

July 5, 2011

Health Bureau-Premium Rate Adjustments

New York State Insurance Department

25 Beaver St.

New York, N.Y. 10004

RECEIVED  
JUL 07 2011  
HEALTH BUREAU  
N.Y.C. OFFICE

*Re: Rate Filing for Oxford New York Small Group Direct Plans*

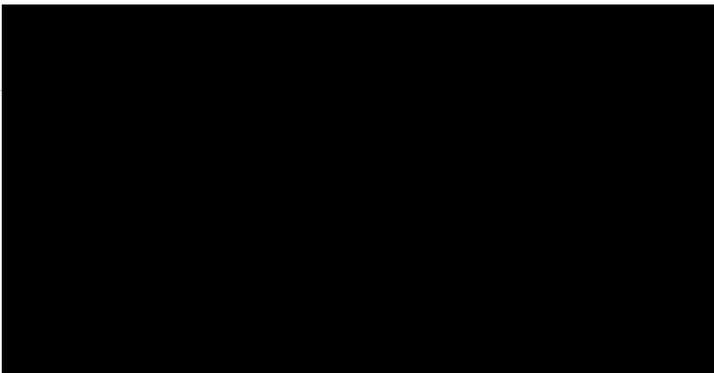
Dear Sir or Madam:

I write to oppose United Health Care/Oxford's ("Oxford's") request to you for a rate increase.

Given its years of experience and expertise in the health care industry, Oxford should have been able to properly estimate its costs for 2011. The suggestion that an increase in health care costs was unanticipated by Oxford is devoid of credibility. Oxford's request implies a profound inability by its executives to properly manage its accounts, employees, officers and executives. I should not be required to suffer or pay for Oxford's extreme shortsightedness, willful or gross neglect, improper and/or misleading business practices. However, the most outrageous notion about Oxford seeking even more money from consumers is that I/we signed a contract at a specific rate designated by Oxford for 2011. Personally speaking, I thus rejected policy offers from other competing companies. If Oxford is permitted to essentially abrogate a binding contract and raise its rates, then it is clear that I relied on their false and/or negligent representations to my detriment.

My monthly premiums are outrageous as it is. Health care, as you well know, has become unaffordable for all but the wealthiest Americans or those fortunate enough to be insured through an employer's plan. For those of us who are self-employed or unemployed the cost of basic health care is burdensome, if one can afford it at all. The proposed increase is unnecessary and merely designed to further enrich Oxford and its executives.

Thank you for your consideration.



July 5, 2011

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

2011  
HEALTH BUREAU  
N.Y.C. OFFICE

RE: Oxford NY Small Group Direct – Rate Filing

To Whom It May Concern:

I am beyond outraged by UnitedHealthcare/Oxford request to increase premium rates. This is on top of the 12% increase that your department approved for this year.

I'm a sole proprietor. In this economy, I can't even afford my current premium. The lowest rate I could get has a \$3,000 deductible, so I'm paying out-of-pocket expenses for medication and doctor visits on top of my monthly rate.

It's time for the NYS Insurance Department to be more concerned about consumers than giant insurers. Even with higher costs, these companies are not hurting----while customers are.

It appears to be politics as usual. The health insurance companies are requesting a 26.3% rate so they will receive approval for half that amount---as they did last year.

I can see a 3-5% increase, but this company is playing games it always wins. **When is this going to stop?** Your obligation should be to small businesses, not UnitedHealthcare/Oxford.

Sincerely,

New York State Commissioner of Insurance,

It has come to my attention that Oxford Insurance is choosing to raise its rates. I am already paying an astronomical amount. I have to ask you when does this stop? Please for our consideration have some mercy on older people. The cost of staying alive becomes prohibitive. I believe they are making enough money with the current amount we are paying. The cost of staying alive is outrageous. I look forward to hearing a response from you.

