



RECEIVED
JUL 29 2011
HEALTH BUREAU
N.Y.C. OFFICE

July 19, 2011

Health Bureau – Premium Rate Adjustments
New York State Insurance Department
25 Beaver Street
New York, NY 10004

Re: HIP Direct Pay Plan increase

To Whom It May Concern:

I am writing this letter because I have received your notification dated July 15, 2011 in which you speak about the possibility of a potential premium rate increase as high as 12.6% to be effective in 2012.

I feel that this proposed increase is excessive for the following reasons:

- For 2011, my premium was increased by over 15% from the prior year 2010.
- The premium increase in 2011 and the proposed increase in 2012 are not consistent with salary and cost of living increases that most people receive at their jobs.
- The rising costs of healthcare are forcing many people to go uninsured which creates a drain on the healthcare system since these individuals will still require medical treatment.

I understand that according to the letter the 2012 increase is only preliminary however I hope this response as well as any others you have received will factor into the final decision since these increases do create a substantial financial burden for the middle class population who have no other option but to pay for their own health insurance.

Thank you for your consideration.

Sincerely,



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JUL 27 2011
HEALTH BUREAU
N.Y.C OFFICE

July 25, 2011

Health Bureau -- Premium Rate Adjustments
New York State Insurance Department
25 Beaver Street
New York, NY 10004

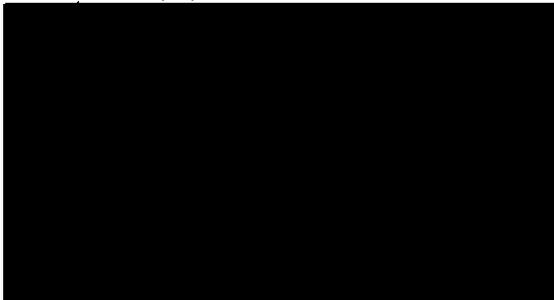
Dear Sir:

I recently received a letter from Emblem Health requesting a 12.6% increase in my out-of-pocket health premium, which currently exceeds \$850 per month.

 this current rate has been a financial hardship; with the requested increase, it is a greater burden.

Last year, and previous years, Emblem Health has consistently requested annual increases and has been given permission to do so. I wrote last year and was very discouraged when my rate jumped to its current level. Will there ever be a stop to these constant high increases? I truly hope that there is someone in this judgment system that understands what a hardship this is for individuals paying out-of-pocket. I urge you to reject this request and offer some relief to those of us who cannot continue to pay for these huge requests. Please take this into consideration before rendering your decision. Thank you.

Sincerely yours,



7-24-11

Health Bureau - Premium Rate Adjustments
New York State Insurance Dept.
25 Beaver St.
New York, NY 10004
ATTN: Charles Lovejoy

RECEIVED
JUL 27 2011
HEALTH BUREAU
NYC OFFICE

RE: Emblem Health/H.I.P. proposed premium rate increase

Hello,

I am covered by H.I.P., Health Plan of New York, through Emblem Health. I have received an advance notice from Emblem Health informing me of their latest application for a rate increase.

The most recent increase they obtained went into effect in Jan. 2011. They now propose a 12.6% increase, to go into effect in Jan. 2012. [REDACTED]

[REDACTED] for my own personal sob story.

I urge you to deny their application for any rate increase at this time. The economy is staggering, working people are flailing trying to maintain a foothold in quicksand, and these constant whopping increases are a crime against the policyholders. I propose a decrease in benefits, perks and salary for the top echelon of management at Emblem Health instead.

I can't afford the premiums as it is. I won't be able to pay if they go up. Therefore I will lose my coverage. Then what will I do? Seriously?

Thank you,

[REDACTED]

July 22, 2011

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JUL 28 2011

HEALTH BUREAU
N.Y.C. OFFICE

To Whom It May Concern;

I have been a member of Hip Health Plan of N.Y. for several years.

When I first got the plan I was paying \$500. It has increased to \$852 monthly.

I received a letter, (which I am enclosing a copy) that they are asking a 12.6% increase.

It seems to me that every two years they ask for an increase they are never refused. I could see if its a reasonable raise but 12.6% is asking too much. which will be \$1,000 a month for me.

I think this is unfair and will be too hard for me to pay every month with things the way they are. My employer does not pay into my Hip plan.

Please consider this when you agree or disagree to give Emblem Health the increase they want.

I thank you.

