY0160014/ 2017 HIOS ID 80519NY0160014

Attn: President, New York Commercial
New York State Department of Financial Services (DFS)

Please explain to me what part of "affordable" is the threat of raising much needed health insurance by 29.6%!!! What other industry has the hubris to give themselves such a raise at the expense of those they serve! Health care is not a luxury it is a necessity. SHAME ON YOU!

As someone who is too young to retire and too old to rehire, and currently making do on my $425.00 weekly unemployment as I continue to be ready, willing and able to work -- I am in the untenable position of being squeezed to death between much needed health insurance, much needed housing, paying taxes and generally being a good citizen who has contributed to society all my work life. Again, SHAME ON YOU!

**Do not approve this hijacking of health care coverage.**

After digging deep into my pockets after I lost my job (agency outsourced to a 3rd party provider, all jobs were eliminated) I recently elected a managed health care plan provided by Empire BCBS as the only plan that my three longstanding providers accepted. Mind you, this is an HMO! Imagine my shock to learn, I will not be able to afford a managed health care plan should this rate hike go into effect.

**DO NOT APPROVED THIS PROPOSED 29.6% INCREASE**

Name of Insurer: EmpireHealth Choice, HMO, Inc.
Empire Plan: Empire HMO 600 X, Gold, ST, INN, Pediatric Dental, Dep 25
HIOS ID #: 2016 HIOS ID 80519NY016001
Individual Coverage
New York City

I got a letter from my insurance company Empire HealthChoice HMO, Inc.

plan name: Empire HMO 4000 for HAS Bronze ST, INN, Pediatric Dental, Dep 25
Individual coverage.
HIOS ID number which is 2016 HOISID 80519NY0160002/ 2017 HIOS ID 80519NY0160002.

Yes, really I had to type that in.

This time they are asking for 27.6% !!!!
It just went up last year by something like 10% so I had to cancel my dental insurance!
My insurance is going to go from $443 to $565

Your job is to make sure that ?Premium rate increases are justified and not excessive?
Dfs.ny.gov/healthinsurancepremiums
This is excessive.

I tried to get the cheapest possible insurance because I really take care of my body and want to use an HSA.
My pay doesn?t go up 26% in a year.

Force the insurance companies to work on inefficiencies and do a better job rather than pass their inefficiencies on to the consumers!

I will change insurance if you proceed with this change and they will lose an insured that only uses the doctor for a checkup every other year.

The website that is referenced on this letter is a great indication of the inefficiencies in the system. The letter says that rates will change in 2017, and the webpage has a bunch of changes indicated for 2015-01. See attached.
Empireblue.com/ratefiling

Hello,

My name is

I am writing to request the REJECTION of the Empire BlueCross BlueShield rate increase for 2017.
A 27.6% rate increase seems outlandish and irresponsible to the consumer who may be forced to get inferior coverage or a higher deductible plan - which in tern causes financial set backs, anxiety for my family and frustration towards our health care system.

My insurer is Empire HealthChoice HMO
My Empire benefit plan is Empire HMO 2000, Silver, ST, INN, Pediatric Dental, Sep 25
I have family coverage for my Wife and myself
My HIOS id # is: 2016 HIOS ID 80519NY0160008 / 2017 HIOS ID 80519NY0160008
Thank you for taking into consideration my concerns when deciding to reject or accept the rate increase request. BlueCross BlueShield does not need any more profit from the individuals who are simply trying to have basic coverage and remain/promote healthy lives.

Sincerely,

To whom it may concern:
My family has Empire HealthChoice HMO, Inc, individual plan. ID number: 2016 HIOS ID 80519NY01600107/2017 HIOS ID.
I find it outrageous to increase the health insurance premium by 19.3%!! It's excessively high and makes it no longer affordable.
if you go ahead and raise the premium with that amount, I will discontinue the plan and choose another insurance company.
A few percentage points I would be ok with, but 19.3% I find offensive.

Best,

5 26 16
TO: DFS:
Regarding: Empire HealthChoice HMO, Inc.
My Empire Benefit Plan: Empire HMO 2250, Silver, Pathway Enhanced
I have individual Coverage
2016 HIOS ID  80519NY0160010/ 2017 HIOS ID 80519NY0160010

Once again, Empire BlueCross BlueShield (parent Anthem) is asking for a gigantic rise in premiums of 23.6%?far more than the average that other companies are asking for. (For 2016, ?Health insurers in New York filed for average 2016 rate increases of 13.5% for individuals who buy their own insurance, including sole proprietors, and a 14.3% average hike for the small-group market, according to data released by the state Department of Financial Services.?)

This demand for an increase that has no basis in reality is all in the name of share holders and the financialization of the country, where only hefty profits matter, not business investment. In fact, no matter how they separate their many companies, ?affiliated foundation,?etc. Anthem, Empire Blue Cross/Blue Shield?s parent, saw hefty profits in 2015. See this Article:

Higher rates, membership fuel Anthem's quarterly profit
By | April 29, 2015
(Story updated at 2:45 p.m. ET.)
Anthem raised financial guidance for the rest of the year after the Indianapolis-based health insurer posted $865.2 million in profit, a 23.4% jump from the same period last year. Premium rate hikes, large growth among its Medicaid health plans and lower medical claims all contributed significantly to Anthem's profitable quarter, the company said Wednesday. Earnings per share totaled $3.09, well above Wall Street's consensus prediction. Anthem's medical-loss ratio, or the amount of premiums that go toward paying healthcare services and procedures, was 80.2% in the first quarter?down from 82.7% in the prior-year period. Anthem joins UnitedHealth Group and Aetna among the blue-chip insurers that said their medical costs and utilization trends have not increased at all so far this year. ?First-quarter revenue increased 7% to $18.9 billion!!
Profits dropped some in first quarter of 2016, only because they were so huge in 2015. Profits come from premiums and it is absurd for any business to try to make them go up and up by gigantic percentages?markets fluctuate. Some months, my meager retirement mutual fund loses money, so why does Anthem/Blue Cross expect to never lose a dime in any quarter?? Additionally, and I quote Forbes:? Anthem appears poised to move forward with major plans and changes this year. It made a move last July to acquire health insurer Cigna for $54.2 billion, the largest transaction in the sector in history.?

Why should I pay for a loan and interest to buy Cigna, and why buy Cigna if health care is allegedly not profitable enough? Not to mention, Anthem?s negligence in Cyber security caused a huge breach, which they now seem to want us to pay for in increased premiums. Updated security is part of doing business and if Anthem has billions to buy Cigna, and gigantic sums to pay CEOs, they can invest in their business without charging the insured. In fact, most of our money is to go to HEALTH CARE SERVICES only.

Finally, what product in the world do you buy at a price, and THEN be told the price is nearly 25% more because the company did not make big enough profits? This amounts to bait and switch and nothing more than insurers being asked to make certain a company continues to make bigger and bigger profits, when that is NOT how it works in a free market. No company is guaranteed ever-increasing profits in a free market. Their costs are currently well covered, and this has been well documented in the media. It is excess profits they want us to pay for, nothing more. This is the largest insurer in the nation, and more and more clients, which they have courted and gotten, means more money based on volume, that is how a market works. In fact, they continue to court more clients, knowing only a small percent have serious medical needs and that more clients, like Cigna?s represent more profits.

I would suggest they cut CEO pay and bonuses, and stop wasting money ?marketing? to me, sending me endless letters about signing up to visit a physician online, for an even bigger fee than my primary physician, of course. And, while it may be commendable that Empire and its associates and affiliated foundation give millions to various organizations, such as the Asian American Federation, the Jewish Community Relationship Council and 100 Black Men of New York, this is a tax deduction for them and many of these groups are more political than health related. I would certainly hope that they don?t need more profits from my premiums to get these tax deductions. It they want bigger profits, let them cut costs. And negotiate with big Pharma MUCH better than they have.

As one of the millions of the self-employed, who it has been well documented use health insurance far less because of high deductibles, etc, I cannot afford an obscene increase like this, although clearly they are trying to game the system by asking for far more than they need, knowing they will probably get less than they ask for. In fact, I used it just once for an animal bite, the urgent care center I was encouraged to visit charged me $250 to take my blood pressure and tell me to go to a hospital. I had to pay this toward my deductible. I ended up paying the emergency room over $1000 in addition, toward a huge deductible. I have to wonder, what good is this policy at all? If they get more than a 5% increase, I will be forced to join the ranks of the uninsured. I now have zero profits, thanks to landlords and health insurers, in a State that is quickly killing what was once a middle class. So save the letters and the postage, Empire, and stop ?marketing? to me for even more expensive ?video care.?

Brooklyn, NY

To whom it may concern:

I am currently a member of Empire BCBS and I am appalled by the idea that my health insurance premium is going to increase from $645.66 to about $813 a month, 29.6%!

Bottom line is, the only one who makes out well from this is the insurance company. I would like someone to explain why the profit of an insurance company is more important than decent healthcare coverage for Americans.
I am a patient and a doctor, I see it from both sides. What has happened as a result of high premiums and high deductibles, is people do not go to the doctor until something becomes severe and at that point treatment is more difficult and often prolonged. In addition, patients are not willing to get certain tests recommended by their doctors and they are not getting the most effective medications.