July 7, 2011

Mr. Charles Lovejoy  
Health Bureau  
New York State Insurance Department  
25 Beaver Street  
New York, NY 10004

Re: June 22, 2011 rate filing for Oxford's New York Small Group Direct Plans

Dear Mr. Lovejoy;

I have an HSA-Sole Proprietor Health Insurance Plan with Oxford that covers both [REDACTED]. I recently received a statement from the insurer stating that they are seeking a 19.7% rate increase for 2012. If this requested increase is approved, it will mean that the cost of our premiums would have increased 71% in just three years.

[REDACTED] \$5,700 deductible on the plan we have, so we consider our coverage pretty much catastrophic coverage; but, the only thing catastrophic is the cost which will be \$16,788 annually for us – this is more than I will receive annually in social security benefits after working all my life.

I was just reading in the August 2011 issue of *Kipling's Personal Finance* that "the cost of health insurance is projected to go to about 8% in the coming year", newspaper reports talk about labor unions fighting against their members paying an extra 8% of their health premiums (which are a fraction of what we are paying); and yet Oxford is asking for nearly a 20% increase in our premiums in 2012, after a 22% increase in 2010 and a 17% increase in 2011.

I do [REDACTED] just pray that they do not go out of business, I have not had an increase in the amount that I am being paid for the same time period that we have seen our healthcare premiums increase. I would at least like to know what compelling reasons Oxford has given to the New York State Insurance review board to enable them to pass along nearly prohibitive costs, perhaps insurers and the insurance board do not really want to be covering small fry operations like myself and others.

There should be an insurance resource for individuals to have affordable coverage, and there should be dental insurance for those of us who are not able to belong to unions or other establishments where fabulous health care is provided.

Thank you for taking the time to read my letter, I hope that what I have expressed will make a little bit of a difference in your committee's evaluation of Oxford's needs for turning a profit. Unlike big business there are no lobbyists to advocate for small businesses and sole proprietors. And there is no overhead to be cut or personnel to lay off to compensate for 20% increases each year in our health insurance.

Sincerely,

7/7/11

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

HEALTH BUREAU  
N.Y.C. OFFICE  
JUL 11 2011

**RE: Pending Rate Increase For Oxford New York Small Group Direct Plans**

To Whom It May Concern:

[REDACTED] currently use the above referenced plan for ourselves and our employees. We received a letter from Oxford notifying us of their intent to file an application with you to approve a rate increase of up to 21% on 6/22/11. This is absurd.

Our out-of-network benefits have already been drastically cut from a payout according to usual and customary to 140% of the Medicare fee schedule. Our in and out-of-network deductibles have doubled in the last year and a rate increase has already been applied to our group premium. Pharmacy benefits have been cut and co-pays have been increased.

[REDACTED] can say that the cost of services provided by our clients has not gone up in the last year. It seems like the increase in insurance premiums is not translating to increased pay to medical providers, but rather increased profits for the carriers. Seeing as how costs have not gone up and benefits have been cut, I see no justification for this enormous rate increase.

Please do not approve this rate increase. As our firm represents many top doctors in [REDACTED] I would welcome the opportunity to meet with you to discuss further.

Thank you.

July 1, 2011

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

RECEIVED  
JUL 05 2011  
HEALTH BUREAU  
N.Y.C. OFFICE

To Whom It May Concern,

I found it appalling and unconscionable that Oxford/United Healthcare has increased its rates year over year, for the past several years. Every year the monthly premiums have gone up by a significant amount, not just a few dollars.

Again, United Healthcare / Oxford is requesting to increase rates. If the company has added expenses, I believe the most reasonable course of action is for the bonuses for executives reach a more equitable level before the company's clients are charged.

In 2010 the **compensation for CEO** Stephen Hemsley, **was \$10,810,131.**

I guess we should be relieved that that is down considerably from \$124,800,000 the CEO made in 2005. Really? How does one person earn that that many millions of dollars by increasing the cost of healthcare insurance for the "working person"? Quite to the contrary, I would say that person is not doing his or her job but is focused on looking out for themselves and the company's "shareholders". Is that really what a job, a company should be about?

If we, the individuals and Small Groups, wish to have health care coverage, we have barely any choice in providers; others offer little coverage or a paltry number of doctors offering services.

