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AUG 11 2014

HEALTH BUREAU
N.Y.C. OFFICE

American Cancer Society ☙ Children's Defense Fund-New York ☙ Community Service Society of New York
Empire Justice Center ☙ Institute for Puerto Rican and Hispanic Elderly
Make the Road New York ☙ Medicare Rights Center
Metro New York Health Care for All Campaign ☙ New Yorkers for Accessible Health Coverage ☙
New York Immigration Coalition ☙ Project CHARGE
Public Policy and Education Fund of New York/Citizen Action of New York
Raising Women's Voices-New York ☙ Schuyler Center for Analysis and Advocacy ☙ Small Business Majority

August 1, 2014

Benjamin M. Lawsky
Superintendent of Financial Services
One State Street
New York, NY 10004

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

Re: Requested Rate Changes – MetroPlus Health Plan – Individual On-Exchange

Dear Superintendent Lawsky and Mr. Lovejoy,

Health Care for All New York ("HCFANY") submits the following comments relating to the proposed average rate increases of 18.8% and 32% for its individual and small group market plans, respectively, filed by MetroPlus Health Plan (collectively, "MetroPlus") with the New York State Department of Financial Services (DFS) for the 2015 plan year.[1] HCFANY is a coalition of more than 160 consumer and small business health advocacy organizations dedicated to securing affordable, comprehensive, and high-quality health care for all New York residents. HCFANY believes that a robust prior approval process is a vital consumer

[1] These rate increase applications were submitted on or about July 2, 2014. Specific references refer to SERFF file number: MPHP-129571498 (hereafter "Rate Application").

protection. Because MetroPlus's proposed increases, if adopted without modification, would place financial strain on New York's consumers and small businesses, HCFANY urges DFS to review them carefully. To this end, we submit the following comments.

I. The Affordable Care Act and New York's Insurance Marketplace

HCFANY urges DFS to consider the New York carriers' proposed rate adjustments in the context of the Affordable Care Act's (ACA) downward pressure on health care costs. Specifically, DFS should assess the impact of the following four factors on individual and small group prices in 2015.

1. Research indicates that the health cost curve is bending.

Lower overall healthcare costs should in turn drive lower premiums. The ACA includes several provisions designed to control spending, such as incentives for new healthcare payment and delivery methods (e.g. value-based payment vs. fee-for-service). For the past decade, data from across the payer spectrum indicates that the rate of health care costs increases is slowing down. This trajectory is likely to continue, as more ACA provisions are solidified.[2] For example, Medicare spending is about $1,000 lower per person than predicted in 2010.[3] PricewaterhouseCoopers projects a medical cost trend of 6.8% in 2015, a slight uptick from the 6.5% predicted in 2014 and down from the 7.5% cost trend predicted in 2013.[4] The 2014 Milliman Medical Index cites a 5.4% growth rate between 2014 and 2013, the lowest since the calculation began in 2012.[5] In short, as described in the table below, annual increases in national health care spending have been under 10% for the past 12 years, and have dropped significantly over time.

Average year-to-year percent increase in National Health Expenditures

2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
6.6%	8.4%	9.7%	8.6%	7.2%	6.8%	6.5%	6.3%	4.7%	3.8%	3.8%	3.6%	3.7%

Source: National Health Expenditure Data[6]

[2] Blumenthal, D., Stremikis, K., & Cutler, D. (2013). Health care spending – a giant slain or sleeping? *New England Journal of Medicine, 369*(26), at 2551-2557.

[3] The mystery of the missing $1,000 per person: can Medicare's spending slowdown continue?. Kaiser Family Foundation, available at http://kff.org/health-costs/perspective/the-mystery-of-the-missing-1000-per-person-can-medicares-spending-slowdown-continue/.

[4] Medical Cost Trend: Behind the numbers 2015, PricewaterhouseCoopers, available at http://pwchealth.com/cgi-local/hregister.cgi/reg/pwc-hri-medical-cost-trend-2015.pdf, at 6.

[5] 2014 Milliman Medical Index, Milliman, available at http://www.milliman.com/insight/Periodicals/mmi/2014-Milliman-Medical-Index/.

[6] Available at http://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/NationalHealthExpendData/Downloads/tables.pdf.

National research indicates that health insurance premium rates should be consistent with these lower health care costs. While pre-ACA rate increases averaged 10%,[7] the Congressional Budget Office predicts only a 3% rise in Marketplace premiums for 2015.[8] And just last week, California announced an average increase in its Marketplace plans of just 4.2% for 2015.[9] Additionally, the 2014 Trustee Annual Medicare Report predicts that Medicare premiums will hold steady in 2015.[10]

In New York, according to a newly released DFS survey of carriers, New York's insurance plans have been early adopters of many of the ACA-related and other state health care cost reforms initiatives, such as value-based purchasing and patient-centered medical homes.[11] Other reports provide evidence that ACA and New York State delivery system reforms are indeed resulting in cost reductions amongst all payers.[12]

The carriers' rate filings should include adjustments in 2015 which reflect the bending of the health care cost curve and the cumulative efforts of New York's payment reforms. For example, New York's Medicaid Redesign Team initiatives, the State's new Delivery System Reform Incentive Payment Program (DSRIP) and State Health Innovation Plan (SHIP) all employ delivery and payment system reforms that further reduce health care costs for the entire delivery system. Despite likely savings that will be generated from these reforms, only one carrier (Excellus) took a downward adjustment to account for quality improvement and cost containment strategies.[13] We urge the DFS to consider New York carriers' rate proposals in light of the impact of the ACA.

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[7] Gruber, J. (June 2014). Growth and variability in health plan premiums in the individual insurance market before the Affordable Care Act. *The Commonwealth Fund, 1750*(7), at 2.

[8] Updated estimates of the effects of the insurance coverage provisions of the Affordable Care Act, April 2014. Congressional Budget Office, at 6.

[9] Covered California Press Release, July 31, 2014. Available at http://news.coveredca.com/2014/07/covered-california-announces-rates-for.html.

[10] 2014 Annual Report of the Board of Trustees of the Federal Hospital Insurance and Federal Supplementary Medical Insurance Trust Funds. (July 28, 2014). Available at http://apps.washingtonpost.com/g/page/national/2014-medicare-report/1220/#text/p93, at 87.