And specifically, as a patient, I recently had a very big issue with Empire BCBS. I had genetic testing done in October 2015. Empire BCBS denied the claim and I was billed $817. But I read my benefits like I am supposed to, and I knew it was supposed to be covered in FULL, not subject to my deductible. After more than 10 phone calls to BCBS, after a written appeal that was denied, and after 6 months, I finally received a call from BCBS in Albany telling me the testing was covered in full and I have no member responsibility. Please tell me how you are going to allow an increased profit to a company who has incompetent people working for them? Not one person I spoke to, including at least 3 "resolution specialists," understood my benefits better than I did. How did I know more than them?

From my understanding, Obamacare limited insurance companies to 20% administrative profit, well then of course they are going to increase premiums, decrease coverage, and pay doctors less! They want profit! The CEOs of these companies do have a very important job, but they make millions. Anthem BCBS CEO made $14.5 million last year from what I read. In my opinion, this is totally unethical and should be illegal. By the way, this is absolutely at the cost of people's health, totally immoral.

Please, I beg you, do not allow this extreme increase. I am an independent contractor and I am one person. I am not a large corporation. I am healthy and have not even used the insurance I pay for. If my money goes to people who cannot afford insurance then fine. If it goes toward helping people get treatment for their diseases and to the doctors treating them, then fine. But if it is going into the pockets of health insurance companies, then I hope you agree that it is not necessary to increase premiums to this extreme. Especially when the company itself is completely incompetent, multiple phone calls, appeals and 6 months for my issue to be resolved when it was covered the whole time.

We have a lot of issues with our healthcare system, but this will not help the ultimate goal of keeping people healthy and properly treating those that need treatment. Isn't that what it is all about? Or maybe I should have had a career in health insurance instead of healthcare.

Thank you for your consideration and time.

Sincerely,

To Whom It May Concern,

I am writing to express my complete indignation at the proposed 29.6% increase for 2017 premiums in the below described policy with Empire Health Choice HMO Inc. This follows a whopping 36% increase which we, who make very little money as artists and educators, had to absorb between 2015 (monthly premium $542.88) and 2016 (monthly premium $738.32). All of this when the national inflation rate is LESS THAN 2.5% and our incomes continue to decline!

How dare you exploit people in this manner? It seems that its OK to guarantee the health of insurance and pharmaceutical companies at the expense of the working population that struggles to make ends meet. Where will this end?
To whom it may concern,

My information:
Name of insurer: Empire HealthChoice HMO, Inc.
Benefit plan: HMO.
Individual coverage.
HIOS number: 2016 HIOS ID 80519NY01600008 / 2017 HIOS ID 80519NY01600008

I am writing to you to protest the outrageous suggested increase in premium rates. Empire want to raise rates by 27.6%. This is egregious and well beyond any reasonable inflationary rate. Last year, they had suggested a rate increase of around 19%. So over the past 2 years, if Empire had their requested increases approved, my monthly premium payments would have gone up by 50%!

I urge you to reject this increase outright and give them perhaps a 3-4% increase at most. This company states the same reasons this year for increases as last year - so what is the problem here? They don't know how to manage their own business?

It is completely unfair that these companies ask for ridiculous increases. They know that we are held hostage to insurers because we are required by law to have medical insurance - so we are a captive customer base to them. Please send a message to them and reject their proposed rate increase.

Also, I know Freelancers Union is looking into this matter and considering other insurance options for freelancers. I am a member of this organization and originally had my insurance through them. I hope they find a reasonable option and freelancers leave Empire.

Best regards,
Please do not allow any more rates increases on these medical policies. The current cost and deductibles are exorbitant.

I'm contacting the DFS on the projected 25.1% proposed rate changes for the 2017 Empire Health Choice HMO. Please provide me with "more information and read my comments about the proposed rate changes." Last years 12.6% increase was approved to the full proposal. Will the 25.1% be approved "to the full proposal". Why is Empire small group market only 12.6% The notification received from Empire HMO on May 18, 2017. Why are we requesting a rate change states "the main reason we are requesting a rate change" *. Rising in medical costs, changes in federal transitional services, changing pool of customers, and experience with provider networks. * In 2017 there will be coverage changes to all of our individual plans I reviewed the 7 page approval of community rate changes from Empire Blue Cross and Blue Shield and do not see the changes to the plans. My rates will increase by 25.1%. I'll be paying 25.1 MORE for LESS. I know the deductibles, co-pay, out of pockets max, prescriptions and more will all be significantly increased from 2016... In reality I'm paying 25.1% additional premiums PLUS adding another 25% - 40% increase to my out of pocket payments. This a minimum of a 50% increase in 2017. Due to changes my tax credit will be reduced to almost nothing. It is under the NYS DOH Affordable Health Care. WHO is it affordable to?? It seems to be affordable to the Insurance company's not the individual, or in their words "customers" I am not a customer but a NYS resident seeking fair and affordable health care. Please review my comments. The request states that the DFS is required by law to review our requested rate change. DFS may approve, modify, or disapprove the requested rate change. I am asking as a consumer trying to buy AFFORDABLE health care for a fair decision on Empire's proposed premium rate change.

The proposed 25% rate increase by Empire BlueCross BlueShield is price gouging, pure and simple. There is absolutely no excuse or justification for such an increase. Inflation is nowhere near 25%. This is simply an abuse caused by the mandate of the Affordable Care Act. Empire BlueCross BlueShield and other medical insurance companies have individuals over a barrel and they know it. They will probably whine that they have to raise their rates by this much or they won't be able to afford to give their members the same coverage that they did before. Well, they will deny coverage anyway; there isn't any protection for the consumer. Such rate increases are immoral, and the insurance companies need to be regulated.

I am writing to you to PROTEST Anthem Blue Cross Blue Shield’s request for a 27.6% increase in my monthly bill (it would be approximately $125 MORE PER MONTH). This is excessive and completely unreasonable - especially for an INDIVIDUAL insurance holder. This is the highest request I've seen from any one or any service – if I asked for that level of a raise and provide less service, I would be laughed out of my job. This is more than the rate of inflation! I protest this request for increase. I implore that you reject their proposal for such an extravagant monthly increase. They already increased my premiums earlier this year and increased the deductible. These increased costs while providing less service is unfair. I should not be penalized for being healthy.
DO NOT APPROVE BCBS's Proposed rate hike

Attn: Lawrence G. Schreiber, President, New York Commercial
New York State Department of Financial Services (DFS)

Please explain to me what part of "affordable" is the threat of raising much needed health insurance by 29.6%!!! What other industry has the hubris to give themselves such a raise at the expense of those they serve! Health care is not a luxury it is a necessity. SHAME ON YOU!

As someone who is too young to retire and too old to rehire, and currently making do on my $425.00 weekly unemployment as I continue to be ready, willing and able to work — I am in the untenable position of being squeezed to death between much needed health insurance, much needed housing, paying taxes and generally being a good citizen who has contributed to society all my work life. Again, SHAME ON YOU!

Do not approve this hijacking of health care coverage.

After digging deep into my pockets after I lost my job (agency outsourced to a 3rd party provider, all jobs were eliminated) I recently elected a managed health care plan provided by Empire BCBS as the only plan that my three longstanding providers accepted. Mind you, this is an HMO! Imagine my shock to learn, I will not be able to afford a managed health care plan should this rate hike go into effect.

DO NOT APPROVED THIS PROPOSED 29.6% INCREASE

Name of Insurer: EmpireHealth Choice, HMO, Inc.
Empire Plan: Empire HMO 600 X, Gold, ST, INN, Pediatric Dental, Dep 25
HIOS ID #: 2016 HIOS ID 80519NY01600
Individual Coverage

CSW
New York City

RECEIVED
HEALTH BUREAU
JUN 07 2016
ALBANY, NEW YORK
Dear Sir or Madam,

I again write to protest the rate renewal request for 2017. It is excessive and not acceptable. Insurer: Empire HealthChoice HMO, Inc.
Empire Plan HMO 2250, Silver, NS, Inn, Pediatric Dental, Dep 25
Individual Coverage (Family Plan)

HIOS ID # 2016 HIOS ID 80519NY0160010 / 2017 HIOS 80519NY0160010

The requested hike of 19.2% is ridiculous. Since Obamacare started, this plan has gone up every year, last yr 11%. Deductibles and out of pocket keeps increasing.

We are a couple and are forced to pay for a family plan. I was downsized in 2013 and now earn $11.00 an hour. If this increase is approved 57% of my gross salary goes to Obamacare.

NYS does not want people to stay here. You are forcing people to move elsewhere. This plan is not good. Please do not approve this increase.

Respectfully,

[Name redacted]

LINDENHURST NY 11757-3009
June 5th 2016

NYS Department of Financial Services
Health Bureau-Premium Rate Adjustment
1 Commerce Plaza
Albany NY 12257

Re: Comment re Rate Increase by Empire Health Choice of 27.6 %

Health Insurance: Empire HealthChoice HMO

Empire Benefit Plan:
Individual Coverage

2016 HIOS: 80519NY01600002/2017 HIOS ID 80519NY0160002

I want to protest this 27.6 % rate increase proposed by Empire HealthChoice. I am an independent real estate contractor who has to pay for my own health insurance. I have contracted this insurance less than a year ago on the NYS Health Insurance Market and was led to believe that this was an affordable individual basic, no frills coverage (bronze level!). With this increase my monthly rate will rise from the current level of $ 443.46 to $ 566.85!