I hope and request that the company and those responsible for making this decision will re-think the increase in medical and pharmacy premiums and leave them at the same levels as last year.



Health Bureau-Premium Rate Adjustments  
NEW YORK STATE INSURANCE DEPARTMENT  
25 Beaver Street  
New York, NY 10004

RE: Application by United healthcare/Oxford for rate increase to Direct group rates for 2012

I understand from the enclosed notice that I am permitted to comment on this pending rate increase application.

Please consider the following comments:

Last year we received a notice from United Healthcare that they were changing their method of claim settlement from the historical “reasonable and customary”, which was bad enough, to the new MEDICARE 140 method, for out-of-network providers.

In the notice they explain how their large network of participating providers can minimize one’s out of pocket expenses. The facts are, nonetheless, that several of my longstanding healthcare providers are leaving the network and this trend seems to be accelerating.

The notice says the following: Benefits of the new Out-of-Network Reimbursement Amount “Helps keep health benefits affordable for you through lower premiums”. “Encourages providers to join our network....”. These are fairy tales.

You need look no further than the examples they provide on the enclosure to see how patient costs dramatically increase and United’s costs dramatically decrease.. By a factor of 50% or more in the colonoscopy example they use. So this should lead to lower premiums, right?

Well then, why are they applying for such a dramatic rate increase ? I guess the notice they sent us in March heralding lower premiums was a simple lie. MEDICARE 140 MUST have significantly decreased costs and to request this huge premium increase is just another slap in the face to those of us who rely on United/Oxford for our healthcare services. Every move seems designed to increase profit margins and there seem to be no limits to the prevarications (nice term for lies) that they will engage in to get what they want.

[REDACTED] Amount reimbursed under their new plan, [REDACTED] I appealed and asked for review. They denied and said it was proper under Medicare 140. I have asked them to show me how this is calculated. Let's see if they give an answer.

In any event, I request that you closely examine the net effect of the move to MEDICARE 140, which I note, cleverly on their part, has only been in effect for several months prior to their rate increase application, to see if the cost reduction experienced from this change has had a significant lowering in claim settlement costs and thereby reduces the justification for any rate increase at this time.

We're a small company struggling in a tough economy, like many others. Our second largest expense after payroll is the 65% share of health care costs we provide for our employees. We understand the need for providers to earn a profit, but something strikes us as fundamentally wrong when they are lowering their costs and raising our costs and crying poverty at the same time. We rely on you to keep the system "honest"

Thank you for your consideration.

To the Heath Bureau regarding Oxford's request for a rate increase

I am writing to strongly protest Oxford's request to raise rates.

My company's premium for medical and pharmacy coverage is scheduled to increase by 19.7 % if you approve.

Last year, the premiums went up by a similar percentage.

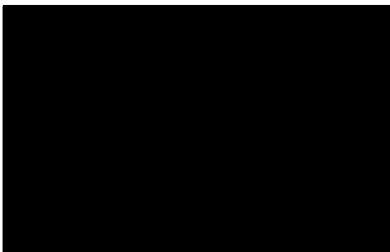
This year, it is particularly galling as not only does the premium increase, but the actual coverage for the same policy plan decreases, necessitating that my employees pay a significantly greater amount out of pocket.

Oxford also is significantly diminishing out of network coverage by tying it to Medicare rates. This is not in the spirit of the former attorney general's attempt to disallow these practices that make out of network care exorbitantly expensive.

In the case of Oxford, many of their inwork providers have "quit" as Oxford's reimbursement rates are so low. Everyone seems to lose out with Oxford at this point.

This all does not seem in the spirit of health care reform that makes health care affordable for all: Businesses like mine as well as employees.

I hope you deny Oxford their request and help move them to more prudent and affordable coverage options which may include their looking at their business model and alternative options rather the jump premiums close to 20%.