[11] A number of plans have accrued health reform savings. New York State Department of Financial Services. (July 2014). New York health care cost and quality initiatives. Available at: http://www.dfs.ny.gov/reportpub/payment-reform-report.pdf. For example, United Healthcare's "Accountable Care Shared Savings" program saved over $200,000 due to decreased inpatient and emergency room utilization; HealthNow's "Facility Quality Incentive Program" saved over $3 million; and Excellus' "Rochester Medical Home Initiative" reported a 1.2:1 return on investment).

[12] *See, e.g.* Silow-Carroll, S & Edwards, J.N. (2013). Early adopters of the Accountable Care Model. Commonwealth Fund, pp. 19-20; U.S. Dept. of Health and Human Services., Press Release: Medicare's delivery system reform initiatives achieve significant savings and quality improvements– off to a strong start, (Jan. 30, 2014). Available at http://www.hhs.gov/news/press/2014pres/01/20140130a.html.

[13] Excellus Health Plan, Inc., Exhibit 18, Line 17.

2. The 2015 risk pool is likely to be lower-cost than in 2014, according to the Congressional Budget Office (CBO) and American Academy of Actuaries.[14]

In general, the CBO predicts that the healthier risk pool in 2015 will lower premiums relative to 2014.[15] There are three reasons why New York is particularly likely to experience this downward trend: (1) higher than expected enrollments should result in increased carrier bargaining power; (2) the sickest consumers were more likely to have enrolled in year one; and (3) pent-up demand is likely to be concentrated in year one when more uninsured enrolled.

The first of the three reasons supporting this prediction is that New York carriers have experienced higher than expected enrollments, due to the remarkably successful launch of the NY State of Health Marketplace. In just the first nine months, over 1.2 million New Yorkers have enrolled in Qualified Health Plans and Medicaid Managed Care plans, 84% of whom were previously uninsured.[16] This exceeds the State's *three-year* enrollment goal of 1.1 million enrolled by the end of 2016. Carriers can, and should, leverage this increased customer base to reduce provider and other costs, due to economies of scale and the related increase in bargaining power with health care providers.

The second reason for a lower-cost risk pool in 2015 than in 2014 is that individuals with higher health care needs are more likely to have signed up during the first 2013-2014 open enrollment period.[17] In 2015 and beyond, healthier individuals are more likely to enroll as the individual mandate penalty increases. Therefore, the 2015 risk pool is likely to be healthier than in 2014.

The third reason is that pent-up demand for services from previously uninsured should be concentrated in 2014. In building their 2014 rates, carriers already captured generous pent-up demand adjustments. Indeed, the vast majority (84%) of the over 1.1 million NY State of Health enrollees were uninsured. Moving forward, there is no evidence that the 2015 enrollees are likely to have the same rates of uninsurance. Moreover, the 2015 new entrants likely postponed enrolling in coverage because they are healthier and are less likely to have significant pent-up demand. In short, there is no need for a second year of pent-up demand adjustments and in fact, DFS should secure a

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[14] *See,* Updated estimates of the effects of the insurance coverage provisions of the Affordable Care Act, April 2014. Congressional Budget Office. p. 7; Drivers of 2015 Health Insurance Premium Changes. (2014). American Academy of Actuaries, at 2.

[15] Updated estimates of the effects of the insurance coverage provisions of the Affordable Care Act, April 2014. Congressional Budget Office, at 7.

[16] NY State of Health Public Marketplace Data Report as of June 30, 2014.

[17] *See,* Updated estimates of the effects of the insurance coverage provisions of the Affordable Care Act, April 2014. Congressional Budget Office. p. 7; Drivers of 2015 Health Insurance Premium Changes. (2014). American Academy of Actuaries, at 2.

downward adjustment from the carriers for the likely reduction of pent-up demand in 2015 versus 2014.

As noted above, California's regulators leveraged their bargaining power to secure only an average 4.3% rate increase for its Marketplace products, with many consumers seeing price decreases.[18] Accordingly, DFS should review the carriers' rate proposals with the assumption that the 2015 pool should present overall *lower* health risk to insurers than the 2014 pool and a commensurate downward adjustment for lower risk and small pent-up demand should be ascribed to all carriers.

3. New federal risk adjustment, reinsurance and risk corridor programs are designed to defray carrier rate increases related to increased risk and market uncertainty.

The ACA provides new risk adjustment and reinsurance programs to address increased risk by insurers and to assure stable prices for consumers and small employers. The ACA's reinsurance payments, designed to reduce rate increases based on less healthy risk pools, are expected to result in premium decreases between 10 and 15%.[19] Historically, New York's now expired risk adjustment program reduced prices by up to 30%.[20] New York carriers are proposing reinsurance adjustments between 5.75% and 6.10 % on average for on- and off-Marketplace plans, which are inconsistent with these projections and the State's historical experience. Moreover, a review of the New York carrier filings indicates that the majority of carriers in the individual markets proposed no adjustments for the federal risk adjustment program. Finally, none of the carriers have adopted adjustments for the federal risk corridor program, which protects the carriers from unanticipated risk selection. On behalf of New York's consumers and small employers, DFS should ensure that fair adjustments attributable to the impact of the federal risk adjustment, reinsurance, and corridor mechanisms are applied to the carriers in its review.

4. The New York State carriers' rates should reflect a downward adjustment for a decrease in administrative costs.

The NY State of Health Marketplace reduces administrative costs for carriers related to compensation of agents/brokers, enrollment and marketing costs. Only 6% of NY State of Health enrollees sought help from a broker/agent during the first open enrollment period, while 43% got

[18] *Id.* n. 9.

[19] Establishment of Exchanges and Qualified Health Plans, Exchange standards for employers (CMS-9989-FWP) and standards related to reinsurance, risk corridors, and risk regulatory impact analysis, Center for Consumer Information & Insurance Oversight, Adjustment (CMS-9975-F). (March, 2012). Center for Consumer Information & Insurance Oversight, U.S. Dept. of Health & Human Services, at 42.

[20] *Id.* at 43.

help from other in-person assistors, and the remainder enrolled via the helpline and the website.[21] Additionally, the individual mandate as well as marketing and outreach efforts by NY State of Health should reduce marketing expenses for carriers.

Each carrier filing must be considered in the context of the above mentioned environmental factors. Our specific concerns about the MetroPlus application are described below.