Empire claims that rising medical costs and a new pool of customers justify such an increase. In fact, national news have reported an overall decrease in the rise of medical costs across the US and the basic economic laws tell you that an increase in customers to your product allows you to lower the costs.

I therefore protest vehemently to such a high cost increase. It will create a significant hardship for me financially, on top of the already very high level out-of-pocket deductible. In fact, my monthly coverage at this high level will be a total loss for me.

Thank you,

Cc: Empire
Dear NYS Health Bureau,

My husband and I are self-employed, and so bear the entire cost of our health insurance. We have a bronze plan that already costs us $886.92 per month with a $4000 deductible. In other words, we are already paying more than $10,000 a year for a plan that pays NONE of our health care bills except in catastrophic circumstances.

We have just been notified that Empire has requested a 27.6% rate increase for 2017. This is insane and obscene, especially in this era of low inflation.

I hope you will see to it that the increase is drastically reduced.

Sincerely,

[Name]
Westchester County

Hello,

Yesterday, I received a notice from Empire Blue Cross Blue Shield informing me that there is a proposed premium rate increase for my account. They’re looking for an additional 29% to my current monthly rate of 750.56.

I would like to register my disapproval of this proposed move, and ask that DFS please REJECT the proposal.

My premium rate is already nearly untenable. I will certainly drop this plan if the increase is allowed.
I am a freelancer, and I bear the full cost of my health insurance. I have already suffered the indignity of my insurance company going out of business (hence the purchase of what I assumed to be a rock-solid plan). I would like to keep this plan, but this letter brought what may be a distressing omen.

I do hope someone actually reads this email! Please let me know if there's any other information I can provide.

All Best,

[Name]

interior photography

[Name]
A 25% increase in premiums is simply outrageous. I’m already on a bronze plan and cannot cut benefits in order to lower my premiums.

My monthly premiums increased slightly transitioning from Freelancer’s Union to direct management by Blue Cross but the notable difference are charges for many services once covered and medication no longer covered - essentially believe I am paying more for less with additional higher deductible as well. Not satisfied.

Keep rates down there is no justification for a 25 percent increase next year.

I understand Empire Blue Cross Blue Shield is petitioning the State to increase rates by 25%. Really? What happened to the AFFORDABLE Care Act? This outrageous especially when inflation in general is miniscule. I can understand an inflationary adjustment upward but this is far more than that. How much of this 25% is going towards administration? How much is going towards real cost of care? My primary care doctors do not get paid enough. If you want to keep costs down it is in the trenches with real people doing preventative care and behavioral changes that costs can be reduced. Please refuse this increase. I am not getting 25% more care. Thank you.

Empire Blue Cross Blue Shield - An Anthem Company doesn't even seem to be an option on the drop down menu above. The most expensive plan in the world and just keeps continuing to raise rates with no regards for customer service. They certainly do not have any problems with their billing systems. Always ready to send the bill and collect the month payment. Cannot continue to afford these exorbitant rates of health care. Deductibles are criminal.

I am writing in to protest the proposed 25% rate hike in my insurance plan. As a single, 36-year-old woman, I already pay $440 a month for my coverage. I simply can't afford to pay an additional 25% on top of this. Please don't let this rate hike go through unexamined.
Inquirer:

Insurer:

BlueShield of Northeastern New York (a division of HealthNow)

Policy Type:

Individual

My current monthly expense for health insurance is over $400. I understand that EmpireBlue plans to raise their rates by 25%. This would mean a $100/month increase. This is utterly outrageous. Can they provide specific supporting details for why there is a need for this level of increase? Or is this just intended to increase their profits?

Inquirer:

Insurer:

BlueShield of Northeastern New York (a division of HealthNow)

Policy Type:

Individual

I protest the 25% raise in fee for coverage.

Inquirer:

Insurer:

BlueShield of Northeastern New York (a division of HealthNow)

Policy Type:

Individual

A 25% hike in health insurance fees is unconscionable. This must be regulated.

Inquirer:

Insurer:

BlueShield of Northeastern New York (a division of HealthNow)

Policy Type:

Individual

I may have selected the wrong insurance. But I would like to say i'm on my second year of catastrophic insurance. I am self employed, and have my own small business. In addition to all of the costs of running a business, I also have living costs of course - high rent living in Brooklyn NY, high cost of groceries, and of course all other high costs of living in a big expensive city. For the first year I paid about $200 a month. This year it was raised to $222 a month. Next year, another $25 is simply insane. I have CATASTROPHIC insurance. It does not cover anything, other then satisfying the government's requirement of having insurance. It covers 3 free doctor visits a year. Nothing in terms of treatment or anything worth while. I'm sorry but the plan is basically a joke. My deductible is almost $7000. Because in addition to raising the cost of the plan, they raised the deductible. That is simply bonkers. What more am I getting for the extra money I put forth per month? Absolutely nothing. And not you guys want to raise it even more?! An additional $50 per month?!?!?! I'm sure the deductible will not be raised above
$7000 too. The US Government's requirement to have insurance has spiked the cost of insurance, and removed any possibility of having affordable care. I don't have any dental. So not I have to pay full price for yearly work. No eye care either, same goes for that. The requirement to have insurance has helped the poor, for the rich, it doesn't matter. But for middle class, young people trying to live the american dream and freelance, or own their own business, it absolutely hurts them the most. I sincerely hope you change your minds and LOWER the price per month. Or at least make the deductible REASONABLE. I'm hoping to find an insurance company at the end of this year that actually cares and has reasonable rates, because you guys are absolutely insane to keep jacking up the price each year along with the deductible.

Inquirer:

Insurer:
BlueShield of Northeastern New York (a division of HealthNow)
Policy Type:
Individual

My premium has just about doubled in 3 years and I am someone who takes very good care of my health, never smoked, maintain ideal body weight, wears seat belts, rarely drink, very active, and scarcely use my health insurance. The cost of the insurance is yet another financial burden coupled to the high cost of maintaining a private medical practice in NYC. I would be much happier with reintroduction of a catastrophic insurance plan with a per annum deductible (versus per incident), linked to a Health Savings Account. If the insurance companies were invested in true health maintenance, versus disease care and putting people before profits, such an option would be available.

Inquirer:

Insurer:
BlueShield of Northeastern New York (a division of HealthNow)
Policy Type:
Individual

I just received my notice of proposed rate change. Empire has proposed an increase of 19.2%. I am a new customer as of December of 2015. I had to join in December because of the failure of Health Republic which I had for 9 months in 2015. As you can see I am experiencing the worst our healthcare system has to offer.

I personally find Empire's request of over 19% increase in premiums to be extremely excessive as I am not anticipating a 19% increase in income this year. If the reason for the increase is to subsidize customers that are getting a reduced rate as a result of Obamacare they are creating a hardship on me and all of the other customers that are paying full premiums. I see this as more of a tax than a rate increase and I don't think Empire has the right to tax the citizens of this country. If a company has to request an increase that large to cover their operating expenses it seems that there is a good chance they are mismanaged.

Maybe Empire should try to find a way to cover costs from within. Like pay cuts for top executives, suspending bonuses, contributions to political candidates and things like that until they are on a better footing. If they are doing that badly they don't deserve large salaries or performance bonuses. Right?
Inquirer:

Insurer:
BlueShield of Northeastern New York (a division of HealthNow)

I was just informed that rates may be going up 25% next year. I am disgusted. I have been a freelancers for many years now and in the last 3 years my insurance coverage has gotten worse (PPO to limited HMO) and gone up every year at least $100 more per month. Less healthcare for a LOT more money. When will it end? I can't afford another increase. Please reconsider this hike. I may not have insurance if this increase happens. Please rethink this terrible idea.

Inquirer:

Insurer:
BlueShield of Northeastern New York (a division of HealthNow)
Policy Type:
Email

To whom it may concern

I am writing to voice my outrage at Blue Cross for their proposed almost 30% increase in rates for 2017. Obviously they do not deserve it and I hope that NY politicians and officials will realize that they represent their constituents and not their campaign coffers and deny them such a ludicrous demand.

There is too much waste, fraud and excess cost in the medical system. By allowing any such increase is just feeding the frenzy.

Peg it to the rate of inflation, if even that.

Thank you

Inquirer:
Mcconnell, Robert
Insurer:
BlueShield of Northeastern New York (a division of HealthNow)
Policy Type:
Email

I find the rates currently charged to be on the higher side of the comparable plans from other company's. I shopped extensively for the coverage my family needed and through many hours and too many phone calls to count I thought I found the best plan. I read, and re read, and had others read as well the plan benefits. after signing up some of the benefits I thought were available before my deductible is met are subject to deductible. I know insurance is there if you need it but as of half way through my year of paying I have not even used close to 1/3 of the value that I pay every month as a premium. It concerns me
that many employers are telling me that they are feeling forced to send their employees to this system of health insurance. and it is required that people have it and then to get a possible 20% raise in rates after one year? I have serious concerns of where the whole thing is headed and how they can need such an increase. If I am still needing coverage next year I will be seriously considering a different company.

