RECEIVED
JUL 07 2014
HEALTH BUREAU
N.Y.C. OFFICE

[redacted]
New York, NY, 10075

NYS Department of Financial Services
Health Bureau- Premium Rate Adjustments

[redacted]

July 1, 2014

Dear Sir/Madam,

My Daughter and I have been insured by Aetna since 2000, first under COBRA after the death of my Husband; from 2003 through February 2014, under a Point-of-Service plan; and since March 2014 under the "platinum" level Aetna Pinnacle PD, with "Open Access Managed Choice," sold to me as an out-of-network rider.

I attach here a History of the Premiums I have paid to Aetna from 2000 to 2013, Document A. The history shows that over the eleven year period we had point-of-service coverage, I paid Aetna a total of $289,643 in premiums. My Daughter and I rarely, if ever, reached our deductible amount.

In early December 2013 I received a letter from Aetna briefly outlining the four new plans that would be offered under the Affordable Care Act. The letter recommended the "platinum" level Aetna Pinnacle PD, with "Open Access Managed Choice" as a rider providing out-of-network coverage. The implication is that this plan would be the equivalent of my QPOS plan. I attach this letter as Document B.

I signed up for the Pinnacle PD with the rider, with coverage effective beginning March 1, 2014. The premium, including the cost of the rider, is $1374, a far cry from the $3749 I had been paying in 2013.

In mid-March I went for my annual Mammogram.

In 2013, under my QPOS plan, my out-of-network doctor charged $440. Aetna allowed the entire amount, which went toward my deductible. See Document C.

Under the new plan, of the same charge of $440, by the same doctor, Aetna allowed only $139.73, which was applied to my deductible. See Document D. In addition, Aetna accepted only $51.36 of a $520 charge for a bone density screening, see also Document D.

The QPOS plan accepted billed amounts considered "reasonable and customary" for the area in which I live, the Upper East Side of Manhattan. The new plan, in the EOB under "your claim remarks," states that out-of-network rates are based on the location where I received it, and is ***"90% of the Medicare Allowable Rate."*** This is a far cry from " reasonable and customary," and nowhere in the literature sent to me by Aetna before I signed up was this spelled out. In fact, the EOB is the only indication I have ever received of how Aetna determines the allowable amount.

After I received the EOB, I called Customer Service several times for an elucidation of what appeared to be a huge error in the EOB. None of the representatives could explain it to me, and some of them did not even understand my question.

I then called the Aetna office for insurance plans in New York and New Jersey that I had called when first doing research on Aetna plans in January. I was lucky enough to reach the same very savvy woman who had talked to me about the different options and had walked me through the application process. I asked her if I had asked her in January what the mechanism was for determining "allowable" amounts under this plan, would she have been able to answer me. She could not immediately reply, and said she would call me back. When she did, she told me that nowhere in her information database was this information available. Not even to Aetna "sales" people. She thought it was scandalous.

I had bought a pig in a poke.

In the latter half of March I began calling Aetna to request a print copy of the plan, including a description of the mechanism used to determine "acceptable" amounts. I have called every other Thursday since then, frequently waiting on hold for over an hour to talk to a customer service representative. In early May I was told the plan had been mailed on April 18. It never arrived. I asked for a formulary. That finally arrived in mid-May. In early May, I received a Member Disclosure booklet with no mention of the mechanism, but a cover letter telling me to keep the booklet with my plan materials. Customer service representatives who have said they will look into my request and call me back do not call me back. Several said that there *is* no printed copy of the plan available to send to me.

I kept calling, and on June 12, 2014, having been told I could not have a paper copy of the complete plan, a customer service representative grudgingly emailed me a copy...of the Schedule of Benefits only. This refers to the plan, which I do not have. See Document E, which states "See section (sic) the Policy for a description of how We (sic) calculate the Allowed amount."

The last time I called, on Thursday June 26, a very nasty individual told me I was not entitled to a copy of the plan. I give up. Perhaps the NYS Department of Finance can help.

I should also mention that the informational booklets I got for the plan while shopping all stated that the individual out-of-pocket limit is $1000. Several other items I have received since March 1, including the EOB, Document D, page 2, have a much higher amount listed.

My favorite part of this ordeal arrived in my mail on June 21, 2014. Aetna, true to form, is seeking a rate increase for 2015 of 22.2%. That would increase my premium by $305, to $1679. See Document F. Of course, I am getting very little for the current $1374 premium. Apparently it does not even entitle me to a full copy of the plan, let alone "reasonable and customary" allowances.

The reasons Aetna cites for requesting a rate increase in the June 18th letter are the rising cost of health care in New York, and the *projected* impact of part of the Affordable Care Act. Perhaps another, greater, reason was cited in the New York Times Business Section on Sunday June 8, page 6 (Document G). Mark T. Bertolini, C.E.O of Aetna, is the 20th highest-compensated C.E.O of a publicly traded company in a list assembled by Equilar. His total compensation for 2013, including base pay, cash bonus, and stock awards, was $30,712,565, an increase of 132% over 2012. For Aetna itself, 2013 revenue increased 29%, net income 15%, and total returns 50% over the prior year.