II. Specific Issues in MetroPlus's Rate Application

HCFANY urges the DFS to consider all of the above factors when reviewing MetroPlus's proposed rates. Further, the DFS should be mindful that MetroPlus has the third highest market share of any 2014 NY State of Health carrier, including many low-income New Yorkers in downstate regions, due to its relatively low 2014 rates.[22] The DFS should carefully consider MetroPlus's rate increase proposals in light of how significant increases may affect its enrollees. Additionally, MetroPlus's Actuarial Memorandum and Exhibit 18 (the Index Rate and Plan Level Adjustment Worksheet) raise the following specific concerns.

A. Initial Index Rate

HCFANY commends MetroPlus for its initial index rate of $246.76, which was the lowest identified amongst the individual on-Marketplace, off-Marketplace, and small group plans in our analysis. As described above, MetroPlus has attracted many New York City residents as a result of its competitive prices.

B. Increased Cost of the Essential Health Benefits

MetroPlus's estimate for the increased cost of the Essential Health Benefits (EHBs) is 12.4%.[23] This equates to an increase of $23.89 per member per month. This estimate significantly deviates from MetroPlus's competitors, which cite an average 1.53% upward adjustment for the increased cost of EHBs. MetroPlus explains this increased cost in its Actuarial Memorandum, as well as an attachment to the Memorandum.[24] It appears that the greatest contribution to this increased cost is the addition of Chiropractic Services, Exercise Facility reimbursement and Inpatient Habilitative Services. However, an analysis of the Attachment A, Essential Health Benefits shows that all three services were also listed for last year's products

[21] 2014 Open Enrollment Report. (June 2014). NY State of Health: The Official Health Plan Marketplace, at 16.
[22] MetroPlus enrolled 15% of total NY State of Health enrollees, exclusively in downstate regions. *See* 2014 Open Enrollment Report. (June 2014). NY State of Health: The Official Health Plan Marketplace, at 13.
[23] Exhibit 18, Line 13.
[24] *See* Actuarial Memorandum, at 10 and Attachment 4A.

and, as a result, it is unclear why this adjustment should be made again for 2015.[25] DFS should carefully analyze these filings to determine why this adjustment is being asserted for the 2015 plan year.

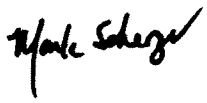
C. *Marketwide Adjustment for Fee Schedule Changes*

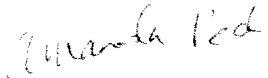
MetroPlus estimates an increase of 38.9% for its "Marketwide Adjustment for Fee Schedule Changes.[26] In contrast, MetroPlus's competitors show an average adjustment of 6.92% for this line item, and many carriers took no adjustment at all. MetroPlus explains in its Actuarial Memorandum that the 38.9% increase the increase is based on the higher reimbursement levels expected from its commercial product as compared with its baseline (Family Health Plus).[27] Additionally, it outlines various factors that went into calculating the increase, including estimated out-of-network visits and increases to Medicare reimbursement rates. However, MetroPlus does not provide a supporting exhibit detailing the nature and extent to which these benefits are used by its Individual Market enrollees, and therefore the reader is unable to determine if the combination of these factors indeed justifies an adjustment of this magnitude. DFS should carefully analyze this line item to ensure that a 38.9% increase is justified, and request additional information from MetroPlus as needed to fully understand this adjustment.

III. Conclusion

HCFANY urges the Department to closely review MetroPlus's application in light of the issues described above. Thank you for your kind attention to our concerns. If you have any questions, please contact Mark Scherzer at mark.scherzer@verizon.net or at (212) 406-9606 or Amanda Peden at apeden@cssny.org or at (212) 614-5541.

Very truly yours,





Mark Scherzer, JD
Legislative Counsel
New Yorkers for Accessible Health Coverage

Amanda Peden, MPH
Health Policy Associate
Community Service Society of New York

cc: Troy Oechsner
John Powell

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[25] *See* New York Essential Health Benefits, available at http://info.nystateofhealth.ny.gov/sites/default/files/Attachment%20A%20-%20Essential%20Health%20Benefits,%20new%203_27-13.pdf

[26] Exhibit 18, Line 15.

[27] *Id.*

Community Service Society | Fighting Poverty Strengthening New York

105 East 22nd Street
New York, NY 10010

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

10004298599

NEW YORK STATE
DEPARTMENT *of*
FINANCIAL SERVICES

RECEIVED
JUL 17 2014
HEALTH BUR
N.Y.C.

[redacted]

[redacted]

Complaint Form Inquiry

[redacted]	**Complaint is Against** Metro Plus Health Plan
	Address-Number and Street [redacted] **Zip**
	Complaint is Against
On Behalf Of	**Address-Number and Street**
Policy/Claim Number/Date of Loss	**City** **State** **Zip**

The Department of Financial Services, Consumer Assistance Unit, investigates insurance complaints involving **licensed** insurance entities.

The Department of Financial Service, Consumer Assistance Unit, ***cannot:*** Act as your lawyer, give legal advice, recommend, or rate insurers.

Use the other side of this form to provide us with the details of your complaint or inquiry. Include **copies** of papers or photos you believe will assist us. **Do not send originals!**

You will receive a written acknowledgment with your file number(s) by mail. If you wish to send further correspondence, please include that number. If you fail to do so, it may slow down the processing of your complaint.

I authorize the respondent to furnish to the Department of Financial Services Department, Consumer Assistance Unit, any information related to this matter. I am enclosing copies of any correspondence or other papers which I feel would help your investigations. I understand that a copy of this form and any or all of the enclosed information may be sent to the respondent.

Signature [redacted] **Date** 07/14/14

[redacted]

Complaint Description:

I recently received a Notice of Proposed Premium Rate Change to submit comments to DFS
Current monthly premium is $825.57
Proposed monthly premium is $1007.65
Name of insurer MetroPlus Health Plan
Name of Plan GoldPlus-G2 (Includes Adult + Pediatric Dental/Vision - Riders: None
Group coverage - Wife + Husband
HIOS ID NO [redacted]
Comments: - I am presently receiving Tax Credit APTC) for $341.00. My Premium ~~$484.00~~ 484.57
I am presently the one paying the $484.57 and can barely meet the $484.57 a month My husband is not working and a rate increase will not be affordable for us. I have not used my card since the insurance became effective on 2014-03-01
My husband uses his card for medication for his heart. If a rate increase is granted we will have no other choice but to stop our medical insurance

RECEIVED

JUL 23 2014

HEALTH BUREAU
N.Y.C. OFFICE

July 18,2014

To whom it may concern:

Our company is [redacted] Our employee has Metro Plus Health Plan our plan is [redacted] We have small group coverage.
The proposed increase of 26%(!!) is outrageous. What is the point! We would need to completely reevaluate our coverage if this proposal went through. We are outraged that such a large increase is being proposed. AND THEN you put it on the customers to write letters and call to let you know what we think of the massive increase proposal?
We are compliantly against the increase. We are outraged that after one year you would pull the rug out from underneath us and propose such an increase.