Sincerely

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JUL 27 2011

HEALTH BUREAU
N.Y.C OFFICE

Dear sir/madam,

I recently received an advance notice from emblemHealth (HIP/HMO) stating that changes to my premium rate will increase by 12.6% of which will take effect on January 1, 2012, if approved by the NYSID.

My distress is that this increase of \$94.86 will be added to my current premium of \$752.82 = \$847.68 per mo. of which is \$10,172.16 annually.

When are these high increases going to stop? year after year.

What does a person in my position do?

I live on my savings pay for living expenses and health insurance before you know it my savings

Con'd

Will be depleted down to nothing
in a short time,

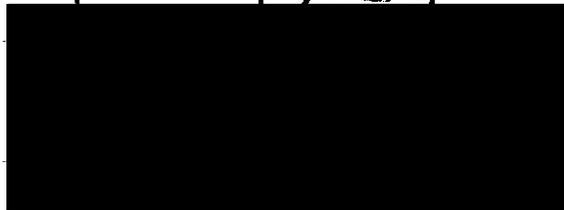
What then! go on Social Services
Human Resources?

It would be nice if the new
health plan would take in Consideration
people like me who are in my Situation,

It would be wonderful to see from
health insurance Companies give us
some decreases once in awhile.

I will appreciate a response Thank you.

Very Truly yours,



[REDACTED]

Health Bureau - Premium Rate Adjustments
New York State Insurance Dept.
25 Beaver St.
New York, N.Y. 10004

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N.Y.C. OFFICE

[REDACTED]

This is to protest the 12.6 percent rate increase to my health-insurance rates that Emblem Health recently filed for. I have a direct-pay HMO plan through HIP, now part of Emblem.

If your department grants Emblem's rate hike, the trajectory of my monthly premiums rockets into the deep stratosphere as follows:

- 2010: \$752
- 2011: \$864
- 2012: \$973

That's almost a 30 percent hike since the start of 2010. I don't know anyone whose income has jumped 30 percent in the past two years.

[REDACTED]

Two things vex me: Last year's notice from HIP specifically cites the federal Affordable Health Care Act as partly to blame for the increase. That legislation was supposed to hold costs down, right? So why are the rates ever higher?

Further, your department approved Emblem's merger of HIP and GHI and its switch from non-profit to a for-profit corporation. That merger was sold to you in part by promising efficiencies of scale: combined workforces and cutting overlap was supposed to mean lower costs. That's surely a broken promise in the face of such gargantuan rate hikes. You need to hold Emblem's feet to the fire on that.

I am hopping mad at the size of this increase, pure *chutzpah*. Please do not rubber-stamp it. It warrants your regulators' closest scrutiny. I cannot imagine that Emblem's books would ever justify its customers paying 12.6 percent more come January.

[REDACTED]

Sincerely,

[REDACTED]

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AUG 02 2011

HEALTH BUREAU
NYC OFFICE

[REDACTED]

July 27, 2011

New York State Insurance Department
Health Bureau – Premium Rate Adjustments
25 Beaver Street
New York, NY 10004

[REDACTED]

I received a letter dated July 15, 2011 from Emblem Health of which HIP, my health insurance carrier, is part. Emblem Health is proposing an increase of 12.6% to take effect on January 1, 2012 for HIP's Direct Pay plan.

This increase is excessive and unnecessary. It will force many of us who directly pay Emblem to drop health coverage due to cost or reduce other necessities of life to pay for health insurance. Premiums were raised last year and the service diminished, why grant an increase?

[REDACTED]

This kind of treatment in my opinion does not warrant an increase to premiums. With co-pays for everything and the deductibles (i.e. \$500 for surgery) any increase places an undue strain on Direct Pay customers.

I do understand the cost for healthcare is high but the premiums should not be detrimental to your health or pocketbook.

In this time of high unemployment, minimum wage and frozen pay, I strongly urge you to deny Emblem's request for an increase to the Direct Pay rates.

Sincerely,

[REDACTED]

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AUG 02 2011

HEALTH BUREAU
N.Y.C. OFFICE

7/31/11

ATT. NYS. INS. DEPT.

IN NOV. 2009 I SWITCHED
HEALTH INS. COMPANIES FROM
EMPIRE B/C + B/S TO HIP. FOR
THE SAME REASON I AM WRITING
~~THE~~ THIS LETTER.