Needless to say, I am adamantly opposed to Aetna receiving the rate increase that they are requesting for 2015.

Very truly yours,

DOCUMENT A

PREMIUM HISTORY FOR MY COVERAGE WITH AETNA

CAL YEAR	COVERAGE	MONTHLY PREMIUM	ANNUAL* PREMIUM	$ INCREASE OVER PREVIOUS YEAR	% INCREASE OVER PREVIOUS YEAR
2000	COBRA	$391	$4,709		
2001	COBRA	$468	$5,620	$911	19.34%
2002	COBRA	$476	$6,858	$1,238	22.02%
2003	QPOS	$809	$9,708	$2,845	41.48%
2004	QPOS	$994	$11,555	$1,852	19.08%
2005	QPOS	$1,193	$14,117	$2,562	22.17%
2006	QPOS	$1,431	$16,696	$2,579	18.26%
2007	QPOS	$1,717	$20,036	$3,340	20.00%
2008	QPOS	$2,104	$24,473	$4,437	22.15%
2009	QPOS	$2,588	$30,088	$5,615	22.94%
2010	QPOS	$3,002	$35,196	$5,108	16.98%
2011	QPOS	$3,558	$41,584	$6,388	18.15%
2012	QPOS	$3,558	$41,584	$0	0.00%
2013	QPOS	$3,749	$44,606	$3,022	5.37%

Total paid for 11 years on QPOS plan: $289,643

Coverage is for a "Point-of-Service" plan, under which we can see any physician without referral. There is no "Network" involved. I must go out of pocket for everything and then put in for reimbursement.

At its start, this coverage was for a 48 year old woman and an 8 year old child with no pre-existing conditions. It has always been for these 2 people alone.

*For the QPOS plan, because my "anniversary" date is March 1st, monthly payments do not equal 1/12 of the calendar/tax year amount shown.

DOCUMENT B

aetna®
P.O. Box 730
Blue Bell, PA 19422-0730

December 5, 2013

0000391

[redacted]

RE: [redacted]

Dear [redacted]

We're here to help you with your health insurance

We value our customers. We want to share information on our new plan options 2014.

Aetna's new plan options comply with the Affordable Care Act (ACA). ACA is changing health insurance. This includes adding new preventive care and essential health benefits requirements.

Aetna's New York Individual Health Benefits Plans
Starting January 1, 2014, we are pleased to offer four new Exclusive Provider Organization (EPO) plans in the individual market. We've listed the EPO plan options below. We've enclosed some information on these plans for reference.

These plans limit benefits to network providers with the exception of emergency care. The EPO plans do not require a primary care physician referral for covered specialty care benefits.

NY Aetna AdvantagePlus 3000 PD –Bronze level of coverage
NY Aetna Advantage 2000 PD – Silver level of coverage
NY Aetna Premier 600 PD- Gold level of coverage
NY Aetna Pinnacle PD – Platinum level of coverage

Since you currently have a HMO policy with out of network benefits, the below policy with out of network benefits is also available. As of January 1, 2014, members that want to select our new ACA complaint plan out of network benefits may elect coverage with our new platinum level individual policy together with an out of network rider.

NY Aetna Pinnacle PD – Open Access Managed Care Plan- Platinum level of coverage

Metal Levels
These metal levels are based on the average percentage of medical costs the health insurance company is expected to pay, compared to the average percentage you will pay.

0000391

- Platinum (highest level with an average of 90% of the medical costs paid by the insurance company and an average of 10% paid by the member)
- Gold (80%/20%)
- Silver (70%/30%)
- Bronze (60%/40%)

(Please note: this does *not* mean that your insurance company will pay that specific percentage of every bill. It simply means that the insurance company will pay that average percentage for all policyholders over the course of the year.) Also, your premium will be higher or lower depending on the metal level you choose. For instance, a Silver plan will have lower premiums than a Platinum plan because you would be paying more out-of-pocket.

New York State of Health Benefit Exchange

New York's State of Health Benefit Exchange (http://nystateofhealth.ny.gov/) can help you shop for and enroll in health insurance if you are interested in comparing plans. You will be able to use the Exchange to compare insurance options and prices offered through the Exchange. You will also be able to calculate costs and enroll in coverage online, in person, over the phone or by mail. You may also qualify to receive federal tax credits to help pay for insurance offered through the Exchange. You can purchase insurance through the Health Benefit Exchange beginning in October 2013 for coverage starting January 1, 2014. You can also buy coverage directly from an insurance company, but tax credits will not be available.

How to Enroll

To change your current plan to one of our new ACA complaint plans for a January 1, 2014 effective date, please complete the enclosed application and return it with the first month's premium by December 31, 2013.

Please note if you change your current plan option, there will not be an opportunity to rejoin this plan in the future.

We're here to help

If you have questions about your policy call us at 1-800-435-8742. Member Services can help you Monday through Friday, 8 a.m. to 10 p.m. ET. (through March 1, 2014).