Sincerely, [redacted]

[redacted]

[redacted]

July 2, 2014

NYS Department of Financial Services
Health Bureau – Premium Rate Adjustments
[redacted]

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

Re: Proposed Rate Change
[redacted]

To Whom it May Concern:

I am writing in response to the proposed rate change for MetroPlus. My current monthly premium is $1,176.44 The proposed premium will be $1,435.87. This represents a total of $259 per month ($3108 annually), or a 22% increase.

Quite frankly, for service this bad, with some of the worst doctors in the city, high deductible, no out-of-network option, and very limited coverage, this is an outrageous proposal. Let me describe some of my experiences to you, after having joined MetroPlus [redacted], and you may judge for yourself if a 22% increase is justified.

I am a contractor, and responsible for insurance for my family of 4 (2 adults, 2 children). I make too much money to qualify for financial assistance, but not enough to sneeze at paying close to $20,000 a year in insurance premiums and other basic health costs. MetroPlus [redacted] seemed to offer a happy medium when I did my initial research in 2013.

However, that impression was soon to change. My first experience with quality of the in-network health providers came when I went for a checkup with my assigned doctor. Not only was his office less than clean, but the nurse actually informed me she was opening a "new bottle" of "the good stuff" for my allergy shot. This did not fill me with confidence.

My next experience was in trying to get my orthotics (shoe inserts) updated. After a 3-hour visit at the East Harlem Foot Clinic, where I met some charming young students and an extremely jaded podiatrist, I received a letter informing me that my inserts were declined. When I called, the podiatrist informed me that "those are only paid for if you are diabetic." When I asked why he or his office had not informed me of this BEFORE the visit, his answer was "I guess I was having an off day."

Here is a list of problems with MetroPlus [redacted].

- Terrible website – not user friendly, non-functional, difficult to use, no private account area, and a very bizarre temporary password method rather than normal secured logins.
- No out-of-network doctors
- Poor quality in-network doctors
- Bad communication (usually by letter)
- High deductible for the family plan

The only, let me repeat, the ONLY thing going for this plan is the low monthly payment. The increase will certainly remove that advantage.

I am optimistic by nature, and can only hope the problems with the terrible state of health care in New York will improve slowly over time, with affordable family plans for the embattled middle class, high quality health care professionals, useful websites, low bureaucratic overhead, and a better life for all.

To achieve this goal, please deny the premium increase and put pressure on MetroPlus to clean up their act.

Best wishes,

July 1, 2014

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

Metroplus health plan
[redacted]

Dear Sir/madam

My name is [redacted] Dear,
my account Number is [redacted]
I am currently paying $148.84 a month for health insurance that I haven't Even Started to use. It's very hard and difficult for me and my husband to come up with $148.48 every month We Struggle Every month to pay our health insurance bill, but We Still make an effort to pay. We won be able to pay $878.84 Starting 2015. and if our premium goes up We have no other Choice but to cancel our health insurance with metroplus. please am asking you to let our premium remains at $148.84 because I can't afford it all. Feel free to contact me at.
[redacted]

Yours truly [redacted]

Prior Approval Submission
NYS Department of Financial Services
To: PremiumRateIncreases

06/19/2014 06:06 PM

MetroPlus Health Plan
group
ppo
[redacted]
My health plan is the SilverPlus - S2 plan. If the proposed premium change is approved I will leave MetroPlus even for an equal or higher rate elsewhere out of protest for such a significant increase so quickly. I do not think it is founded. I have left the same comment with MetroPlus. Thank you.

Prior Approval Submission
NYS Department of Financial Services
To: PremiumRateIncreases

06/19/2014 10:14 PM

MetroPlus Health Plan
group
other
[redacted] Phone #: [redacted] Email 1: [redacted] Email 2: [redacted]
06/19/2014 Dear Sir/Madam, Please be advised I am submitting the below comments due to the proposed premium rate change received from my insurer; my current monthly premium is $748.84 my insurance company (MetroPlus Health Plan) proposed a new monthly premium increase of 878.84 as of 2015. However I can barely afford to maintain my current monthly premium this new premium will be impossible to pay. As I am the only breadwinner in my household, since my wife is a fulltime student in college and we desperately need health coverage. I strongly believe this is unfair for someone in my situation, like I stated earlier the total out of pocket expense without having to pay a monthly premium is difficult to meet (even with the New York State exchange program?s help) much less a rise in our future premium. I am pleading with you to kindly deny the proposed increase of the premium. Please see below requested information, any other information needed please feel free to contact me. Name of Insurer: MetroPlus Health Plan Name of Plan: SilverPlus ? S2-2 Coverage: Family Coverage (husband and wife) HIOS identification number: [redacted] Yours Sincerely [redacted] and [redacted]

Prior Approval Submission
NYS Department of Financial Services
To: PremiumRateIncreases

06/23/2014 12:35 PM

MetroPlus Health Plan
group
hmo
[redacted]
On behalf of my wife [redacted] and myself, I want to express my strong opposition to a raised premium rate for my Metroplus "Platinum Plus 2" Health Care plan. It is already absurd to pay $925 a month for Medicaid, which is essentially what we are getting. There are hidden limits in the coverage (my wife's asthma medication was denied), excessive wait times in the hospital and clinic (we were recently on hold for 45 minutes when we called with an urgent problem) and our primary care physician is not a physician but a nurse practicioner who recently gave out incorrect information about a medication. It's not even in Metroplus' interest to do this; we were already seriously considering switching providers, but we are certain to switch if this price increase goes into effect. I recognize that there are massive statewide and national problems with our health care, but jacking up premium costs this soon after the start of the ACA is a terrible idea, and one we wholeheartedly oppose. Thanks for taking my feedback. Sincerely,
[redacted]

Prior Approval Submission
NYS Department of Financial Services
To: PremiumRateIncreases

06/23/2014 01:17 PM

MetroPlus Health Plan
group
[redacted]
The rate increase of almost 20% is too much for what I can afford or what my technicians I oversee and manage can afford. I have a silverplus -s4 plan [redacted]

Prior Approval Submission
NYS Department of Financial Services
To: PremiumRateIncreases

06/23/2014 10:56 PM

MetroPlus Health Plan
group
other
[redacted]
I am writing to contest the idea of increasing my premium from $372.42 to $439.42. I have been out job for awhile as a result of the injury I sustained from my place of work. This situation has made it very difficult for me to pay my bills. It has been a struggle to pay the initial premium I was given. To add more to the one I have is really going to be impossible for me to pay. This will therefore leave me without insurance which it not good for me. Please I want you to consider my condition and leave my initial premium as it is.