Inquirer:

Policy Type:
Individual

I am currently paying $691.00 per month for my plan -- and getting very little of value for it. It is rejected by a large number of physicians, hospitals (included University Hospitals of Stony Brook), clinics. This is a travesty.

There is very little freedom of choice -- United wouldn't even sell to me as an individual, and the exchange is flat out rejected by an even larger number of clinicians. What it is is extortion. Please do something to stop it. A fine is beginning to offer equal value to this 'health insurance.' They are both extortion.
To whom it may concern,

I am writing in reference to the letter I received regarding a proposed rate increase of 27.6% from Empire BC/BS. This is absolutely unacceptable. I have no idea how anyone is expected to afford this rate for a member only policy. I am asking that this ridiculous request be thrown out or at the very least be DRASTICALLY reduced from the proposed 27.6%. Please consider this request as these rates are unaffordable as is at $553.00 a month let alone if they were raised to almost $700.00. I appreciate your time.

Thank you

Name of Insurer: Empire Health Choice HMO, Inc
Name of Empire benefit plan: Silver Plan
Individual Coverage
2016 HIOS ID 80519NY0160008/2017 HIOS ID 80519NY0160008

To Whom It May Concern, I received a notice that my premium which is currently $614.13 may be increased by 23.8%. Due to having lost a job that was my primary source of income, and for which I'm collecting unemployment, I cannot afford this increase. I'm currently receiving assistance from family to even make the above amount. I have a chronic health condition and cannot be without insurance. Because of my needs I enrolled through Empire HealthChoice HMO, Inc which according to my research at the time was the least costly plan for my medical needs. My benefit plan is Empire Blue Cross Blue Shield through Anthem. I have individual coverage. My ID is My HIOS identification number is: 2016 HIOS ID 80519NY0160107/2017 HIOS ID 80519NY0160107. I am partly self-employed but the income generated from that is not enough to cover my bills. I would like to appeal this increase and would appreciate any help. I tried contacting the insurance directly with no success. I appreciate your help and understanding.

Empire HealthChoice HMO, Inc. Empire HMO 0, Platinum, ST, INN Individual coverage 2016 HIOS ID 80519NY0160014/2017 HIOS ID 80519NY0160014 I am commenting to the letter I received from Empire Blue Cross Blue Shield on the requested rate increase to my insurance premium of approximately 30% for the new year, 2017. This increase is totally outrageous & unaffordable. No one gets a 30% increase in their pay, so how are they expected to be able to afford this increase? Should this increase be approved, which would be totally absurd, my premium for the new year would be $12,000.00, which is insane! I do not qualify for any tax credits, so I would be forced to pay this total amount myself & in return receive REDUCED insurance coverage to drug benefits, higher deductibles, copays, coinsurance , etc. How do you justify this rate increase against this even greater DECREASE in benefits? The Affordable Care Act was designed to make health insurance more AFFORDABLE FOR EVERYONE. Evidently this is not the case. The insurance companies are back to trying to gouge as much money as they can get from the public to enrich their coffers. I can now understand why some people go without insurance & pay the penalty instead, as it's much less costly. I beg you to not give in to their request for any increase at all, or to any reductions in benefits, or increased copays etc. The 2016 premium rate I'm currently paying is costing me over $9000.00 a year, which is expensive enough to say the least. Please take into great consideration my, and I'm sure, very numerous other requests, to deny this increase. Respectfully, Sent from my iPad
I really hope insurance rates don't increase AGAIN as I'm already considering cancelling all insurance because the rates are too high and the only affordable option for me (I don't get subsidies) has such a large deductible that I practically pay full price each doctors visit yet I won't ever hit the deductible. Not a good system for me. SO PLEASE DON'T INCREASE RATES! Thanks.

I am writing in response to the proposed 25% rate increase being requested by my insurer. They say this reflects the rising cost of medical care as well as a few other items that should not affect me, including the changing pool of customers. I see the bills from my doctors, and their rates have not gone up over the last 3 years, at least not as much as the 17% increase my insurance carrier has put on my bill. I am a single mother who currently pays $691 a month, almost $8,400 just for me. They want to add $172.75 a month to that bill. I am a cancer survivor, so I know they have shelled out some money for me, but maybe if they didn't waste their time fighting my Doctor for 6 months about the type of mammogram she requested, or forcing me to get a referral from my GP for my yearly follow-up with my Surgeon, they could keep some costs down. Thank you for your consideration.

I am writing to object to the proposed 27.6% increase in the monthly premium to my plan, which of course isn't the full picture since "there will be coverage changes [...] including] new prescription drug processes as well as changes to some deductible, copays, coinsurance, benefit limits and/or annual out-of-pocket maximum amounts". Even considering nothing else, such an increase is absurd – not even my cable provider attempts to increases prices by this much in a single year. Indeed, this increase is several times greater than the rate of "escalating health care costs" cited in Empire's own filing (dated May 15, 2015; last year's filings are still the most current published). To put these numbers in context, let's consider what I receive in exchange. My previous employer sponsored health plan cost less than $200/month (employee portion), was a PPO, had minimal (reasonable) deductibles and co-pays, and included international coverage. My current plan costs $553/month, is an HMO (with no PPO options even being offered via the New York State exchange), has a $2000 deductible, co-insurance all over the place, and for international coverage I have to purchase a separate plan. Put another way, currently – before any rate increase – I need to spend $8500/year in premiums and deductibles before the insurance pays out a single penny for anything other than an annual checkup. Even if I had a $50,000 medical expense every 6 years, I'd still be better off paying out of pocket than carrying this insurance. I'd rather buy a purely catastrophic plan, since this is in effect a pseudo-catastrophic plan, but alas that – like PPOs – is not even an option (for anyone over 30). With over a 25% increase in premiums, and presumably a very similar increase in "cost sharing", that $50,000 medical expense could happen once every five years and I'd still be better off paying out of pocket without insurance. Of course, that's not an option. Effectively, though, I do end up paying out of pocket. The above numbers don't reflect the frustratingly small network of doctors available. Even doctors who accept most or all of Empire's non-exchange plans commonly have this disclaimer on their websites or when I call: "We are not currently participating in any exchange plans." I am now a cash customer for some of my medical services because of my inability to find in-network coverage. This is extremely frustrating given that the exchanges collectively represent more people than most employer plans do. We should have the best plans via the exchange, not the worst. I counter-propose an increase of 1.1%, to match the current rate of inflation. Thank you for your time.
To whom this may concern:

I am currently a member of Empire Health Choice HMO, Inc. I have the pathway enhanced plan, and I have individual coverage. My H10S identification number is 2016 H10S 10 80519 NY0160107/2017 H10S 10 80519 NY0160107.

My monthly premium is $64.13, and I just received a letter that it is to go up 22.8%. I cannot afford this increase in premium. I wish to appeal this. I have been unable to work because of my medical conditions and am currently fighting to receive disability. There is no way I will be able to pay this increase.

I have been a loyal member of Empire for years who has always made my payments on time. Please allow me to keep paying my already expensive payments I am paying now and pay my medical care.

RECEIVED
HEALTH BUREAU
JUN 09 2016
ALBANY, NEW YORK

Thank you.
Sincerely,

[Redacted]
N.Y.S. Department of Financial Services
Health Bureau, Premium Rate Adjustments
1 Commerce Plaza
Albany, N.Y. 12247

June 3, 2016

Dear Sirs,

I am currently enrolled in an individual health care plan (Silver) sold out by Empire Blue Cross Blue Shield (an Anthem Co.) Identification #2016 HTO ID 80519 NYO 1600 10/31 2017 HTO ID 80519 NYO 1600 10/31.

My current monthly premium is $3507.33. Empire Blue Cross Blue Shield has put in a request to increase the monthly premium by 23.6%. I strongly request that this be turned down (preferably entirely if not raising it by the smallest of margins).

At present, I am unemployed, looking for a new position, and living off of my savings. Needless to say, I'm having to watch my expenses closely. As it is, it's been ages since I've last had a check up - because if (perish the thought!) some chronic condition should be discovered (both diabetes & heart condition runs in both sides of my family - between the premiums, deductibles, co-pays, co-vals)
and cost of medications - should any be needed - I couldn't afford them, so seeing anyone would be largely pointless. (Although I try to maintain a healthy lifestyle.) Likewise, it's been over 10 years since I've last seen my ophthalmologist, which concerns me. A few years ago, I've had a detached retina, and need getting regular check-ups is worrisome. But that service, regrettably isn't covered by my health plan. (And even if it somehow could cover the cost of eye care - and that would require paying for out-of-pocket expenses to the cost of eye care - which I doubt that would only cover the cost of eye glasses - not seeing a retinologist.) Any increase in the premiums would be a hardship - let alone the huge amount that Blue Cross is requesting. And I question additionally, as they're claiming hardship; how they can justify absorbing the cost of buying Cigna, or if the cost of the premiums is intended to pay for the proposed merger? Needless to add, if the merger goes through, this will only add to the cost of additional premium hikes, due to the effect of fewer companies equals reduced competition for customers.

Thank you for your attention, and I strongly request that either this request of Blue Cross Blue Shield gets turned down entirely, or increase marginally at best. I am enclosing a copy of the letter I received from them for your attention. Thank you for your help, and I look forward hearing from you.