DOCUMENT C

Logout Your Profile Site Map Help & Resources Contact Us En español

Type your question here

You are logged in as [redacted]

Home \ Claims \ Explanation of Benefits

EOB Detail

Learn More About Your Explanation of Benefits

Acrobat®Reader® 4.0 or higher is required to read this document Download now

Return to EOB list

<<< Previous EOB Next EOB >>>

AETNA HEALTH INC
P.O. BOX 981106
EL PASO, TX 79998-1107

*000170*MHVSSUP*000520*

EXPLANATION OF BENEFITS

THIS IS NOT A BILL
Please Retain for Future Reference
Date Printed:03/13/2013
PAGE 1 OF 4

[redacted]

QUESTIONS? Contact us at **aetnanavigator.com**
Aetna Member Services: 1-800-435-8742
Precertification: 1-800-624-0756
Or write to the address shown above.

SUBSCRIBER: [redacted]
PLAN NAME:

SUBSCRIBER NUMBER: [redacted]

All Notes Appear After Final Claim

Claim Activity for [redacted]

MEMBER NUMBER: [redacted]

Description of Service	Amount Billed	Amount Allowed	Your Deductible	Your Coinsurance	Excluded Expenses	See Notes	Our Payment
	A	B	C	D	E	F	G
			Your Responsibility				
CLAIM YEAR : 2013							
MEDICAL IMAGING OF MANHATTAN							
Claim was received on 03/11/2013							
03/06/2013 G0202	440.00	440.00	440.00	0.00		0001	0.00
SCREENING MAMMOGRAM,DIGIT							
TOTALS	**440.00**	**440.00**	**440.00**	**0.00**	**0.00**		**0.00**

NOTES:

0001 - This amount was applied to your plan's deductible, and you are responsible for it. D73

0002 - Your provider may have sent diagnosis codes with your claim. You may obtain these codes and their meanings by contacting us at the number listed at the top of the first page. We will also provide your treatment codes and their meanings, if they do not appear on this statement. If you have questions about your diagnosis or your treatment, please contact your provider. [P5Y]

DOCUMENT D

Deductible:	The amount you pay before your health plan will pay benefits.	**$191.09**
Coinsurance:	When you pay part of the bill and we pay part of the bill. This is your out-of-pocket amount.	**$0.00**
Copay:	A fixed dollar amount you pay when you visit a doctor or other health care provider.	**$0.00**

A helpful message

You have the power to feel your best. It starts with what you put on your plate. Eating healthy food gives you energy, strengthens your immune system, and helps you maintain a healthy weight for life.

Return to

aetna

Statement date: March 25, 2014

Member: [redacted]
Member ID: [redacted]
Group #: [redacted]
Group name: AETNA ADVANTAGE PLANS OFF EXCHANGE

Your payment summary

		Your plan paid			You owe or already paid
Patient	**Provider**	**Amount**	**Sent to**	**Date**	**Amount**
[redacted]	[redacted]	$0.00			$960.00
Total:		$0.00			**$960.00**

Your claims up close

Claim for Susan (self)

Claim ID: ESPBCV3FJ00 Received on 3/17/14	Amount billed	Member rate	Pending or not payable (Remarks) !	Applied to deductible	Your copay	Amount remaining	Plan pays	Your coinsurance	You owe C+D+E+H=I
DUAL-ENERGY X-RAY ABSORPTIOM on 3/12/14 77080	520.00		468.64 (1)	51.36					520.00
SCREENING MAMMOGRAM,DIGITAL on 3/12/14 G0202	440.00		300.27 (1)	139.73					440.00
[redacted]									
Refer to Remarks Section			(2)						
Totals:	960.00		768.91	191.09					**$960.00**
	A	B	C	D	E	F	G	H	I

! **You can find all numbered claim remarks in 'Your Claim Remarks' section.**

Your Claim Remarks

General Remarks:

(1) You received services from a health care provider who is not part of our network. We pay for this service based on your plan's out-of-network rate for the location where you received it. That rate is 90% of the Medicare Allowable Rate. Your provider may bill you for charges above this rate. [G76]

(2) Your provider may have sent diagnosis codes with your claim. You may obtain these codes and their meanings by contacting us at the number listed at the top of the first page. We will also provide your treatment codes and their meanings, if they do not appear on this statement. If you have questions about your diagnosis or your treatment, please contact your provider. [H63]

aetna

Statement date: March 25, 2014

Member: [redacted]
Member ID: [redacted]
Group #: [redacted]
Group name: AETNA ADVANTAGE PLANS OFF EXCHANGE

Your benefit balances to date for 1/1/14 to 12/31/14

Description		
Individual	**Annual limit**	**Amount remaining**
[redacted]		
Medical In Network Coinsurance*	$6,000.00	$5,980.00
Medical Out of Network Deductible	$3,000.00	$2,808.91
Medical Out of Network Coinsurance*	$6,000.00	$5,808.91
Family	**Annual limit**	**Amount remaining**
Medical In Network Coinsurance*	$12,000.00	$11,980.00
Medical Out of Network Deductible	$6,000.00	$5,808.91
Medical Out of Network Coinsurance*	$12,000.00	$11,808.91

*Limit includes both Medical and Pharmacy

A helpful message

Solve it. The brain is not a muscle but the more you use it, the better off you will be. Crossword puzzles, word-find games, jigsaw puzzles and other games (like cards) are great ways to keep your brain active.