Prior Approval Submission
NYS Department of Financial Services
To: PremiumRateIncreases

06/24/2014 08:59 AM

MetroPlus Health Plan
group
other
[redacted]
Proposed rate increase is too much. If approved without an accompanying increase in our Advanced Premium Tax Credit, this will surely cripple us. We might have used our insurance benefits significantly since our initial enrollment, but it is only because we were previously uninsured and needed to make sure all is well with us healthwise.

Prior Approval Submission
NYS Department of Financial Services
To: PremiumRateIncreases

06/30/2014 08:42 AM

MetroPlus Health Plan
group
other
[redacted]
Please deny any increase in my Premium. I signed up to a priced plan for service and should not be penalized for using the service initially as a first time of being insured. Any increase would make maintaining the plan untenable.

Prior Approval Submission
NYS Department of Financial Services
To: PremiumRateIncreases

06/30/2014 08:49 AM

MetroPlus Health Plan
group
other
[redacted]
SilverPlus-S4 [redacted] Please deny any increase in premuim. As a first time insurer the initial usage of service should not be penalized. Any increase would make maintaining the insurance untenable.

----- Forwarded by [redacted] on 06/30/2014 09:38 AM -----

From: [redacted]
To: [redacted]
Date: 06/27/2014 01:33 PM
Subject: NYS Department of Financial Services Consumer Assistance Unit Inquiry

Dear [redacted]

Your inquiry submitted to the NYS Department of Financial Services Consumer Assistance Unit has been received and will be reviewed promptly.

The information you entered is as follows:

Your Name: [redacted]
Email: [redacted]
Address: [redacted]

Your Company/Organiz [redacted]
Daytime Telephone#: [redacted]
You are a(n): CONSUMER
Type of Insurance question/comment: HEALTH

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

* *

DFS:

My law firm received a notice from METROPLUS Health Plan of a proposed rate increase of approximately 36%. The letter indicated we had a 30 day period to provide comments. According to the NFS website, no preliminary justification plan has been submitted by MetroPlus to the DFS and available to the public, thereby hampering our ability to comment.

Please be advised that I object to a proposed 30 day comment period under these circumstances and ask that your department investigate

whether a preliminary justification plan has been submitted by MetroPlus and whether is will be available for review.

Thank you very much,

[redacted]

* *

Sincerely,

New York State Department of Financial Services
Consumer Assistance Unit.
email at: consumers@dfs.ny.gov

Prior Approval Submission
NYS Department of Financial Services
To: PremiumRateIncreases

06/30/2014 02:26 PM

MetroPlus Health Plan
group
other
[redacted]
MetroPlus has suggested a more than 36% increase in premiums. As a small business, we cannot afford this increase. We signed up for this plan in 2014 because it was the most affordable of the plans that we determined were suitable for our employees. While I know all health insurance companies' premiums go up every year, we did not anticipate such a large increase and thought that we would be able to stick with this plan for the foreseeable future, especially considering the amount of time and effort that went into switching from our previous plan to a Marketplace plan. Now I feel as though we were drawn into this plan under false pretenses and that premiums were only low in 2014 as a way of enticing small businesses into the MetroPlus plan without notifying us that future premiums would climb to the level of other similar plans. I have not been able to find any clear explanation on the MetroPlus or DFS website indicating the calculations that were used to propose this new premium rate. I hope that DFS will take into account small businesses' ability to pay when making a decision on MetroPlus's approved premium rater for 2015. Thank you.

Response to Proposed Rate Change

[redacted] to: premiumrateincreases 07/01/2014 11:00 AM

History: This message has been replied to.

Name of Insurer: MetroPlus Health Plan
Plan: PlatinumPlus-P4
Group Coverage - employees
HIOS: [redacted]

NYS Department of Financial Services
Health Bureau - Premium Rate Adjustments
1 State Street,.
New York, NY 10004

Dear DFS:.

As an employer, we would like to request that this rate increase be rejected. This I strongly believe is a bait and switch to request an increase in our premiums after only 3 months by 36.41%. .This was clearly the plan from the beginning to increase after the first year. We will not provide insurance to our employees at this rate. We cannot afford to do that because we cannot pass on a 36.41% to our customers nor can our margins in a tough economy support this. This is unreasonable and I hope you are able to see this request for what it is. .As a responsible employer we want to provide health insurance to our staff, its the right thing to do. But the insurance company is a business and we are a business as well - we have to each foot the bill to make this work especially for small businesses who provide the vast majority of jobs. .Please reject this increase request..

[redacted]

request for more information - MetroPlus Health Plan rate increase

[redacted] to: premiumrateincreases 07/03/2014 03:56 PM

History: This message has been replied to.

Hello,

I am writing to request more information on the criteria by which the Department of Financial Services will make a decision about a proposed rate increase submitted by MetroPlus Health Plan.

I would like to testify before the Department of Financial Services when they consider this rate hike because I wish to express my strong opposition.

I am the director of a small non-profit, [redacted] Our employees are enrolled in the MetroPlus Health Plan's Platinum plan.

We pay 100% of the cost of this plan and chose it so that we could continue to provide fully paid health benefits to our employees through a plan comparable to what they received before the implementation of the ACA.

Our Platinum plan numbers are [redacted] and [redacted]

I would like the opportunity to persuade the DFS that they should reject the request by the MetroPlus Health Plan to increase their rates. My opposition is based on several reasons:

1) **MetroPlus Health Plan has provided no operational information to justify this rate hike.** The public, especially plan participants, deserve a minimal level of transparency vis-a-vis the company's rate-setting practices. And you as a regulatory agency are responsible for ensuring the public is not victim to price gouging.