AT THAT TIME IN 2009 EMPIRE
RAISED MY PREMIUMS TO WAY
OVER \$1000.00 A MONTH. I COULD
NOT AFFORD THIS AMOUNT. WHEN
I SWITCHED TO HIP IN 11/2009,
MY PREMIUM WAS \$752.63 A MONTH.
IN 2010 IT REMAINED THE SAME.
IN JAN. 2011 HIP INCREASED MY
PREMIUM TO \$864.03 A MONTH.

NOW FOR 2012 HIP AGAIN WANTS
TO INCREASE THE PREMIUMS TO
A 12.6% RATE. FOR LACK OF A
BETTER WORD I AM PISSED.
I CANNOT AFFORD ANOTHER
INCREASE.

FOR THESE REASONS I AM WRITING
TO YOU TO CONSIDER DECLINING
THIS INCREASE.

(2)

THERE HAS TO BE A BETTER
WAY TO SUCK THE LIFE OUT
OF SUBSCRIBERS.

[REDACTED]

Sincerely,

[REDACTED]

TO: N.Y. STATE INSURANCE DEPARTMENT

RE: EMBLEM HEALTH (HIP) RATE INCREASE REQUEST

DATE: JULY 27 2011

TODAY I WAS NOTIFIED (ATTACHED) OF HIPS REQUEST TO YOU TO ONCE AGAIN RAISE MY COMPANYS HEALTH INSURANCE PREMIUM. THIS YEAR THEY WANT AN ADDITIONAL 20+% INCREASE. UNFORTUNATELY THIS "RAISE THE RATE" IS NOW AN EVERY YEAR OCCURANCE. ITS LIKE CHRISTMAS FOR THE INSURANCE COMPANY'S. PERHAPS THE INSURANCE COMPANY'S SHOULD LEARN TO CUT COSTS TO SURVIVE LIKE I, AS A SMALL BUSINESS HAVE LEARNED TO DO. THE PROBLEM FOR ME IS THERE IS NO PLACE ELSE TO CUT TO SURVIVE.

NEEDLESS TO SAY THIS WILL BE THE STRAW THAT BREAKS THIS CAMELS BACK. IF YOU ALLOW THIS INCREASE TO HAPPEN IM CLOSING THE DOORS TO [REDACTED] AND WILL LEAVE NEW YORK STATE.

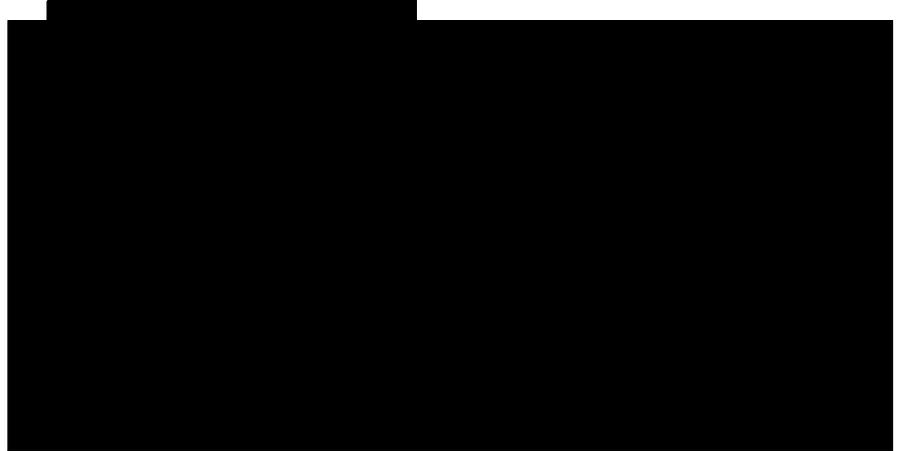
I KNOW THAT WHEN THIS HAPPENS HIP AND YOUR INSURANCE DEPARTMENT WILL NOT CARE. THE ONLY PEOPLE THAT WILL CARE ARE THE HARD WORKING FOLKS I WILL BE PUTTING OUT WORK. KEEP IN MIND WHEN THESE FOLKS ARE COLLECTING PUBLIC

ASSISTANCE YOU WILL BE FOOTING THE BILL.

I APPRECIATE THE OPPORTUNITY TO EXPRESS MY FEELINGS ON THIS MATTER. I CAN ONLY HOPE THAT THE FOLKS IN YOUR DEPARTMENT THAT CONTINUE TO OK THESE ADJUSTMENTS GROW THE INTESTINAL FORTITUDE TO

JUST SAY NO!