June 28, 2011 -- VIA CERTIFIED MAIL

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

RECEIVED  
JUL 06 2011  
HEALTH BUREAU  
N.Y.C. OFFICE

Re: Oxford Health Plans, Insurer  
Oxford HSA Direct Freedom Network, Product Name



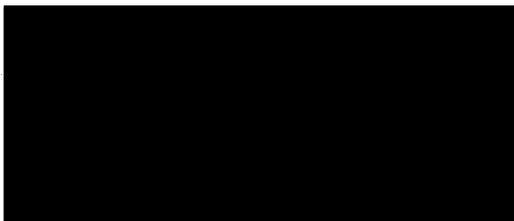
Dear Sir or Madam:

I am writing in response to a notice from United Healthcare/Oxford to my office dated June 22, 2011 regarding the proposed "Rate Filing for Oxford NY Small Group Direct Plans".

As a participant in a small group plan, I strongly oppose the proposed rate increase of 21% for the coming year. Instead of making a more strenuous effort to contain costs (such as cutting administrative costs, cutting salaries and perks of officers, and promoting health care efficiencies) the health care companies keep increasing rates while at the same time cutting back on insureds' benefits. This impacts particularly harshly on solo practitioners and sole proprietors of small businesses (who subsidize larger business and family plans). Soon adequate health care insurance will only be a viable alternative for individuals employed by large corporations and the government.

It should be noted that my plan's rates increased by thirty-five (35%) percent in the past 17 months (from \$388.00 per month for the "high deductible plan" in November of 2009 to \$525.00 per month for the "high deductible plan" in April of 2011). Now Oxford is proposing an additional 21% rate increase. New York State cannot allow such increases to continue without driving self-employed individuals out of the system.

Thank you for your attention to this matter.



June 30, 2011

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

RECEIVED  
JUL 05 2011  
HEALTH BUREAU  
N.Y.C. OFFICE

**RE: Rate Filing for Oxford New York Small Group Direct plans**

Dear Sir or Madam:

I am writing in regard to the rate increase of 26.3% Oxford is seeking for the small group direct plans in New York. It is hard to understand how in this time in our country and state that Oxford would be requesting a 26% increase.

As a broker I have helped my clients figure strategies each year to reduce premium increases, and one of the ways has been for my clients employees to take on more cost sharing in benefits.

With Health Care Reform and the different mandates coming over the next two years, a rate increase like this will have the opposite effect of employers covering their employees for group medical coverage and paying toward the coverage. The employer and employees will not be able to maintain this kind of rate increase. Employers are doing their best to keep their current employees and hire back some employees that were let go during the economic downturn.

Many of my clients have been loyal members with Oxford for many years, some more than a decade. I am asking Oxford, as well as, the New York State Rating Agency to reconsider this extreme rate increase request.

NYS  
Superintendent of Insurance  
25 Beaver Street  
New York, NY 10004

RECEIVED  
JUL 05 2011  
HEALTH BUREAU  
N.Y.C. OFFICE

Attn: Health Bureau Premium Rate Adjustment

**RE: UNITED HEALTHCARE  
OXFORD  
REQUEST FOR RATE INCREASE**

Your Honor,

I am the plan administrator for my firm's Oxford Health Plan. On June 24, 2011, we received the enclosed notice, dated June 22, 2011, notifying us of a simultaneous rate increase request.

This request is an outrage to small business plans such as ours and should be denied. Over the past 5 years, our Oxford premiums have risen over 65% (a conservative estimate) while the overall cost of living and real dollars earned has been flat or slightly higher than flat, a fraction of Oxford's increases.

Such an increase in the past resulted in our retreat to an insurance product, inferior in economic terms, to our prior policy, due to the backbreaking costs. Now, this inferior product is costing us over 25% more than its predecessor, over only a 2 year period. Have you, the governor or any working public official gotten 25% raises over the past 2 years?

This is a runaway industry, without sufficient government oversight and brakesmanship. Another increase will absolutely result in our dropping the coverage and causing our employees to seek alternatives or no coverage at all. We shall not pay 12-14% annual raises on an unlimited basis. I am sure that NYS will be happy to pick up their coverage with Medicaid.