2) **A 36% increase in premiums in a single year contradicts the objective of state exchanges, which is to slow the growth of healthcare costs.** If an increase of this magnitude is allowed, consumers will not only see their insurance rates increase faster than inflation, they will be increasing faster than they were prior to the ACA. It is your job as a regulatory agency to ensure that exchange participants are "bending the cost curve" in the right direction, not profiteering from some of the states most vulnerable citizens.

3) **This move will drive employers and individuals to choose inferior plans, the opposite of what the ACA intended.** We are the perfect example of this problem. We're a small non-profit that provides 100% employer-paid coverage. Our pre-ACA plan was canceled by our previous insurance company and we chose the MetroPlus Platinum plan because it was the best-priced plan comparable to what our employees were receiving prior to the ACA. However, I can assure you that as an employer trying to ensure our employees receive the best, fully-paid health insurance we can provide, a 36% increase will no doubt push us to switch to an inferior plan, worsening the healthcare coverage of our staff, or shift more of the cost of health insurance onto our staff. Neither option aligns with the goal of the ACA, nor the responsibilities of the DFS.

Thank you in advance for providing the information I requested. Please let me know how I can make my case personally to the DFS.

I trust you will consider the opinions of employers and plan participants equally with those of the insurance companies during your deliberations. As such, I am confident you will reach to the same conclusion that I have - this rate increase request should be denied.

Cordially,

[redacted]

[redacted] MetroPlus Health Plan rate hike notice.pdf

MetroPlus Health Insurance Premium Rate Increase

[redacted] to: premiumrateincreases 07/06/2014 08:00 PM

Sent by: [redacted]

Cc: [redacted]

History: This message has been replied to.

Hello,

I would like to submit in writing my objections to the MetroPlus Health Plan rate increase. We have small group coverage and are pertinent details are below.

The rate increases that are being proposed are enormous and would prove to be a financial barrier to continuing with this plan. One of the reasons we chose this plan is that, even though it doesn't have the level of coverage as other plans did, the monthly premium was something our small business could afford. If this rate change were to occur, especially without any increase in coverage, this plan is no longer the financially sound decision to make for our business and we will need to change our plan. Everyone knows that a change in plan disrupts not only business-as-usual, but employees' reliance on doctors, prescriptions and other medically related businesses or events that they are used to.

Please do not allow this rate increase to go through at what could potentially be a 36% rate increase. That's just too much.

Thank you,

[redacted]

MetroPlus Health Plan

Gold ([redacted])

Platinum ([redacted]

Platinum (1[redacted])

Prior Approval Submission
NYS Department of Financial Services
To: PremiumRateIncreases

07/15/2014 01:10 PM

MetroPlus Health Plan
group
hmo

I received a notice of a proposed premium increase. We have not even used the service yet and there is already an increase. Insurance companies will always cry out for more--ask an it shall be given. For me it doesn't warrant any increase in premium as we do not intend to visit doctors unless you are really really sick. Some folks will just sneeze and will run off to the doctor. If it aint broke don't try to fix it to open a can of worms. Again, I do not recommend any increase in premium as it is already extravagantly high.

MetroPlus Rate Increase is outrageous

[redacted] to: premiumrateincreases 06/19/2014 04:34 PM

History: This message has been replied to.

Dear DFS,

Less than half a year after I enrolled with MetroPlus Health Plan, they sent a notice that they plan to increase my premium by 20%. Apparently they worked it out with NYS that they would offer reasonable rates to come in compliance with new laws, but not even half a year later, they are jacking up rates...and I am sure they plan to do it every year. Can you think of any other utility or area of expense that raises its rates 20% a year? The health care system is manned by thieves and incompetents, the federal government caved into “free-market” Republicans and abandoned the government-run single-payer program that could have used economy of scale to pressure insurers into better practices and reasonable rates. The new law instead puts no restrictions on premium increases (or on executive pay), and if DFS does not regulate them they will continue to line the pockets of their executives, lawyers and bureaucrats even while providing limited services to patients. Excuse the pun, but It makes me sick!! MetroPlus should not be allowed to raise premiums any more than the cost of living standards. Their requested increase of nearly 20% for 2015 is outrageous and should be rejected.

Another angry consumer disgusted by how greed and incompetence rule our society,

[redacted]

[redacted]

Metroplus.org silver (S2) health plan - proposed increase

[redacted] to: premiumrateincreases 06/19/2014 05:45 PM

History: This message has been replied to.

Hello,

I just got a letter from MetroPlus saying that they put in for a rate increase for 2015. As a (reluctant) consumer of their health plan, I am very upset. Don't let them raise the rates. Because of the (Un)Affordable Healthcare Act, I was forced to get insurance. I have been unemployed for a long time, and can't afford the rates as they are (and, I don't want to go on Medicaid). Actually, my mother is paying my premiums. As someone on a fixed income, she does not have endless income for this increase. Someone, some group, some government agency has to do something to help the people. I wish that President Obama would realize that this healthcare plan is broken. The government should scrap it, and start all over again. All 'parties' should work together to help The People, even if they only pass small measures. I am not in a position to benefit (in fact, I am in a position to really lose) with this system, and these increases. Please, keep MetroPlus from raising the rates.

much.

[redacted]

Comments on Proposed MetroPlus Premium Increase

[redacted] to: premiumrateincreases 06/20/2014 11:30 AM

History: This message has been replied to.

To Whom It May Concern,

I received a notice that DFS is considering raising my MetroPlus premium to $503/month, up from $412/month, and that public comment on this matter was welcomed.

I am not speaking just for myself, but for millions of other New Yorkers who were overjoyed to finally have affordable health insurance. I am grateful that my plan includes both vision and dental coverage as I have had neither since I was 23 and still on my parents' plan.

But I bought an exchange plan because my employer refused to insure his employees and while the range of coverage is excellent for the price, it was still difficult to afford $412/month plus basic living expenses on a $42K salary. The subsidy doesn't kick in unless you make $29K/year or less without adjusting for areas with higher costs of living like NYC.

Then like millions of people nationwide, I lost my job and found myself ineligible for unemployment while my housing expenses just increased. An increase of almost $100/month for the same exact coverage is pretty much the last thing I need right now. I'm currently piecing together various part-time gigs and my own business, the very same that disqualified me for unemployment comp, and you can guess that none of these options will offer me health insurance even if I was declared an employee and not a contractor.