SINCERELY YOURS



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July 28, 2011

New York State Insurance Department
Health Bureau-Premium Rate Adjustments
25 Beaver Street, NY 10004

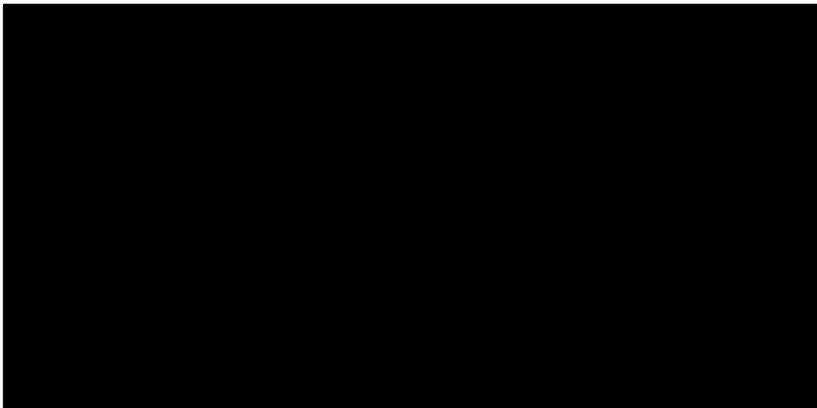
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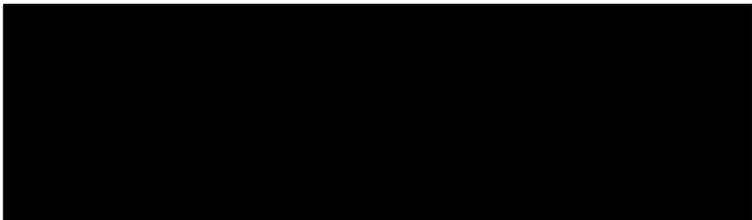
Subject: Opposition to HIP HMO Direct Pay rate increase of which I am a member.

Dear NYSID,

Based on previous year MLR data of HIP HMO e-mailed to me by your department upon my request, the fact that the request for increase is based on projections as you pointed out in the e-mail and the downtrodden economic conditions I write in opposition to a rate increase at this time.

Thank You





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N.Y.C. OFFICE

July 28, 2011

Health Bureau-Premium Rate Adjustment
New York State Insurance Department
25 Beaver Street
New York, New York 10004

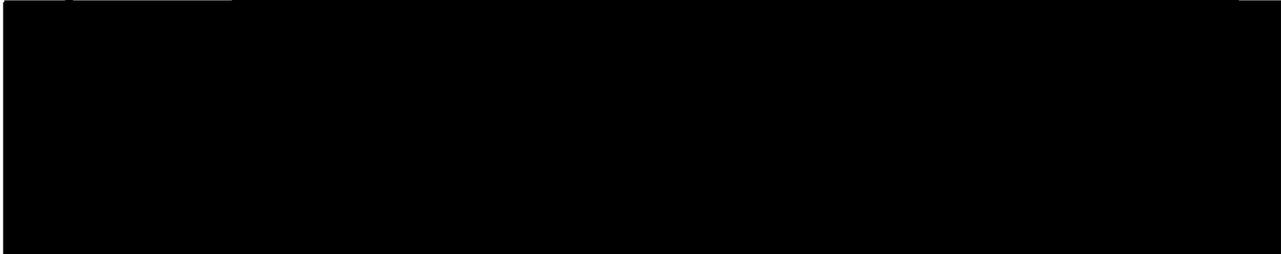
Gentlemen:

I am contacting you in reference to the premium rate increases proposed by LIA Health Alliance/HIP Health Plan of New York, per the enclosed. The amounts being proposed for the increases are much too high and I am contacting you to ask that they be lowered.

[REDACTED] have medical insurance coverage with HIP through LIA Health Alliance on an "employee and spouse" plan. [REDACTED]
Our plan renews in April which means that we will have the highest percentage increase of any plan listed, 50% more increase than the next highest plan increase. I do not know why our category is being singled out for an increase of a third, but even the approximately 20% increases sought for the other categories is too high.