Si necesita asistencia lingüística en español, llámenos al número que figura en su tarjeta de identificación (ID) médica.

Pour une aide en français, veuillez nous appeler au numéro figurant sur votre carte d'identité.

若需要中文协助，请拨打您医疗身分证上的电话联系我们。

DOCUMENT E

Rec'd via email attachment TH 6/12

Section XIV.
Aetna Pinnacle PD
Open Access Managed Choice
SCHEDULE OF BENEFITS
Platinum

COST-SHARING	**Participating Member Responsibility for Cost-Sharing**	**Non-Participating Member Responsibility for Cost-Sharing**	
Deductible			
• Individual	$0	$1,000	
• Family	$0	$2,000	
Out-of-Pocket Limit			
• Individual	$2,000	$3,000	
• Family	$4,000	$5,000	
		See section the Policy for a description of how We calculate the Allowed Amount. Any charges of a Non-Participating Provider that are in excess of the Allowed Amount do not apply towards the Deductible or Out-of-Pocket Limit. You must pay the amount by which the Non-Participating Provider's charge exceeds Our Allowed Amount.	
OFFICE VISITS	**Participating Member Responsibility for Cost-Sharing**	**Non-Participating Member Responsibility for Cost-Sharing**	**Limits**
Primary Care Office Visits (or Home Visits)	$15 Copayment 0% Coinsurance	20% Coinsurance after Deductible	See Benefit For Description
Specialist Office Visits (or Home Visits)	$35 Copayment 0% Coinsurance	20% Coinsurance after Deductible	See Benefit For Description

DOCUMENT F

Aetna
PO Box 730
Blue Bell, PA 19422

June 18, 2014

Rec'd 6/21/14

[redacted]
NEW YORK, NY 10075

Re: Notice of Proposed Premium Rate Change
NY Aetna Pinnacle PD: OAMC and 17210NY0060001
Member# [redacted]

Dear Member:

Aetna Life Insurance Company is filing a request with the New York State Department of Financial Services (DFS) to approve a change to your premium rates for 2015. New York Insurance Law requires that we provide a notice to you when we submit requests for premium rate changes to DFS.

DFS is required by law to review our requested rate change. DFS may approve, modify or disapprove the requested rate change.

Proposed Premium Rate Change

If approved, the percentage change to your premium is 22.2%.

If you enrolled through the NY State of Health, the state's health plan marketplace, and you qualified for financial assistance, called an Advanced Premium Tax Credit, your current premium is less than the amount shown above and your 2015 premium will be less than shown above if you qualify for the APTC again next year. NY State of Health will calculate your eligibility for financial assistance each year.

Please note that while we try to provide you with the most accurate information possible, the final rate may differ based on the benefit plan design and other features you select on renewal. Also, the final, approved rate may differ because DFS may modify the proposed rate.

Why We Are Requesting a Rate Change

Every year, we spend considerable time evaluating both medical cost history and rates to ensure we account for the current cost trends in the plan premium. The requested increase is directly related to two main drivers: the overall rising cost of health care services in New York, and the projected impact of the federal risk adjustment program that was put in place by the Affordable Care Act.

Aetna is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies, including Aetna Health Inc., Aetna Health Insurance Company of New York, Aetna Life Insurance Company, and its affiliates (Aetna).

30-day Comment Period

You can contact us or DFS to ask for more information or submit comments to DFS about the proposed rate changes. The comments must be made within 30 days from the date of this notice.

You can contact Aetna for additional information at:

Aetna
P.O. Box 14463
LEXINGTON, KY 40512
1-866-565-1236
www.aetna.com

Comments or requests for more information on the proposed rate change may be submitted to:

NYS Department of Financial Services
Health Bureau – Premium Rate Adjustments
1 State Street
New York, NY, 10004
Email: premiumrateincreases@dfs.ny.gov
DFS Website: www.dfs.ny.gov/healthinsurancepremiums

If you choose to submit comments to DFS, please include the following information:

1. The name of your insurer, which is Aetna Life Insurance Company
2. The name of your plan, which is NY Aetna Pinnacle PD: OAMC
3. Indicate you have individual coverage
4. Your HIOS identification number, which is 17210NY0060001

Written comments submitted to DFS will be posted on the DFS website with all your personal information removed.

Aetna will also review any comments and answer any questions you may have concerning these proposed rate changes, including the start and conclusion of the 30-day comment period. Please feel free to contact Member Services at the number located on your ID card. Plan representatives are available to assist you from 8 a.m. to 5 p.m. You may also contact us by logging into Aetna Navigator, our secure member website at www.aetna.com, or call us at 1-866-565-1236.