Re: United HealthCare- Oxford New York Small Group Direct plans rate application

Dear Sirs:

Please do not allow any increase to the Oxford Direct rates for groups renewing in 2012. My husband and I are insured through Oxford and because we are a very small business we are hit with astronomical rates. We currently [REDACTED] with a \$6000 deductible per person, are paying \$973 /month.

This high premium alone is not the full extent of the aggressive pricing by UHC-Oxford. Our plan pays at 70% of the Usual and Customary fee, not the old standard 80/20, leaving us with the larger 30% out of pocket responsibility.

This too does not tell the whole story. UHC has *adjusted down* their payment responsibility by setting their allowed payments at 70% of the Usual & Customary fees. In effect, they pay 70% of 70% of whatever they say is the “real” value of a doctor’s services. Aware as we all are of the [REDACTED] scandal in which the insurance carriers used [REDACTED] as a tool to misrepresent U&C fees for medical services, their creative math does not inspire my confidence

[REDACTED] affected physician reimbursement and patient out of pocket costs, and indirectly, but very definitely, treatment decisions. The presentation to you of projected ‘costs’ for which UHC-Oxford is requesting premium increases is, in my opinion, more opportunity for their legions of ‘number people’ to creatively ‘crunch’ numbers for them. I am well aware of their special math skills from the patient side.

One example of their math skills is how Oxford was able to pay less for bilateral breast surgery than for the same surgery performed on 1 breast. (They paid less for 2 separate cancer surgeries performed at the same operative session, than was quoted as their allowance – by 2 different Oxford patient representatives –for a single surgery). Appeal was futile. They were confident of their math.

[REDACTED] I know Oxford has not given physicians fee increases in years. It has bundled more and more services so that they would not be individually payable; It has shifted more and more patients from the better paying Freedom Plans to

the lower fee Liberty Plans and from plans with out of network options to HMOs by raising Freedom plan premiums out of reach for most people. It enrolled doctors in the then new Liberty panels by assuring them they would not be subject to a lower fee schedule, and when a significant number of patients enrolled in the cheaper, heavily promoted Liberty Plan, informed doctors they now had a reduced fee schedule or would lose their patients

I don't believe UHC-Oxford is investing the huge premiums it collects in patient services or physician – hospital reimbursement. The value of its stock reflects the excellence of business model and the huge profits generated. They are not entitled to better pay for their executives or a guarantee of double digit profits when the rest of us struggle to remain productive and independent in this difficult economy.

Sincerely,



[REDACTED]

[REDACTED]

June 28, 2011

RECEIVED  
JUN 30 2011  
HEALTH BUREAU  
N.Y.C. OFFICE

Re: Rate Filing for Oxford New York Small Group Plans  
Oxford HSA Direct

Dear Madam or Sir:

I am a subscriber to Oxford HSA Direct, having been insured by such plan since June 1, 2008. I write to comment on a notice of proposed rate increase for such plan, dated June 22, 2011, and recently received by me from United Health Care Oxford.

The proposed increase of twenty-one (21%) per cent for medical coverage over the 2011 premium is in my opinion unconscionable and unwarranted. This plan provides coverage for sole proprietors with an annual deductible of \$2,850 (so that costs of routine care are not covered). It is supposed to provide good out of network coverage, but this coverage has recently been decreased.

When I enrolled in this plan in June of 2008, the monthly premium was \$308.33. Currently I am paying \$522.85, and another 21% increase would bring the premium to \$632.63. Thus in the space of four years, the premium will have more than doubled if this increase is granted.

During the time of my coverage on this plan, benefits paid have amounted to the cost of an annual physical each year. I am not aware of any dramatic increase in claims which would justify Oxford's exorbitant 21% annual increases, which should not be approved. I cannot conceive of any justification for such consistent and sizable premium increases, for one of the very few plans available at what was initially reasonable cost for self-employed individuals.

Therefore, I ask that no rate increase be allowed for this plan at this time.