It is unfair to shift this administrative cost burden onto the rest of us who are being victimized by a poor economy. A minor premium increase every 1-2 years is one thing, but an extra $100 per month is an undue burden for those of us who are struggling to make ends meet and fall into the canyon of not being poor enough for expanded Medicaid but not earning enough to comfortably afford other living expenses.

In light of the above, I hope that DFS will consider disapproving the proposed premium increase.

Sincerely,

[redacted]

Premium Rate Increase

[redacted] to: premiumrateincreases 06/20/2014 11:57 AM

History: This message has been replied to.

To whom it may concern,

Greetings, I am emailing you in regards to the proposed premium raise from my current health insurance provider, and I severely hope I am not the only one who does so. I am insured under MetroPlus, who have notified me that they have requested a $125 a month raise to my plan's premium. Not only is this outrageous, I'm shocked that a premium raise of that amount is even legal to request. That is more than a 25% raise; that is a good ten times the rate of inflation.

This email isn't just about me, or my insurance provider alone. I can imagine that all other providers under the Affordable Care Act are doing much the same thing right now. You should not only deny a premium hike for my provider, but for any other provider that is requesting such an absurd raise. I am lucky enough to be able to (barely) afford my current premium as it is, I'm sure that others are not so lucky.

A premium raise of this amount will, without a doubt, result in me leaving this provider. And seeing as they "used to be" the most inexpensive provider on the ACA list in New York State, I can only foresee that I will once again be going without insurance. Keeping this plan will put me at $200 more (every month) than what I was paying before the ACA, for the exact same coverage.

Insurance companies should not be given the idea that it is ok to raise a premium 25% in one year. My salary is not raised enough to cover that. Nobody's is. I live in New York City, no one can really expect that I would have extra spending money after paying bills, and unfortunately (mostly for me), shelter, food, and clothing come before insurance, something I really should not have to choose between.

I apologize for the tome, but I do hope it is read and considered when deciding whether to approve this premium raise. If such a large raise is approved the first year out, I can't even imagine what the following years will look like, and the theory of these ACA policies being a less expensive option will no longer be true, rendering the whole Marketplace moot, and the prospect of healthcare for all completely ridiculous, yet again.

Please consider my argument while reviewing the MetroPlus request. Your decision will determine whether I have health insurance next year or not.

Thank you,
[redacted]

p.s. The letter from my insurer instructed that I send you my personal information about my plan and ID number, which is wholly unnecessary. The type of plan I have, or anyone has, is irrelevant to my statements above.

[redacted] [redacted] Your inquiry subm... 06/23/2014 09:30:32 AM

From: [redacted]
To: [redacted]
Date: 06/23/2014 09:30 AM
Subject: NYS Department of Financial Services Consumer Assistance Unit Inquiry

Dear [redacted]

Your inquiry submitted to the NYS Department of Financial Services Consumer Assistance Unit has been received and will be reviewed promptly.

The information you entered is as follows:

Your Name: [redacted]
Email: [redacted]
Address: [redacted]

Your Company/Organization:
Daytime Telephone#: [redacted]
You are a(n): CONSUMER
Type of Insurance question/comment: HEALTH

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

* *

I was informed by my health insurance company, MetroPlus Health Plan, that they are requesting a premium rate increase. I would like to comment on this request, they said I have a 30 day comment period, but failed to provide me with the contact info for D provide me with the DFS contact info for this matter. Thank you [redacted]

* *

Complaint about NY health insurance premiums

[redacted] to: premiumrateincreases 06/23/2014 02:20 PM

History: This message has been replied to.

Dear NY State Department of Financial Services:

Since you asked my insurance company, MetroPlus Health Plan, to take the time of mailing yet more annoying paper mail to my house (we are in the 21st century after all - some consideration for the environment would be great), I wanted to take 5 minutes to complain about the exorbitantly high health insurance rates available in New York City.

I am a healthy, non-smoking [redacted]-year old with no major medical history. I eat well and exercise at least 5 times a week. Yet, a simple health insurance policy (admittedly not the rock bottom cheapest plan, but a modest plan nonetheless) is $412.79 EACH MONTH. Now, the insurance company is letting me know there will be a 22% increase - **22% (!!)** increase next year to $503.81 per month.

I could go through the details of my modest plan, but that would be a waste of my time.

Who can afford these ridiculous rates? As long as the pharmaceutical, insurance, and medical device companies continue to rip off the health care system (in the name of increasing shareholder value and paying their executives 8-figure salaries and flying them around in corporate jets), health care will NEVER be affordable for ordinary Americans. That's why America spends more on health care per capita than ANY other OECD country, yet our health outcomes are near the bottom of the developed world.

I pay nearly 35% taxes to live in NYC, and this is what I get?

Please, let there be an affordable PUBLIC option for health insurance that will put the best interests of the consumer, rather than company executives and shareholders, in mind. I can't imagine what a family of 4 would have to pay for basic health insurance in New York City.

Your concerned citizen and taxpayer,

[redacted]

--

[redacted]

No! No! No!

[redacted] to: premiumrateincreases@dfs.ny.gov 06/23/2014 04:09 PM

History: This message has been replied to.

Dear Department of Financial Services,

Today I received a letter from MetroPlus saying that they have requested to raise my premium from $374 to $440 - that would be an 18% increase! This after only a few months after signing up thought NY State of Health! Were they misleading me when I signed up?

I am so angry about this that I can't reasonably express it here. What good was the contract I signed? Why can't the corporations be restricted to once-a-year rate increases that are reasonable?

I can see it now, the State won't allow the 18% increase, decrying a victory for consumers. But they'll allow a 10% increase - still outrageous - to appease the corporation.

Who works at these corporations? Mere cost benefit analysis algorithms?? Disgusting! Infuriating! Please defend consumers against this rate increase.

Sincerely,

[redacted]

No! No! No!

[redacted] to: premiumrateincreases 06/24/2014 08:57 AM

Dear whoever is reading this,

Today I received a letter from MetroPlus saying that they have requested to raise my premium from $374 to $440 - that would be an 18% increase in just a few months!!! Were they lying about their rates when I signed up through NY State of Health???

I am so angry about this that I can't reasonably express it here. What good was the contract I signed? Why can't the corporations be restricted to once-a-year rate increases that are reasonable?