Plain English Summary of Rate Change

We have prepared a plain-English summary that provides a more detailed explanation of the reasons why a premium rate change is being requested. You can find this information at the following websites:

Aetna website: http://www.aetna.com/individuals-families/member-rights-resources/rights/state-specific-information.html

DFS website: www.dfs.ny.gov/healthinsurancepremiums

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Notice of Approved Premium Rate

After DFS approves the final premium rate, you will receive final rate information at least 60 days before your 2015 renewal date.

Sincerely,

Aetna

Aetna is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies, including Aetna Health Inc., Aetna Health Insurance Company of New York, Aetna Life Insurance Company, and its affiliates (Aetna).

DOCUMENT G

C.E.O. Pay: The Tables

Equilar Inc. figures show 2013 compensation and accumulated wealth of 200 chief executives for public companies with market capitalization of

		CHIEF EXECUTIVE'S 2013 COMPENSATION									COMPANY		
									TOTAL COMPENSATION		2013 PERFORMA (VS. 2012, FISCAL Y		
COMPANY (TICKER)	CHIEF EXECUTIVE	BASE SALARY	+ CASH BONUS	+ PERKS/ OTHER	= CASH PAY	+ STOCK AWARDS	+ OPTION AWARDS	= AMOUNT	CHANGE FROM 2012	REVENUE	NET INCOME	RE
Cheniere Energy (LNG)	Charif Souki	$800,000	$7,880,000	$339,280	$9,019,280	$132,930,000	0	$141,949,280	+147%	0	-/-	+2
GAMCO Investors (GBL)	Mario J. Gabelli	0	0	85,049,800	85,049,800	0	0	85,049,800	+ 23	+ 15%	+ 55%	+ 6
Oracle (ORCL)	Lawrence J. Ellison	1	1,126	1,545,930	1,547,057	0	$76,893,600	78,440,657	- 19	+ 0	+ 9	+ 2
CBS (CBS)	Leslie Moonves	3,513,461	28,500,000	1,230,859	33,244,320	26,499,925	5,845,000	65,589,245	+ 9	+ 8	+ 15	+ 6
TransDigm Group (TDG)	W. Nicholas Howley	973,375	1,240,000	46,121,781	48,335,156	0	15,879,500	64,214,656	n/a	+ 13	- 7	+ 2
Zynga (ZNGA)	Don A. Mattrick *	481,409	5,969,863	371	6,451,643	38,035,712	13,327,036	57,814,391	n/a	- 32	-/-	+ 6
Freeport-McMoRan C. and G. (FCX)	Richard C. Adkerson	2,500,000	1,250,000	36,709,323	40,459,323	9,860,216	4,941,000	55,260,539	+ 294	+ 16	- 13	+ 1
LinkedIn (LNKD)	Jeffrey Weiner	563,750	1,094,531	4,664	1,662,945	18,709,690	28,678,729	48,071,364	n/a	+ 57	+ 24	+ 8
TripAdvisor (TRIP)	Stephen Kaufer	500,000	450,000	10,101	960,101	0	38,054,126	39,014,227	+ 510	+ 24	+ 6	+ 9
United Therapeutics (UTHR)	Martine Rothblatt	992,678	1,102,907	25,344	2,120,929	0	36,097,326	38,218,255	+ 665	+ 22	- 43	+11
Viacom (VIAB)	Philippe P. Dauman	3,500,000	16,900,000	407,403	20,807,403	10,378,702	5,909,994	37,196,099	+ 11	- 1	+ 3	+ 5
Restoration Hardware (RH)	Gary G. Friedman *§	1,187,500	1,562,500	11,400	2,761,400	0	33,695,159	36,456,559	n/a	+ 30	-/+	+ 5
Regeneron Pharmaceuticals (REGN)	Leonard S. Schleifer	1,035,000	2,070,000	105,340	3,210,340	0	33,062,325	36,272,665	+ 21	+ 53	- 43	+ 61
Walt Disney (DIS)	Robert A. Iger	2,500,000	13,570,000	968,538	17,038,538	8,804,278	8,478,239	34,321,055	- 7	+ 7	+ 8	+ 25
Discovery Communications (DISCA)	David M. Zaslav	3,000,000	5,799,000	2,011,963	10,810,963	0	[illegible]	33,349,798	- 33	+ 23	+ 12	+ 42
FleetCor Technologies (FLT)	Ronald F. Clarke	875,000	1,500,000	19,854	2,394,854	30,463,465	0	32,858,319	+ 212	+ 27	+ 32	+118
Time Warner (TWX)	Jeffrey L. Bewkes	2,000,000	14,350,000	126,889	16,476,889	8,382,160	7,642,666	32,501,715	+ 27	+ 4	+ 22	+ 48
Salesforce.com (CRM)	Marc Benioff	1,200,000	1,686,806	784,088	3,670,688	0	27,662,644	31,333,332	+ 42	+ 33	-/-	+ 41
Estée Lauder (EL)	Fabrizio Freda	1,750,000	4,183,936	227,730	6,161,266	[illegible]	3,983,423	31,069,548	+ 138	+ 5	+ 19	+ 24
Aetna (AET)	Mark T. Bertolini	996,169	1,380,000	283,385	2,659,554	[illegible]	11,281,320	30,712,565	+ 132	+ 29	+ 15	+ 50