Sincerely yours,

Enclosure
Inquirer:
**Ohajekwe, Chinwe Florence**

Insurer:
**BlueShield of Northeastern New York (a division of HealthNow)**

The proposed rate increase of 29.8% is too high for a single year. I am a single mother, who has purchased this insurance for my family of five. I have 4 children. I do not get the Advanced Premium Tax Credit because most of my income is through child support, so I do not file taxes. I do not understand why a basic health need such as health insurance should be increasing in double digit rates each year.

Inquirer:

I signed up with this insurance company (Empire Blue Cross Blue Shield) December 2015. I had to change due to the fact that Health Republic went out of business (my rate with Health Republic was 585.00). My premium for December 2015 with Blue Cross/Blue Shield was 612.00 per month. The very next month, January 2016 my rate went to 691.01! NOW they want a rate increase of 25.1%, 173.44 bringing my total monthly bill to 864.45. In other words in from Dec 2015 to Jan 2017 (14 months) my rate will have had 3 increases totaling 252.45 and if you take into account how much I was paying with Health Republic that is $279.45 in 15 months. On top of that, with Blue Cross Blue Shield, even though I have Platinum plan, same as with Health Republic, I now have co-insurance and OOP max of 2000/4000 which is something I did not have with Health Republic. So I am paying MUCH more and getting less with having to pay more out of my pocket. This is NOT what is called an affordable care act by any stretch of the imagination. I ask that you DO NOT ALLOW THIS TO HAPPEN. Thank you.
The rates are already too high. I have not had an increase in my salary for thirteen years. Everything has gone up - rent, food, gas electricity, carfare, but I am making less in salary as my company has outlawed overtime these past two years. I make the same hourly rate of pay, but must complete the projects I work on within a 35 hour/week framework. In other words, my hourly rate is the same, but the number of hours have been cut. I just can't get by anymore. Medicines have also gone up as well.

The proposed rate hike of 20.5% is outrageous! The monthly premium of over $600 for an hmo with $2000 deductible is already ridiculously expensive, and a hardship with limited income. To raise that to $728 + would be an even greater hardship. Please note: my insurance company is Empire Blue Cross Blue Shield HMO 2000 Silver, which is not listed in your drop down menus above.

Empire BCBS sent me a letter stating that they are looking for a 29.6% increase! THIS IS AN OUTRAGE!!!! I've been paying for my own HC insurance for most of my life, I'm now 55 years old, and over the course of that time I have NEVER seen an increase ANYWHERE NEAR almost 30%. All along rate increases have been 3-5 % tops!!!! I'm not getting a 30% raise next year, how am I supposed to cover another 30% on top of the almost $1,300 a MONTH I'm paying right now! You should DENY their increase or ANY increase PERIOD.

I thought the Affordable Care Act was supposed to make insurance AFFORDABLE! When does that kick in?

Empire is seeking a 27.6% premium increase which I feel is really excessive. I do not believe medical costs are in reality really increasing at this high a rate. I do not see how you can expect individuals to be able to afford such coverage. Keep in mind the medical insurance does incur anything expense until a deductible is met (ever increasing) and then there are co-pays/con insurance.

- There was no 2016 Social Security COLA increase.
- There is not way that regular employees see wage increases of this magnitude.
- Perhaps, the government should mandate similar % increase for the aforementioned in order for individuals to be able to afford this type of increase.
- Should there be a cap on % percentage increases similar to NYC property taxes or rent increases?

Thank you for this opportunity to comment.

Affordable healthcare should be, affordable. I pay for both my wife and I and our insurance premiums has stayed the same overall, but we can't use our insurance due to high deductibles. In this way, we are actually paying much more. High deductibles, keep us from ever going to the doctor, and if we need even the most simple of things we have to pay out of pocket - doesn't feel much like insurance. Now we are being told we have to pay more for something we can't afford to use in the first place. I think there are other ways to be more efficient, more cost effective. Instead it feels more like rewarding insurance companies for inefficiencies; the US ranks last in all developed countries for adequate healthcare and we pay the most. We as a consumer do not have a choice, we have to pay or pay a penalty it is the law. The only way an insurance company or the system that it beholden, is to put a cap on what they earn and have them focus on the real issues. What middle class is left, is highly burdened by insurance. In our case we spend on an annual basis 13 to 14 thousand a year for something we can only use in a catastrophe - after spending another 6K on deductibles.
Dear Sir or Madam,

I receive health insurance through Empire Blue Cross Blue Shield HMO a Pathway Enhanced policy. I understand that this insurance company is planning on increasing their premium rate by almost 25%! I understand that insurance policies increase annually, but 25% is ridiculous. It’s hard enough for me having a $2250 deductible and a $6,500 out of pocket expense. The proposed increase would be a great financial burden. Please do not allow Blue Cross Blue Shield to increase more than 10%. Thank you.

Sincerely,

[Name]

Our health care costs have risen significantly every year for the past 5 years, and at the same time, the benefits provided have plummeted. Our deductible is so high that we effectively don’t have any insurance at all, yet are paying $1000 a month for myself and spouse, not including our kids. If it goes up by 25% as proposed, it will become unaffordable to us.

This rate hike -- the second in less than two years -- is nothing short of criminal. I signed up for the silver Empire blue cross blue shield HMO based partly on the fact that there were SO MANY docs listed. The reality is that very few actually accept the plan. When calling Empire directly when I couldn't find a doctor the staff were also surprised that they could not find an orthopedist on the Upper East Side of Manhattan. You can't thrown a stone in this neighborhood without hitting a doctor!! Yes, they finally found 6 -- out of HUNDREDS they list -- and only 4 of them were actually current. There is NO WAY the average person could find these few. This plan seems designed to push people to go out of network, which benefits the insurance company. What could possibly justify a 25% annual rate hike? To hire people to try to get doctors on board? Obviously there’s a reason doctors choose not to take this plan. Unfortunately, I expect that the entire system is corrupt and that people like me will be forced to find alternatives to what’s offered -- which is risky and will ultimately be more costly for everyone. <br><br>

These rates are way too high already. When I switched to this plan, it was around $390/mo (and I only switched because my $225/mo plan was discontinued) and included access to the Freelancers Clinic. Then they raised the rate to around $440/mo, the clinic got worse and eventually closed, and now they want to raise it to something like $550? I can’t afford this. What am I getting in return? My service just keeps getting more confusing and inconvenient. Why should they be able to raise rates while offering a worse and worse product?

I’ve been alerted that Empire BlueCross BlueShield is proposing to raise their rates, on average, by 25% next year, really? I already pay close to $550/month for individual healthcare! And they cover next to nothing at that! Please stop this insanity!

I’m writing to lodge a complaint against Empire HealthChoice HMO. We received a letter telling us that they were submitting a plan with the NYS legislature to raise our health insurance premium by 27% in 2017. We are already paying an astronomical amount of money to this company to provide health insurance for our family. We are presently paying more than our monthly housing expenses, and we live in NYC! It is a financial burden that we struggle to meet every month, but we have a young child, and are afraid to go without health insurance. In addition to the unconscionable premium, we also pay a fairly high co-pay when we do see a doctor. We just cannot afford to pay an extra 27% - a rate so high that we believe the State of New York will agree is criminal. As my husband and I work freelance, we receive Empire HealthChoice HMO through the [employer name] (my son and I are on the plan held by my husband, [employer name]). Please help hard working New Yorkers like us keep our health insurance! Thank you for your time.
I am concerned and upset that my current monthly premium is going through a review of rates. I purposely chose this company because of their reputation and doctors in the network. I signed up for this plan in Nov 2015 and I am only in my first full year of service. I am disappointed that a great company such as this would propose a change to my rate already. The percentage change is outrageous. Inflation rate is 2% at the max, yet you think its ok to allow almost a 30% increase. Absurd.

Empires BlueCross is asking for a 29.8% increase. This is appalling. As someone who pays directly for my health insurance for the past 25 years, this rate increase would result in undue hardship. I have already spent over $500 on co-pays and we are only 6 months into 2016. That on top of premiums and the hours on the phone with Empire when they fail to resolve basic issues -such as a web site problem, make any rate increase unacceptable.

Premium rate increase in 2017 by 23.6% is astronomical and unaffordable. Am currently paying a premium of USD 507.33 per month. I am enrolled through NY state of health however not eligible for APTC.

Dear President Schreiber,

[REDACTED] and [REDACTED] STRONGLY OBJECT to the Proposed premium rate change of 23.6% for our Silver Plan as being INSUFFICIENTLY JUSTIFIED.

We object on the grounds that the reasons listed are overly vague, obscure, and deliberately designed to be impossible to refute. They are vague to the point of meaninglessness. There is no evidence provided that the rising cost of medical care, changing pool of customers, and the changes in the federal transitional reinsurance program adds up to justify such an increase on our individual household.

Rather, we assert that this 23.6% increase is a hedge on that potential changing base of customers and some behind-the-scenes communication with federal reimbursement, and therefore, not our responsibility to front the difference.

We love New York state, and are happy pay our higher taxes in this state because we feel you will help working families to make ends meet. This increase is clearly undermining the spirit as well as express purpose of the ACA and New York’s market, the New York State of Health.

