



**NYS Department of Financial Services**

08/14/2012 02:14 PM

To PremiumRateIncreases@dfs.ny.gov  
cc  
Subject Prior Approval Submission

Aetna Health Inc (NY)  
individual  
healthyny

since premiums keep going up every year it would be suitable if income requirements were also increased with a rise from originally the amount of \$2000 per year to currently almost \$5000 per year it is not made easy to stay covered in a healthy ny plan please review my message newyork state citizens with low income should be a priority topic of how to remedy this situation thanks



**NYS Department of Financial Services**

09/04/2012 12:14 AM

To PremiumRateIncreases@dfs.ny.gov



cc

Subject Prior Approval Submission

Aetna Health Inc (NY)  
individual  
hmo

This comment is regarding the proposed rate increase for the Aetna Healthy New York HMO plan. This is the second year in a row that Aetna has proposed not only an increase but an extremely large increase of their rates. I am on a fixed income as many people in this country are and am at this time paying out half of my monthly income to pay for health insurance. If the increases go through I don't know how I can afford to have health insurance. The irony is that I can't not have health insurance regardless of the fact that I can't afford to go to the doctors I need to see without it. I understand the rising costs that the companies who participate in this plan face, and I am profoundly grateful for the fact that the healthy new york program exists. It was beyond absurd the amount of money that it cost me to not have any health insurance before I found this program. Not to mention the monthly rates to go through the conventional channels for health insurance were/ are astronomical. However the fact remains that this is supposed to be a program to help the people who don't have insurance find an affordable solution. How is an increase of around 20% for the second year in a row affordable? Cost of living increases don't even come close to 20% each year so how is the average person supposed to find the extra money to pay the difference? As it stands I pay the \$413 monthly premium on a credit card each month because if I didn't I wouldn't be able to pay half of my other monthly expenses. My rate will increas to over \$500 in December. Now there is talk of yet another increase. I beg whomever it is who makes these decesions to find a more equitable solution. I am willing to pay my fair share, but what these companies are asking isn't fair. There has to be a better way to balance the cost between the insurance companies and the insured. I don't know if my words will make any difference, it seems that it did not matter at all last year. Still I hope that someone will listen to this plea and the others like it and help us. Sincerely, [REDACTED]

**TO: Health Bureau/Premium Rate Adjustments,**  
New York State, Department of Financial Services,  
25 Beaver St., New York, NY 10004

RE: Proposed rate increase for Aetna Healthy New York Plan, by  
Aetna Health, Incorporated

For example: The high deductible health plan [HD HP] without pharmacy, single person rate for 2012, age [REDACTED] years, the proposed increase was from \$218 per month to \$330 per month for the year 2012. However, rather than this 51.4% increase it was held to \$261 (19.7%).

I feel that such a large increase was totally without justification and my opinion is based on the following:

1 **Price Waterhouse CEO, Michael Thompson** projected an average employee's health plan cost increase for the year 2012 to be 9%; increase for prior years 2008 and 2009 was approximately the same. **THE INCREASE WAS MORE THAN DOUBLE THIS RATE.**

2. **The US Department of Health and Human Services** in their official reporting quotes all state growth in healthcare costs to be **6.3%** but in individual states New York State is listed in the 2009-2019 projections as expecting an approximate 20% increase above average; this would only bring the **projected growth rate up to approximately 7.5%**

**Further in their studies they are expecting a consumer price index increase of 2.3% and a private health coverage increase of 3.8%.**

Taking the above into account and even granting them rates double the above expected, an increase of 16.5% for 2013 would appear to be overly generous.

It would appear that a major factor in the private health insurance cost expectations is an **increase in profit**, which is clearly reflected by the excessive rewards to management and a somewhat mindless increase in bureaucracy in a vain effort to control the direct costs of medical and hospital care.

I trust that my comments maybe of interest to you,

Sincerely,

[REDACTED]