Starz (STRZA)	Christopher P. Albrecht *	1,250,000	1,325,000	16,134	2,591,134	0	[illegible]	30,494,966	n/a	+ 9	- 3	+ 20
Solera (SLH)	Tony Aquila	780,000	1,247,000	101,250	2,128,250	[illegible]	[illegible]	29,895,611	+ 390	+ 6	- 12	+ 34
T-Mobile US (TMUS)	John J. Legere *	1,250,000	5,368,333	137,325	6,745,658	[illegible]	0	29,245,709	n/a	+ 24	-/+	+110
Nuance Communications (NUAN)	Paul A. Ricci	800,000	300,000	226,829	1,326,829	[illegible]	0	29,226,829	- 21	+ 12	+/-	- 25
Exxon Mobil (XOM)	Rex W. Tillerson	2,717,000	3,670,000	496,704	6,883,704	21,254,625	0	28,138,329	+ 3	- 9	- 27	+ 20
Hasbro (HAS)	Brian D. Goldner	1,248,077	1,800,000	347,327	3,395,404	21,562,343	[illegible]	27,378,791	+ 188	- 0	- 15	+ 57
Zulily (ZU)	Daniel Coleman	250,000	100,000	0	350,000	0	[illegible]	27,310,896	n/a	+100	n/a	n/a
The Hain Celestial Group (HAIN)	Irwin D. Simon	1,500,000	3,850,000	84,706	5,534,706	20,891,849	0	26,426,555	+ 184	+ 26	+ 27	+ 18
Comcast (CMCSA)	Brian L. Roberts	2,900,761	9,241,511	3,675,052	15,718,324	5,257,200	[illegible]	26,308,324	+ 5	+ 3	- 32	+ 41
Twenty-First Century Fox (FOXA)	K. Rupert Murdoch	8,100,000	12,500,000	299,150	20,899,150	5,164,890	0	26,064,040	+ 16	+ 10	+228	+ 47
Honeywell International (HON)	David M. Cote	1,800,000	14,225,000	535,958	16,560,958	0	[illegible]	25,440,958	+ 56	+ 4	+ 34	+ 47
Emerson Electric (EMR)	David N. Farr	1,300,000	2,000,000	462,502	3,762,502	21,556,450	0	25,318,952	+ 264	+ 1	- 2	+ 27
Chipotle Mexican Grill (CMG)	Steve Ells §	1,400,000	3,196,816	254,305	4,851,121	7,961,250	[illegible]	25,116,871	+ 27	+ 28	- 28	- 79
Yahoo! (YHOO)	Marissa A. Mayer	1,000,000	1,702,250	73,863	2,776,113	8,312,316	[illegible]	24,935,711	n/a	- 6	- 89	+[illegible]
Parker-Hannifin (PH)	Donald E. Washkewicz	1,273,400	2,469,824	141,088	3,884,312	4,228,193	[illegible]	24,514,140	+ 148	- 1	- 18	- 28
Chipotle Mexican Grill (CMG)	Montgomery F. Moran §	1,200,000	2,740,128	191,176	4,131,304	7,961,250	[illegible]	24,397,054	+ 27	- 28	- 28	- 79
Visa (V)	Charles W. Scharf *	871,867	3,574,375	709,302	5,154,544	12,999,991	[illegible]	24,154,541	n/a	+ 22	+[illegible]	+ 42
Mobile Mini (MINI)	Erik Olsson *	791,781	888,563	5,909	1,686,253	1,500,006	[illegible]	24,073,209	n/a	+ 7	- 27	+ 98
Realogy (RLGY)	Richard A. Smith	1,000,000	20,328,821	2,000	21,330,821	2,665,288	0	23,996,109	+ 59	+ 13	[illegible]	+ 38
Boeing (BA)	W. James McNerney Jr.	1,930,000	12,920,972	885,553	15,736,525	3,763,534	[illegible]	22,263,562	+ 10	+ 4	+ 37	+ 84
Ford Motor (F)	Alan R. Mulally	2,000,000	5,880,000	862,050	8,542,050	10,912,488	[illegible]	23,204,534	+ 11	+ 21	+ 28	+ 22
Sirius XM (SIRI)	James E. Meyer	1,468,590	4,720,000	58,063	6,246,653	3,249,998	[illegible]	23,065,307	n/a	+ 12	- 95	+ 22
BlackRock (BLK)	Laurence D. Fink	500,000	9,850,000	192,500	10,542,500	12,399,756	0	22,942,256	+ 13	- 3	+ 15	+ 56
CVS Caremark (CVS)	Larry J. Merlo	1,337,500	8,501,412	2,273,691	12,112,603	6,750,048	[illegible]	22,862,653	+ 26	- 2	- 15	+ 55
Tenet Healthcare (THC)	Trevor Fetter	1,207,983	1,313,996	212,878	2,734,857	17,500,078	[illegible]	22,734,128	+ 180	+ 21	-/-	- 30
Chesapeake Energy (CHK)	Robert D. Lawler *	649,038	3,619,260	155,033	4,423,331	12,750,036	5,250,000	22,423,368	n/a	+ 42	-/+	+ 99
Och-Ziff Capital Management Group (OZM)	Daniel S. Och	0	0	1,203,064	1,203,064	[illegible]	0	22,338,209	n/a	+ 55	-/+	+ 71
General Growth Properties (GGP)	Sandeep Mathrani	1,200,000	3,000,000	580,608	4,780,608	0	17,322,608	[illegible]	+ 424	- 2	-/+	+ 4
Schlumberger (SLB)	Paal Kibsgaard	1,700,000	3,096,800	108,580	4,905,380	[illegible]	5,740,355	[illegible]	+ 47	+ 8	+ 30	+ 32
American Express (AXP)	Kenneth I. Chenault	2,000,000	6,000,000	1,148,824	9,148,824	[illegible]	2,079,871	[illegible]	[illegible]	+ 4	+ 20	+ [illegible]