We will not accept this increase as presented.

[REDACTED] and [REDACTED] freelance writers and teachers (Brooklyn, NY)
26.9% is an outrageous change in premium rate. The constant stress I feel about being able to afford my bare bones health insurance which leaps in price every year seems frankly enough to cause me health problems, which my health insurance company should be in the business of preventing. I would even go so far as to argue that a lower premium rate would put so many people at ease that it would actually result in fewer stress-related illnesses and save the health insurance company money.

The percentage cost of my health insurance premium compared to my annual income is growing larger and larger each year, and with absolutely no added benefit to me except a lighter wallet. To add, I have catastrophic coverage. I don't have a fancy plan. My plan is largely being used to pad the company’s budget, as I constantly pass over opportunities to go to the doctor because it’ll cost too much. Think about that. I’m afraid to go to the doctor. When I ultimately have to, I’m asking how much this will cost, how much that will cost. That shouldn’t be how healthcare works.

I strongly urge you to not approve any rate increases larger than the US rate of inflation, which ranges between 1-4%. How many people do you know who get a yearly raise in their income of 26.9%? or even half that? Bloated, unwieldy health insurance rates prevent people from thriving in this economy and generate a chilling Good Day,

I usually receive this notice in July but I guess BCBS could not wait to request a 24.4% increase. Are they kidding? As it stands now I am paying 725.10 per month. And they raised the deductible with last years increase. So now they want me to pay another 174 dollars per month and will raise my deductible once again. I don’t understand what has happened to our health care system.

I am not eligible for Obamacare and think at this point of dropping my insurance and paying the fine. It seems honest, hard working middle class people (If there is such a thing anymore) have no where to turn. There are people ripping off our welfare system, they are just fine. The rich, well they are fine too. But the middle class that carry this country, are being crushed. I thank you for letting me vent and hope you will consider not granting this 24.4% increase.

PS. What company do you know can raise prices 24% and stay in business. Wouldn’t you like to ask your boss for a 24% raise? (I keep submitting this because I have not received a email conformation.)

Thank you again for your time,

An increase of 29.6%, nearly a third of my already increased cost for 2016, is excessive. I have a Gold Plan through the NY State of Health MarketPlace Exchange, in other words, through Obama Care. I want to continue individual care through this insurance company (I had to change to this in December 2015, changing annually makes getting good care difficult and confusing). So long as I can afford to pay for private health insurance, I intend to pay for it. A 29.6% increase in the premium could force me to apply for Medicaid.

I am currently enrolled in an Empire HMO OX, Platinum, ST, INN, Pediatric Dental, Dep 25 individual health plan. Since I am a single divorced woman I sought out the highest quality plan I could afford. (I was forced to accept the Pediatric Dental part of the plan, despite the fact that I have no children.) I am disgusted by my insurer’s current proposal to raise my premium by 29.8%, or almost $225. This is more than twice what they requested in 2014 and 2015 (18.4% and 14.03% respectively). Why this sudden huge increase? If approved, my premium will rise from $750.76 to $974.49, almost $1000!!! I cannot afford this ridiculously high premium. This will force me to choose a plan with fewer benefits, or even to change insurers. I strongly urge the New York State Department of Financial Services to disapprove or significantly lower the rate change being requested by Empire BlueCross BlueShield. I am already paying enough.
This proposed rate rise is outrageous. My family will have to go on another plan or possibly even seek assistance. Empire does not put the money back into their business. Their website functions poorly; the find a doctor service does not work and has not been updated in years. They interfere with prescriptions, demanding they be obtained through a mail-order service (Express Scripts) that does not cover them.

They are cynically taking advantage of the public, and not providing the services they're supposed to.

On behalf of my minor daughter, please do not approve the rate increase that Empire is proposing of 29.3%, as it would cause an extreme financial burden on my family. Our insurance bills are too high as it is. At the rate we are going with all of these insurance increases, we not going to be able to afford health care. Please do not approve this or any other requested increase. Thank you.

Good Day,

I usually receive this notice in July but I guess BCBS could not wait to request a 24.4% increase. Are they kidding? As it stands now I am paying 725.10 per month. And they raised the deductible with last years increase. So now they want me to pay another 174 dollars per month and will raise my deductible once again. I don't understand what has happened to our health care system.

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PS. What company do you know can raise prices 24% and stay in business. Wouldn't you like to ask your boss for a 24% raise?

Thank you again for your time,

The amount of $ I have to pay this year for Health Insurance is way too high. I don't know why. I enrolled through New York State of Health the last few years. I cannot afford the plan that I have. Now I have received a notice that there will be a rate increase. I have no idea what I will do.

Good Day,

I usually receive this notice in July but I guess BCBS could not wait to request a 24.4% increase. Are they kidding? As it stands now I am paying 725.10 per month. And they raised the deductible with last years increase. So now they want me to pay another 174 dollars per month and will raise my deductible once again. I don't understand what has happened to our health care system.

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PS. What company do you know can raise prices 24% and stay in business. Wouldn't you like to ask your boss for a 24% raise?

Thank you again for your time,
Hello,

I received a notice dated 5/16/2016 stating our individual health plan rate could increase by 29.6% for 2017. I have never heard of such a % increase on any type of service offered and feel this is an astronomical amount of money to have to pay for individual coverage.

My husband and I both lost our corporate jobs in 2014 and therefore had no choice but to purchase an individual health plan on the marketplace last year. We initially had to pay approx. $500 more per month for the coverage and then the cost increased another $150 per month because we moved from Long Island to Queens and were told the cost for the exact same coverage was higher in Queens. The distance between the two locations was 14 miles.

So in 2015 we paid a total of approx $17,000 just for premiums, not to mention all the deductibles and co-pays. We also have coverage which now offers many fewer options in doctors and much less overall coverage of treatment in an HMO vs. PPO plan which was our prior insurance policy.

The total we paid on premiums in 2014 was approx. $11,000 which included dental coverage. So, we spent 55% more in premiums in 2015 for far less coverage and flexibility.

For 2016, our premiums increased again to more than $1800 per month. We will spend over $22,000 for premiums alone this year for family coverage so will incur a rate increase of 29% from 2015 and a rate increase from 2014 of 100%.

Now we are expected to endure an additional 29.6% rate increase in 2017? This would put our health insurance premium cost at approx $28,000 per year which seems extraordinarily high especially compared to the cost of other living expenses and high ticket items.

We have a child within our family. There have been surgeries required for his treatment. We have dealt with numerous insurance denials and appeal processes and many many phone calls to resolve the matters and receive the necessary doctor care.

Therefore, I am requesting that this rate increase requested by Empire BCBS be denied so that we are not strained any further with these extremely high costs causing much financial stress and hardship at this point.

Thank you

Yearly rate increases of 25% is the worst business ever!!! If I were to do that to my clients they would run the other way and yet NYS is allowing health insurance companies to do this to its residents on a YEARLY basis. You need to step up and start watching out for the small business owners!
My health insurer is Empire Blue Cross Blue Shield (this insurance company was not an option) with whom I have Individual Coverage plan HMO 600, Gold, ST, INN, Pediatric Dental, Dep 25. 2016 HIOS ID 80519NY0160012 / 2017 HIOS ID 80519NY0160012

Empire BCBS requested a jaw-dropping 29.6% rate increase for 2017.

I oppose this or any rate increase request. Empire BCBS does not provide its customers with evidence of the specific costs it projects to go up next year, and admits that there will be cost sharing changes. This rate increase is thereby a bad faith move to provide far fewer services whilst charging higher premiums.

Empire BCBS provides one vague reason for this increase: the rising cost of medical care. I do not know how this insurer would be affected by the cost of medical care, since they reject all my claims and force me to pay nearly all my medical costs out of pocket. Empire BCBS has forced me to pay for routine lab tests, prescriptions filled at my local pharmacy and - this is good - will only pay for my first-ever colonoscopy if I’m okay. If, God forbid, a problem is discovered, I will have to pay for the procedure.

From my experience, the only rising cost of medical care is from Empire BlueCross BlueShield.

Another reason seems to be that they are changing all the coverage plans, so they might as well change mine too.

Respectfully submitted,

Mr. [redacted]

I am writing to protest the proposed 27.6% premium increase for 2017. Rates are already high, and the percentage increase is prohibitive. I earn too much to qualify for any tax credit; I have to get my insurance as an individual which limits my options; I have a plan in which my doctors do not participate so I have had to find other doctors. Private insurance companies must not be allowed to increase their rates arbitrarily and to such an exorbitant amount for the sake of their own profits and at the expense of hard-working New Yorkers. I urge you to deny these rate increases.

I just received a letter from Empire BCBS that they are filing a request with the New York Dept of Financial services to approve a premium rate increase in 2017 of 23.8% - $146.16 a month. My insurance cost will increase $614.13 to $760.29 a month. $7369.56 to $9123.48 a year. With my deductible(in 2016) it is $8369.56 a year. Plus any co-pays on top of that! I fear what they will increase the deductible and co-pays to in 2017. I will pay at least $10123.48 to be insured. Is this affordable healthcare? I am sure I will not get a pay raise of 23.8%. This is a broken corrupt system. This is without Dental or Vision care. What are you doing to address this messed up system.