[REDACTED]

New York State Insurance Department  
25 Beaver Street  
New York, New York 10004

Health Bureau -- Premium Rate Adjustments

MEMBER NY & NJ BAR

June 28, 2011

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

RE: Rate Filing for Oxford New York Small Group Direct Plans

Dear Sir/Madam:

Please accept this letter as a negative response to Oxford's proposed increase for New York Small Group Direct Plans. It is outrageous that every year Oxford increases the premium and is cutting back on coverage services. Their request for a rate increase should be completely denied. Their present services have diminished in the last year not enhanced. They should not be rewarded for poor consumer service with an outrageous rate increase.

Please contact the undersigned if you wish further comment. Thank you for your attention to this matter.

RECEIVED  
JUN 30 2011  
HEALTH BUREAU  
N.Y.C. OFFICE

June 28, 2011

Dear Sir/Madame,

Health Bureau Premium  
Rate Adjustments  
New York State Insurance  
Department  
25 Beaver Street  
New York, N.Y. 10004

RE: Proposed Rate Increases for the United Healthcare/Oxford New York  
Small Group Direct Plans (specifically the Oxford Exclusive  
Metro/Freedom Network Plan)

Dear Sirs/Madame,

I am writing to protest the rate application that Oxford filed with the NYS Insurance Department on June 22, 2011. In this application Oxford proposes raising the rate of our current plan by a total of 20.80% at our renewal in 2012.

Every year for as long as I can remember Oxford has increased our premiums by double digits. For the past 4 years in particular, our premiums have increased as follows:

In June 2008 - 17.50%  
In June 2009 - 18.00%  
In June 2010 - 18.00%  
In June 2011 - 17.72%

As a small company, and as individual single employees who have to pay 30% of their premiums (and personally as someone who has to pay 100% of the family portion of my premium in addition to the 30% of the single premium), we find these constant double digit increases to be a hardship as well as just plain unconscionable. We cannot understand how, in this economy when people are struggling, have had their hours cut or their salaries cut, an organization can continue to increase their rates in this manner. What employees are getting 18% increases in their salaries? Certainly no one at this firm!

Raising premium rates like this, when cost of living raises are barely at 2%, is not going to fix the health insurance problem in this country - it's throwing more money at a problem hoping to fix it when all it does is make it harder and harder for people to afford insurance.

I respectfully ask that you do not allow Oxford to increase their premiums

by this much and ask them to instead hold their increases to single digits, if anything at all. For once I would love to open up that renewal letter in May and be able to say to myself "Oh wow! No increase AND we get to keep the same plan with the same benefits".

Thank you for your time.

Sincerely,

A handwritten signature in black ink, appearing to be a cursive name, possibly starting with 'A' or 'M', followed by several loops and ending with a long horizontal stroke.

June 28, 2011

2011  
BUREAU  
OFFICE

Superintendent of Insurance James J. Wrynn  
New York State Insurance Department  
One Commerce Plaza  
Albany, NY 12257

Dear Superintendent Wrynn:

I am a small business owner [REDACTED]

I employ [REDACTED] people. I maintain a medical insurance plan for with them through Oxford.

In this upcoming year, our premium was increased by over 20%. And based upon the enclosed letter from Oxford, they are asking for another 20% increase next year.

This is inconceivable and makes my ability to offer health insurance to my employees impossible.

I urge you to take action.

June 28, 2011 -- VIA CERTIFIED MAIL

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

RECEIVED  
JUL 01 2011  
HEALTH BUREAU  
N.Y.C. OFFICE

Re: Oxford Health Plans, Insurer  
Oxford HSA Direct Freedom Network, Product Name  
[REDACTED]

Dear Sir or Madam:

I am writing in response to a notice from United Healthcare/Oxford to my office dated June 22, 2011 regarding the proposed "Rate Filing for Oxford NY Small Group Direct Plans".

As a participant in a small group plan, I strongly oppose the proposed rate increase of 21% for the coming year. Instead of making a more strenuous effort to contain costs (such as cutting administrative costs, cutting salaries and perks of officers, and promoting health care efficiencies) the health care companies keep increasing rates while at the same time cutting back on insureds' benefits. This impacts particularly harshly on solo practitioners and sole proprietors of small businesses (who subsidize larger business and family plans). Soon adequate health care insurance will only be a viable alternative for individuals employed by large corporations and the government.