We first took out this coverage as of June 2008. Our initial premium was \$684.65 per month. Our current premium is \$1221.48. Our premium has almost doubled in only 4 years. The additional increase will raise our premium to \$1628.23 (around \$20,000 per year) which is almost a tripling of the premium in 5 years. This coverage is not for a family, but for a couple, only 2 people. I am certain that HIP and LIA costs have increased over the years, but have they doubled per person? Tripled?

At the same time that our premiums have been rising, in the last two years HIP has imposed limitations on us. We have had mandated changes in ongoing medications, including insulin. We are now only covered for use of a [REDACTED] that is much less accurate than [REDACTED]



We ask that the increases requested, per the enclosed, be lowered to a more reasonable amount and that employee and spouse plans which happen to renew in April-June not have a percentage increase so much greater than that of any other renewal. Thank you.

Sincerely, [REDACTED]

①

July 29, 2011
~~Sept 23, 2010~~

Hear Mr. Charles Louiejoy, (To Whom it may concern)
I have been a hip (HIP) member for 30 years and I have always paid my premium on time.

[REDACTED]
I always helped them both now & [REDACTED] also

[REDACTED] are his [REDACTED] law

paying now 653.83 for a single person. I pay quarterly every 3 months which equals 1,961.49. I can barely afford that and know they are telling me it is going up to 882 and change a month that is an increase of 229.00 a month and quarterly that is an increase of 687.00 there is no way I can afford this. I have always been good with HIP and have always paid on time. I

NOW 2011 757.82
2011 NOW I pay 2,258.46 (quarterly)

[REDACTED] and I need age 2011 55 new my health coverage I have cancer in my family which I [REDACTED] it seems like everyone I know gets it for close to nothing or free when I tell them what I pay they

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②
think I am crazy, I am

enclosing a copy of my [REDACTED]

[REDACTED] I hope you
will take this into consideration
not only for me but for other
people too that are trying hard
and want to be honest and don't
want to use the system like others
Hope to hear back from you my
[REDACTED]

July 30, 2011

New York State Insurance Department
Health Bureau-Premium Rate Adjust
25 Beaver Street
New York NY 10004

Emblem Health
Attn: Premium Rate Filings
PO Box 2890
NY NY 10117-2087

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AUG 02 2011
HEALTH BUREAU
N.Y.C. OFFICE

To Whom It May Concern,

I am writing to inform you that I received a letter dated July 14, 2011 (see attached) informing me that Emblem Health is requesting a rate increase of 34.1-39.1% (sic!!!) on [REDACTED] HIP health insurance premium. While I honestly don't expect rates to go down, I was taken aback by both the size of the increase and the timing of the request.

First, let's talk about the size of the increase. Perhaps HIP is asking for such a large rate increase again because they were upset that they were ONLY (ha ha) granted an 18% increase effective May 2011. They had asked for a 44-49% increase, so must have been disappointed with a measly 18% increase. If only we could all raise our prices at such a rate! In the letter informing me of the size of the increase they direct me to the web-site www.emblemhealth.com/2012 rates, where there is no explanation of how they arrived at such a large increase again, simply that they are required to spend 82% on actual medical expenses as opposed to administrative expenses. I question whether they have had so many medical expenses when it has been widely reported in the press that people have been using fewer medical services and postponing care as a result of the recession and the continuing explosion in the cost of insurance and medical care. Furthermore, why should "employee and spouse" coverage always be hit with the largest of all the increases? It's almost double the percentage of any other type of coverage! I doubt that there is much proof that married couples are a higher health risk and use more medical services than two individuals. In fact, research has shown that married couples tend to live longer and healthier lives than singles.

Now let's consider the timing of the request. As I stated earlier in this letter Emblem/HIP was granted an increase of 18% for employee and spouse coverage in May of 2011. The letter informing me of the request for the 2012 increases is dated July 14, 2011. How can Emblem/HIP know with any certainty, in the space of a mere two months what their medical loss rate will be for the next ten? They can't! They are making the request for this kind of an increase way too early.

Do not allow these exorbitant rate hike requests! In 2008 I was paying 540.06. In 2011 my rate is 996.96 That's an increase of 84% in the course of 4 years! This is a bare bones policy with no pharmacy, a 3000/6000 deductible, and 80%/20% in-network co-insurance. Where is the money going?

I strongly urge you to reject these exorbitant rate hikes and request that you pay particular attention to the fact that they are always asking almost DOUBLE the increase in "employee and spouse" coverage. I really doubt these kind of increases are justified.

Thank you for you attention to this matter,