My card says Empire Blue Cross Blue Shield, An Anthem Company (this choice was not listed in menu, so I picked the closest sounding on the list). I've been told by Freelancers Union that Empire company has requested a 25% premium increase. I cannot afford this. I am a freelance worker paying the full amount since I don't qualify for a subsidy. My wages have been going down each year, not up. 25% increase is unreasonable. Please don't approve this. It's very stressful to continually change plans and change doctors and the lack of continuity of care providers is bad for my health. The coverage also gets worse and worse--I want to be covered at reputable hospitals if the need arises.

My HIOS identification number is 2016 HIOS ID 80519NY0330003/ 2017 HIOS ID 80519NY0330003
I find it very disturbing that Empire HealthChoice HMO, Inc, who is my insurer, has requested a 22.3% increase in my premium for 2017. I can barely afford the "affordable" coverage I have now, and the deductible is so high that my insurance pays for almost nothing, anyway. It is now mid-year, and all of my doctor visits to date have been paid out-of-pocket. A 22.3% increase in the premium for this plan would force me to purchase a Bronze level plan, which would have an even higher deductible.

According to Anthem, Empire's parent company, in their First Quarter 2016 Earnings Release Report http://phx.corporate-

"As of March 31, 2016, the Company?d net unrealized gain position in the investment portfolio was $638.8 million, consisting of net unrealized gains on equity and fixed maturity securities totaling $327.4 million and $311.4 million, respectively. As of March 31, 2016, cash and investments at the parent

Any company which has assets in excess of 2 billion dollars and a recent investments gain of $638.8 million should not be looking to working people who are struggling to survive in New York City to cover their costs or increase their profits.

The letter I received from them states that "Our 2017 rate filings reflect the rising cost of medical care ... and our experience with provider networks", among other reasons. My personal research to my doctors has revealed that healthcare providers in their network have received no increases whatsoever from them in the payment of services during the past year. Therefore, no costs have risen, because providers' costs are billed to Anthem/Empire at contractual rates.

Please do not grant this increase.

Thank you for your attention,

I am writing to you about Empire BlueCross BlueShield?d proposed rate increase. I am asking that your agency not accept Empire?d proposed rates. The proposed rates are just too expensive! The cost for health insurance is getting so out of hand that it is nearly impossible for my family and others to afford to live in New York. When will this madness stop? Once again, deny Empire?d proposed rate increase.

Plan: Empire HealthChoice HMO
Empire HMO 0 X, Platinum ST, INN
Individual Coverage
HIOS ID 1H3N (Not sure if this is the correct ID)

Sincerely,

Yorktown Heights, NY 10598
To whom it may concern:
I received an email regarding a 24.4% rate increase proposal to my current monthly premium $725.10. I currently have Empire HMO 250 Platinum, NS, INN, Pediatric Dental (ID information detail is below). This would place a major burden on me as my current monthly premium is already quite high but because of a medical condition, I need this premium insurance program to cover certain medications I require. Please advise if and when this will go into effect. I am appealing for you to not allow this.

1. Empire HealthChoice HMO Inc. Blue Cross Blue Shield
2. Empire HMO 250 Platinum, NS, INN, Pediatric Dental, Dep 25,
   ID#
3. Individual Coverage (individual)
4. 2016 HIOS ID#80519NY0160115 2017 HIOS ID#80519NY01600115

Gratefully,

Empire HealthChoice HMO
Empire HMO 4000 for HAS, Bronze, ST, INN, Pediatric Dental, Dep 25 INDIVIDUAL COVERAGE
To Whom it May Concern:

I would like to comment on the outrageous request for a 27.6% increase in monthly premiums. I have been a BC/BS customer for the past 10 years. My husband and I are self-employed and pay monthly premiums. We have been healthy and have never been big consumers of healthcare until I was diagnosed with stage IV Hodgkins Lymphoma in October 2015. It was at this time that I was informed that the maximum out-of-pocket amount of $6450 per individual was not correct. I was told by various managers that I was not imbedded so my maximum OOP is actually $12,900 per year. My insurance card even clearly states that my maximum per individual is $6450. No one has been able to explain what imbedded means. When they promise to check and contact me with an answer I do not get a

To add insult to injury; when my Oncologist requested an end of treatment PET scan (standard practice even in third world countries) they refused. They would only approve a CT scan. My Oncology team at [blank] informed me that they have never had an end of treatment PET scan denied. Meanwhile, since my diagnosis and chemotherapy spanned 2 years time I have paid off 2015 bills of $12,700 and am now in debt for the $12,900 owed for 2016. This is a hardship since as a [blank] I was not able to work as many hours being sick and undergoing treatment.

Sincerely, [blank]

Hello, I received a notice dated 5/16/2016 stating our individual health plan rate could increase by 29.6% for 2017. I have never heard of such a % increase on any type of service offered and feel this is an astronomical amount of money to have to pay for individual coverage. My husband and I both lost our corporate jobs in 2014 and therefore had no choice but to purchase an individual health plan on the marketplace last year. We initially had to pay approx. $500 more per month for the coverage and then the cost increased another $150 per month because we moved from Long Island to Queens and were told the cost for the exact same coverage was higher in Queens. The distance between the two locations was 14 miles. So in 2015 we paid a total of approx $17,000 just for premiums, not to mention all the deductibles and co-pays. We also have coverage which now offers many fewer options in doctors and much less overall coverage of treatment in an HMO vs. PPO plan which was our prior insurance policy. The total we paid on premiums in 2014 was approx. $11,000 which included dental coverage. So, we spent 55% more in premiums in 2015 for far less coverage and flexibility. For 2016, our premiums increased again to more than $1800 per month. We will spend over $22,000 for premiums alone this year for family coverage so will incur a rate increase of 29% from 2015 and a rate increase from 2014 of 100%. Now we are expected to endure an additional 29.6% rate increase in 2017? This would put our health insurance premium cost at approx $28,000 per year which seems extraordinarily high especially compared to the cost of other living expenses and high ticket items. We have a [blank] child within our family. There have been surgeries required for his treatment. We have dealt with numerous insurance denials and appeal processes and many many phone calls to resolve the matters and receive the necessary doctor care. Therefore, I am requesting that this rate increase requested by Empire BCBS be denied so that we are not strained any further with these extremely high costs causing much financial stress and hardship at this point. Thank you.

Forest Hills, NY 11375
Insurer: Empire HealthChoice HMO, Inc. Plan: Empire HMO 600, Gold Pathway Enhanced Type: Individual
2016 HIOS ID: 80519NY0160012 2017 HIOS ID: 80519NY0160012
June 7, 2016

NYS Dept. of Financial Services
Health Bureau – Premium Rate Adjustments
1 Commerce Plaza
Albany, NY 12257

Dear Sir/Madam:

I am writing to discourage the NYS Dept. of Financial Services from granting Empire HealthChoice HMO, Inc. a proposed premium rate hike of almost 17% for 2017. That increase would bring my monthly premium for individual coverage to almost $550 per month! This increase would result in a total additional cost of almost $1000 per year! Further, I have lost $6000 per year from my income because I am no longer allowed to perform ancillary work for my employer as dictated by the rules of ObamaCare.

Health care premiums have become too much of a financial burden. Please do not grant this or any increase in health care premiums.

Additional required information:
Insurer: Empire HealthChoice HMO, Inc.
Name of Benefit Plan: Empire HMO 2250, Silver, NS, INN
Type of Coverage: Individual
HIOS Identification Number:
2016 HIOS ID 80519NY0160009 / 2017 HIOS ID 80519NY0160009

Sincerely,
June 5, 2016

To:
NYS Department of Financial Services
Health Bureau—Premium Rate Adjustment

1 Commerce Plaza
Albany, NY 12257

Re: Empire Health Choice HMO, Inc.
Plan Empire HMO 3000 Bronze
Individual Coverage

2016 HIOS ID: 80519NY0160002
2017 HIOS ID: 80519NY0160002

Dear Sir/Madam,

I am writing to protest the proposed rate increase for Empire Health Choice HMO coverage. The plan is asking to raise the existing rate by 27.6%. This is an absolutely shocking request. The state they will also be making changes to all individual plans. Will there be enhancements? I doubt it.

I have individual coverage and this rate increase will cause extreme financial distress. To add insult to injury, this product’s network is so restrictive and gives very little choice to its members and the quality of its doctors is poor.

I urge you not to approve this unconscionable rate increase.
Thank you for attention in this matter.

Sincerely

middle village, N.Y.

11379
June 12, 2016

NYS Department of Financial Services
Health Bureau – Premium Rate Adjustments
One Commerce Plaza
Albany, NY 12257

Dear DFS:

I am writing to urge you to help keep a lid on the rising cost of healthcare insurance. Without very many choices in NY State, individuals like me are forced to choose among a small number of insurers – all with exorbitant premiums.

This past year, Empire BC/BS coverage for my wife and I totaled $1,334.78 per month for an annual total of $16,017.36. This is before deductibles, co-pays, caps, prescription medicines not covered under the plan and procedures that Empire BC/BS routinely denies coverage for.

If you grant Empire their full increase that will change to $1,600.40 per month for an annual total of $19,204.80 – an increase of almost 20%!! Nowhere in our economy are vendors raising prices by 20%. We are in one of the lowest inflation cycles in our country’s history. Asking for 20% is just plain GREED!!