ief executives for public companies with market capitalization of at least $1 billion that filed proxies for last year by May 30.

					COMPANY			C.E.O.'S ACCUMULATED WEALTH				
				TOTAL COMPENSATION	2013 PERFORMANCE (VS. 2012, FISCAL YEAR)							
ASH PAY	+ STOCK AWARDS	+ OPTION AWARDS	= AMOUNT	CHANGE FROM 2012	REVENUE	NET INCOME	TOTAL RETURN	STOCK OPTION GAINS	STOCK AWARD GAINS	TOTAL VALUE OF EQUITY HOLDINGS	LUMP-SUM PENSION	DEFERRED COMP. BALANCE
19,280	$132,930,000	0	$141,949,280	+ 147%	0	-/-	+130%	0	$129,946,736	$285,904,788	0	0
19,800	0	0	85,049,800	+ 23	+ 15%	+ 55%	+ 65	0	0	1,673,999,952	0	0
17,057	0	$76,893,600	78,440,657	- 18	+ 0	+ 9	+ 29	$151,428,000	0	38,109,550,112	0	$14,866,191
4,320	26,499,925	5,845,000	65,589,245	+ 9	+ 8	+ 15	+ 69	45,372,809	19,140,906	557,454,563	$7,962,490	21,674,155
5,156	0	15,879,500	64,214,656	n/a	+ 13	- 7	+ 22	30,394,168	0	99,118,900	0	0
1,543	38,035,712	13,327,036	57,814,391	n/a	- 32	-/-	+ 61	0	0	1,839,286	0	0
9,323	9,860,216	4,941,000	55,260,539	+ 294	+ 16	- 13	+ 17	0	3,505,226	142,770,018	26,993,724	61,110,026
2,945	18,709,690	28,678,729	49,071,364	n/a	+ 57	+ 24	+ 89	169,781,656	9,461,563	392,976,254	0	0
0,101	0	38,054,126	39,014,227	+ 510	+ 24	+ 6	+ 98	0	176,327	72,003,869	0	0
0,929	0	36,097,326	38,218,255	+ 665	+ 22	- 43	+112	4,651,930	0	228,421,031	13,197,318	0
7,403	10,378,702	5,999,994	37,186,099	+ 11	- 1	+ 3	+ 58	72,188,250	38,951,638	358,229,416	254,412	684,274
1,400	0	33,695,159	36,456,559	n/a	+ 30	-/+	+ 58	0	29,460,336	161,470,336	0	0
0,340	0	33,062,325	36,272,665	+ 21	+ 53	- 43	+ 61	70,331,172	0	1,035,771,573	0	0
8,538	8,804,278	8,478,239	34,321,055	- 7	+ 7	+ 8	+ 25	55,584,600	16,841,835	167,154,235	16,617,769	3,930,967
0,963	0	22,538,835	33,349,798	- 33	+ 23	+ 12	+ 42	58,682,601	26,603,849	208,418,459	0	48,470,360
4,854	30,463,465	0	32,858,319	+ 212	+ 27	+ 32	+118	0	6,906,722	368,611,933	0	0
6,889	8,182,180	7,842,666	32,501,715	+ 27	+ 4	+ 22	+ 48	6,706,868	23,206,682	188,393,478	2,172,350	5,183,319
0,688	0	27,662,644	31,333,332	+ 42	+ 33	-/-	+ 41	0	0	2,615,000,399	0	0
1,280	21,024,945	3,983,423	31,069,648	+ 138	+ 5	+ 19	+ 24	0	13,319,081	41,233,979	2,740,732	0
9,554	16,870,691	11,182,320	30,712,565	+ 132	+ 29	+ 15	+ 50	4,520,557	1,083,976	106,847,110	346,502	586,370
1,134	0	27,903,832	30,494,966	n/a	+ 9	- 3	+ 20	0	2,688,745	76,740,324	0	0
8,250	1,367,316	26,400,045	29,895,611	+ 390	+ 6	- 12	+ 34	2,135,189	1,657,733	31,720,092	0	0
5,658	22,500,051	0	29,245,709	n/a	+ 24	-/+	+110	0	0	0	0	0
6,829	27,900,000	0	29,226,829	- 21	+ 12	+/-	- 25	12,897,329	23,756,375	83,730,573	0	0
3,704	21,254,625	0	28,138,329	+ 3	- 9	- 27	+ 20	0	10,720,125	192,541,096	61,831,569	1,564,527
5,404	21,562,343	2,421,045	27,378,792	+ 188	- 0	- 15	+ 57	17,704,929	0	59,243,576	1,205,824	3,761,624