It should be noted that my plan's rates increased by thirty-five (35%) percent in the past 17 months (from \$388.00 per month for the "high deductible plan" in November of 2009 to \$525.00 per month for the "high deductible plan" in April of 2011). Now Oxford is proposing an additional 21% rate increase. New York State cannot allow such increases to continue without driving self-employed individuals out of the system.

Thank you for your attention to this matter.

Sincerely,

June 29, 2011

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

Re: United Healthcare - Oxford rate application filed June 22, 2011

Dear Mr. Lovejoy:

I am the president of a [REDACTED] that has purchased health insurance coverage through the small business program from Oxford Health Plans for many years. During that time, particularly in the last several years, we have seen our plan coverage costs dramatically increase, despite the current economic recession and a decrease in our revenues. In addition to these premium increases, our coverage benefits have been steadily reduced.

Good doctors who have been part of the Oxford Network have also withdrawn because of decreased reimbursements thereby limiting our access to health care to solely within Network. Even the cost of in-network physician, drug, and diagnostic radiology has increased substantially. The cost of out-of-network benefits has been reduced to the point where utilizing out-of-network benefits is not feasible, even though we pay a premium for a plan that offers that option. We are reaching the point where we will no longer be able to afford appropriate health care. In some cases, we cannot even purchase reasonable benefits for certain services at any cost because they are not available to firms insured through the Small Business Program.

We understand that Oxford is a profit company. However, this health insurance company greed extends beyond what is reasonable or sustainable. Because the new health care legislation did not include cost control measures, the only vehicle for preventing significant and unreasonable cost increases is the mandated review the NYS Insurance Department. We implore you not to grant United Health Care the excessive 21% medical care and 19.8% pharmacy premium increases sought. Reduced benefits to the insured and to providers should not be rewarded with such rate increases.

ADP

HEALTH BUREAU  
INSURANCE OFFICE  
JUN 29 2011  
RECEIVED

New York State Insurance Department:  
Regarding Oxford's rate increase of 19.7%

6/27/11

This is a joke! Oxford proposed to lower my coverage by increasing my deductible and copays, while raising my premium almost 20% this year (2011), and last year (2010) they raised it more than 20% for the same benefits. [REDACTED] I see copays increasing and insurance companies paying out less and less, reaping the income. This is not what Obama had in mind, but he did not have the fortitude to prevent the insurance industry from abusing us until rates had to be approved in 2012.

**DO NOT ALLOW THIS TO CONTINUE TO HAPPEN!**

I am paying almost \$20,000 to insure my family not including an in network deductible of \$2,000. I am paying for something the insurance company will likely never have to pay anything on. It's become a travesty. Doctors can't get paid while the insurance companies are making record profits.

I have not had an in network raise ever, yet my overhead continues to go through the roof. I know of no other profession that has not received a raise in 10 years! Managed care has accomplished literally nothing except making insurance companies rich and providing jobs to a "Managed Care Industry." Since managed care has come into existence, premiums have sky rocketed and healthcare costs have gone up as well. Get rid of managed care and go back to fee for service as competition will lower healthcare costs. Of course, if this happened, a lot of people would be out of jobs. Personally, my overhead is \$175,000/yr and my reimbursements have been lowered to about \$45/visit in network. Do the math. [REDACTED] If the insurance companies weren't so greedy with in network reimbursements, doctors wouldn't be forced to be out of network, where rates are disproportionately high. They have no choice due to such low reimbursement rates in network. If the insurance companies paid fair rates in network (what a novel concept), then again healthcare costs would undoubtedly come down. I could go on for hours about the abuses I've suffered at the hands of managed care (from profiling, unilateral reductions of pay, etc...) but it would be a waste of time. [REDACTED] No one cares! I anticipate being out of business, after [REDACTED] within the next 3 years and am disgusted. Soon it won't matter, because there will be no doctors! Congratulations to Oxford and the rest!