Please help those of us on a fixed income to live a healthy life without losing our savings. Please put more pressure on Empire to reduce costs and trim margins. They have a right to make a profit for sure – but you have a responsibility to make sure that the companies you license to do business in NY State are not ripping off consumers who have few options for health insurance coverage.

Cordially:

My HIOS ID = 2016 HIOS ID 80519NY0160115/ 2017 HIOS ID 81519NY0160115
My Plan: Empire Health Choice HMO, Inc.
I have individual coverage under Empire HMO 250, Platinum, NS, INN,
To Whom It May Concern,

I wrote this and sent via email on May 24th and never received acknowledgement so am not sending via mail.

I received a letter from Empire BC BS yesterday regarding a proposed increase and I would like to offer my strong comments and experiences.

This proposal is shocking and completely disheartening and detrimental in many ways. Those of us who (1) live in New York, (2) are self-employed and, (3) thus NOT participating in employer-based plans OR (4) not participating in government supplemented "marketplace" plans have few options from which to choose; and all are HMO's.

2016 was the 3rd year in a row I have had to change insurance plans because the Insurer dropped their INDIVIDUAL PLANS IN NYS. When selecting a new plan for January 2016, only Empire BC BS offered Providers where at least a few of the doctors I have regularly used participate. A doctor/patient relationship takes time and is an important element in maintaining one's health; perhaps NOT to a 25 year old, but certainly to an ageing individual. Having to change doctors yearly is not ideal.

With few options and a desire to have excellent coverage (despite being healthy and without chronic or acute illness), I chose a plan that is quite honestly a hardship for me to afford. I sacrifice other things to be able to make this monthly payment; which is an outrageous $750.76 per month. (FYI, None of the providers I see will accept Marketplace plans.)

I am not dissatisfied with my plan, but a rate increase for 2017 is too soon and too much! It seems incongruous that those of us that are not supported by employers, who do not take advantage of government subsidized plans, and who have so few options, are getting an increase. But not just a small increase, but a whopping 30% increase! This is truly outrageous and inexplicable to me. I, and I am sure thousands of others, are being priced out of these plans. I am paying a higher premium this year than I did with my prior insurer last year. I know I will not be able to handle another increase and I will once again have the same issues of starting this awful process all over again. Where does this end and what recourse do we have to delay this increase and reduce the huge proposed amount?

I appreciate your consideration of my comments and ask that you please PLEASE DENY this very large 2017 proposed increase.

Kindly acknowledge receipt of this email and please advise if it or other details should be sent to any other person or organization.

Sincerely,

Empire BlueCross BlueShield, Pathway Enhanced - Platinum Plan. INDIVIDUAL coverage
HIOS ID# 2016 HIOS ID 80519NY0160014/ 2017 HIOS ID 80519NY0160014.
June 13, 2016

NYS Department of Financial Service
Health Bureau – Premium Rate Adjustments
1 Commerce Plaza
Albany, NY 12257

RE: Empire Blue Cross Blue Shield
(an Anthem Company)
ID [REDACTED]
Pathway HMO Individual Plan
2016 HIOS ID 80519NY0160014 / 2017 HIOS ID 80519NY0160014

To Whom it may concern:

I signed up with this insurance company (Empire Blue Cross Blue Shield) December 2015. I had to change due to the fact that Health Republic went out of business (my rate with Health Republic was 585.00). My premium for December 2015 with Blue Cross/Blue Shield was 612.00 per month. The very next month, January 2016 my rate went to 691.01! NOW they want a rate increase of 25.1%, 173.44 bringing my total monthly bill to 864.45. In other words in from Dec 2015 to Jan 2017 (14 months) my rate will have had 3 increases totaling 252.45 and if you take into account how much I was paying with Health Republic that is $279.45 in 15 months. On top of that, with Blue Cross Blue Shield, even though I have Platinum plan, same as with Health Republic, I now have co-insurance and OOP max of 2000/4000 which is something I did not have with Health Republic. Also, my plan has dental for a child. What child? I am 62 years old and my "kids" are 41 and 38 years old! Why do I have to pay for a child’s dental with I have insurance for Me, Myself, and I? Therefore, I am paying MUCH more and getting less with having to pay more out of my pocket. I need referrals which I didn’t need before and doctors that I would have been able to use on my last plan are no longer available to me. I am also told that just because a doctor is “in network” doesn’t mean he will treat me. I am told to check with the office before going. How is that? This is NOT what is called an "affordable care act" by any stretch of the imagination. I ask that you DO NOT ALLOW THIS TO HAPPEN. Thank you.
June 8, 2016

Dear Governor Cuomo,

I am writing on behalf of my husband and myself, and countless other people I am sure. I have tried several avenues concerning the situation we now find ourselves in and sadly have gotten nowhere.

We currently have Empire Blue Cross Blue Shield under Obamacare. We are small business owners and the insurance premiums are ridiculous (even with the subsidy!!)!!! They were increased so much this year that we had to switch to a cheaper quality Empire plan and now it seems they are looking to increase it even more for next year!!!!! A 25% increase to be exact!!!! How is it that these companies get away with this????!!! Lobbying I suppose???? Let me know how we can lobby against them and we will!!!

We would switch to another plan on the exchange but none of our doctors accept them. Actually many doctors don’t accept them. So tell me, what is the point of paying for insurance that no one accepts????

This entire health care system is a disgrace and we as New Yorkers do not settle for mediocrity or injustice. We are getting extorted and need your help!!! I would hate to think that quality healthcare is reserved only for the wealthy and empowered, and not for the hard working middle class. It is sure beginning to seem that way.

Thank you for your time and feel free to contact me at [redacted]

Sincerely Yours,
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 with 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 lose 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.
To Whom it May Concern,

I am concerned! In 2015 the Silver Select plan had a $250 deductible. This was fabulous and affordable for me. In 2016, that same plan’s deductible increased to $2,250! That is nearly ten (10) times what it was just one year prior! I am a single mom with a low income (just not low enough for the free care plans). Now you are proposing to increase the premium on an already expensive plan. I urge you to not to! Please consider folks in my situation.

Sincerely,

Ithaca NY 14850
To whom it may concern,

We are currently the staff at [blurred] employed by [blurred] in New York State. We recently received notice of an increase in our insurance premiums of 12.6%, proposed to take effect in 2017. This correspondence is to request that this proposed premium increase be lessened or cancelled completely. Our business is extremely small and still within its first year of operation. We are the only three full-time employees and our salaries reflect a relatively low income which does not allow much room for such increases. We understand that medical costs are continually increasing. However, it would be a burden for us to further decrease our income each month in order to compensate this percentage and still be able to sustain our additional bill payments and family care responsibilities.

We request that you please reconsider this increase, as it would greatly effect our families. Thank you for taking the time to hear our concerns.

Sincerely,
Hello, I am the health benefits administrator for my small business. I am outraged at the cost of the premium for a single plan. Which is the minimum you can get. I had not even met my $250.00 deductible for the year. This means that I take care of myself and so do my employees. Why should we pay an outrageous premium for health care to offset the loss due to people who do not have coverage. Or care to get coverage. Or are on welfare. This department should not allow a rate increase of any type for any health insurance. The federal plan is a disaster. The jerk in the white house forced his plan through so all the unemployed will continue to receive benefits while the workers continue to work to subsidize them. All in all the premium for my coverage is too high already. I believe it should be affordable for the working person. We already pay too much in taxes. Frustrated with New York, [Redacted]
Maria T. Vullo, Acting Superintendent  
NYS Department of Financial Services  
One State Street  
New York, NY 10004-1511

Dear Superintendent Vullo:

My constituents and I are deeply concerned about the double-digit health insurance rate increases that you’re reviewing.

In these tough economic times, many New Yorkers struggle to make ends meet and can hardly afford their existing premiums.

It’s unconscionable to ask them to shoulder another spike of this magnitude. Working individuals and small businesses simply can’t keep pace with these spiraling costs.

I respectfully ask that you carefully analyze each insurer’s request and make sure they’re not profiting on the backs of hard-working, middle class consumers.

All the best,

Frederick J. Akshar II  
State Senator
I am writing to urge your office to represent my interests as a NYS and NYC taxpayer. Please refer to this article (http://www.vox.com/2016/6/21/11981610/health-spending-slowdown-obamacare) when your department reviews health insurers' premium increase submissions for 2017.

As you can see, "the system" is spending less, so please act as my advocate and insist to see evidence that insurers are investing in protocols and technologies that drive the cost/patient down, and that there are mechanisms in place to identify those savings, directing them to reductions in my premium, copay, deductibles. Medicare and Medicaid are successfully eliciting 'value" for their premium dollars.

I am fortunate enough to be in the Essential Plan this year, without that, I would be hardpressed to survive. I thank God for that. But, I've been on the individual market now for a few years and continue to wonder why insurance companies and hospitals are able to shift the risk of test/diagnostics which will detect a serious condition, on me while it is they who continue to reap the benefit of that avoided operation/admission, ED visit. Enough is enough.

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Sincerely,

[Signature]
I do not have any of the insurances listed but I have MAGNA CARE WHICH WAS NOT LISTED.