0,000	0	26,960,886	27,310,886	n/a	+110	n/a	n/a	0	0	993,607,065	0	0
4,706	20,891,849	0	26,426,555	+ 184	+ 26	+ 27	+ 18	13,945,066	6,597,274	112,362,328	0	0
8,324	5,257,200	5,332,800	26,308,324	+ 5	+ 3	+ 10	+ 41	19,048,000	15,660,358	1,186,671,943	0	65,848,124
9,150	5,164,890	0	26,064,040	+ 16	+ 10	+115	+ 47	0	4,253,159	10,545,669,355	76,730,000	0
0,958	0	8,880,000	25,440,958	+ 56	+ 4	+ 34	+ 47	30,310,260	0	444,817,901	49,629,117	98,777,415
2,502	21,556,450	0	25,318,952	+ 264	+ 1	+ 2	+ 37	1,185,638	21,565,870	125,503,950	15,993,000	6,509,160
1,121	7,961,250	12,304,500	25,116,871	+ 27	+ 18	+ 18	+ 79	41,720,947	20,389,600	217,032,208	0	1,182,023
6,113	8,312,316	13,847,282	24,935,711	n/a	- 6	- 65	+103	0	21,251,861	75,769,788	0	0
4,312	4,228,192	16,401,636	24,514,140	+ 148	- 1	- 18	+ 26	39,017,972	6,797,380	101,143,228	25,915,094	5,134,420
1,304	7,961,250	12,304,500	24,397,054	+ 27	+ 18	+ 18	+ 79	1,699,100	20,389,600	208,409,169	0	2,074,010
4,544	12,999,991	6,000,006	24,154,541	n/a	+ 13	+132	+ 43	0	4,447,423	21,086,144	47,310	25,761
6,253	1,500,006	20,886,950	24,073,209	n/a	+ 7	- 27	+ 98	0	0	22,388,886	0	0
0,821	2,665,288	0	23,996,109	+ 59	+ 13	-/+	+ 18	0	1,381,474	36,177,134	0	0
6,525	3,763,534	3,763,503	23,263,562	+ 10	+ 6	+ 17	+ 84	20,036,665	4,273,104	160,902,317	41,257,441	4,214,066
2,050	10,912,488	3,749,996	23,204,534	+ 11	+ 10	+ 26	+ 22	0	6,856,486	255,158,661	0	1,434,078
5,653	3,249,998	13,568,656	23,065,307	n/a	+ 12	- 89	+ 21	0	0	26,267,552	0	0
2,500	12,399,756	0	22,942,256	+ 13	+ 9	+ 19	+ 56	0	9,663,604	443,890,487	0	1,601,310
2,603	6,750,048	4,000,002	22,862,653	+ 26	+ 3	+ 19	+ 50	0	11,148,922	132,566,102	30,260,032	56,762,269
4,857	17,500,078	2,499,193	22,734,128	+ 180	+ 22	+/-	+ 30	0	6,096,288	65,964,258	11,512,865	1,676,264
3,331	12,750,036	5,250,001	22,423,368	n/a	+ 42	-/+	+ 65	0	0	13,482,428	0	0
3,064	21,135,145	0	22,338,209	n/a	+ 55	-/+	+ 71	0	4,180,850	2,351,817,458	0	0
6,608	0	17,322,000	22,102,608	+ 424	+ 2	-/+	+ 4	0	0	58,748,978	0	0
5,380	11,399,619	5,740,350	22,005,349	+ 47	+ 8	+ 30	+ 32	3,291,522	0	29,326,106	2,650,428	734,070
5,624	10,486,267	2,079,871	21,711,762	- 22	+ 4	+ 20	+ 59	23,566,292	16,122,920	310,737,769	8,270,984	31,826,924

Re: Proposed Premium Rate Increase
For Medical Insurance

RECEIVED
JUL 02 2014
HEALTH BUREAU
N.Y.C. OFFICE

[redacted]

My insurer is Aetna Life Insurance Co.
Plan name is NY Aetna Pinnacle [redacted]
I have individual coverage
HIOS ID # [redacted]

I was informed that the proposed increase for 2015 will be 22.2 %. This is very disturbing for a 64 year old to have to pay.

I enrolled directly with Aetna and not through the marketplace because I do not have a computer and I do not know how to find out (and apply for) a premium tax credit.

I would like any assistance that you can give me.

Thank you

[redacted]