I can see it now, the State won't allow the 18% increase, decrying a victory for consumers. But they'll allow a 10% increase - still outrageous - to appease the corporation.

Who works at these corporations? Mere cost benefit analysis algorithms?? Disgusting! Infuriating! Please defend consumers against this rate increase.

Sincerely,

[redacted]

MetroPlus - Decline the Prosposed Premium Rate increase

[redacted] to: premiumrateincreases@dfs.ny.gov 06/24/2014 04:43 PM

Please respond to [redacted]

History: This message has been replied to.

Dear Sir/Madame,

I received notification today that the premiums for my coverage with MetroPlus in 2015 are going up by $780.00 per year. That is more than a 20% increase. So that means that I will need to earn another $1,100.00 before tax, to cover the additional premium.

NONSENSE !

I am Not in favor of allowing such an increase and here is why -

MetroPlus has been in business for over 13 years and they employ professionally certified actuaries, and accounts, to determine the claims to be paid and the revenues collected, to run a profitable company. The CFO, John Cuda has been in the heath insurance business for more than 20 years and 13 of those years he has been at MetroPlus, according to public records.

Therefore it appears to me that they have knowingly priced their coverage low to attract first time customers, with the clear intent of raising premiums once customers sign up. I believe that is a deceptive way to run a company.

If they don't know how to price the service that they provide after 13 years, then they don't deserve to generate a profit.

They are probably banking on the fact that most customers will just pay the increase.

If they are Not granted the increase customers will not have to pay it. Maybe they will have to go back to the hospitals and renegotiate the fees they are charged. It's just easier to keep passing it along to the consumer because they cannot organize or have a lobbyist group that can push back and say No.

If the rate increase is approved, I will move to another carrier. I bet the other carriers are trying to push increases too.

Its time to stop "sticking it to the little guy".

Sincerely,

[redacted]

[redacted] to: premiumrateincreases@dfs.ny.gov 06/24/2014 10:03 PM

Please respond to [redacted]

History: This message has been replied to.

To whom it may concern,

I received a letter stating that my premium of my metro plus health insurance will be going up to $592.64 a month. I wont be receiving any increase in my pay in 2015. So why will my premium be raised? When I am currently struggling to pay my current amount of $462.69. How is it possible to stay with the remaining rate and or how can it be lowered? If rate is raised I may have to change my plan.

Sincerely,

[redacted]

IM OUTRAGED AT THE INCREASE IN MY PLAN

[redacted] to: premiumrateincreases 06/26/2014 08:28 AM

History: This message has been replied to.

I just signed up for MetroPlus plan active Feb 1, 2014. Its going up 20% in 2015! This is absolutely outrageous!

I haven't had a income increase in nearly 10 years, in fact my income has decreased significantly, yet prices of insurance ***skyrocket*** every year, not to mention the cost of living.

This is out of control. I call for DFS to take strong action to oppose this increase.

Where are all these costs going! Who's profiting? Stop this madness!

Reject this increase!

[redacted]

HIOS ID# [redacted]

----- Forwarded by [redacted] 06/26/2014 04:20 PM -----

From: [redacted]
To: [redacted]
Date: 06/23/2014 05:48 PM
Subject: NYS Department of Financial Services Consumer Assistance Unit Inquiry

Dear [redacted]

Your inquiry submitted to the NYS Department of Financial Services Consumer Assistance Unit has been received and will be reviewed promptly.

The information you entered is as follows:

Your Name: [redacted]
Email: [redacted]
Address: [redacted]

Your Company/Organiz
Daytime Telephone#: [redacted]
You are a(n): CONSUMER
Type of Insurance question/comment: HEALTH

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

* *

Hello

I have received notice from my health insurance provider that the health insurance policy I purchased from the New York exchange is going to go up from $462.00 per month to $592.00 per month.

This is very unfair, counterproductive, and,seems like nothing more than a bait and switch operation.

The exchange prices offered on the exchange are not really affordable to begin with. Now the company that I have my

insurance policy through, Metro Plus, wants to raise the monthly rate more than a hundred dollars per month.

The rates must come down, not go up. Part of this whole idea of forcing everyone to buy health insurance was that more people coming in to buy health insurance would drive insurance prices down. It appears that instead, we consumers are simply getting gouged because they know we are FORCED to do business with them.

I feel this is totally outrageous and that consumers will abandon their plans all together.

This is not just. It is not fair. It is not a path that people will stay on to help build a better affordable health care system in the United States.

I strongly protest!

[redacted]

* *

Sincerely,

New York State Department of Financial Services
Consumer Assistance Unit.
email at: consumers@dfs.ny.gov

Please do not raise the premiums !

[redacted] to: premiumrateincreases 06/27/2014 03:48 PM

History: This message has been replied to.

Hey guys,

My name is [redacted], I'm a MetroPlus Healthcare plan subscriber, and I'm writing to you today to ask you not to allow the MetroPlus request to raise my rates.

I just purchased the AHC plan and it hasn't been two months of me paying my premiums and I'm already getting notices about possible increases.

What I pay now, $260, is the most I can afford to pay under current circumstances, and any increase in this premium will defeat the very purpose of the Obama Healthcare plan and me getting on it.

Please consider my objection to this increase; thank you.

Premiun Increase
[redacted] to: premiumrateincreases 07/02/2014 08:41 AM
History: This message has been replied to.

[redacted]

Metro plus
Platinum plus- P2-[redacted]

To Whom It May Concern:

I am very concern with these new health insurance premium increase.
I am struggling as it is now paying for my health plan. While medical
health insurance are going up, my gross income will not increase in
2015.

I thought the Obama health care program was suppose to help people
get affordable health insurance.

I don't know what type of health insurance I'm going to have in 2015. If any!
I just can't afford these new changing rate- its too much for me.

I will not renew my health plan insurance with Metro plus due to these
increases.

Struggling to pay health insurance, co-payment and

medication

Sincerely

[redacted]

metroplus s2 rate

[redacted] to: premiumrateincreases 07/02/2014 09:09 PM

History: This message has been replied to.

Hi,
I would like to know how to change my healthcare plan if the rate changes
Thank you,
[redacted]

Re: Notice of Proposed Premium Rate Change

[redacted] to: PremiumRateIncreases@dfs.ny.gov 07/10/2014 04:16 PM

History: This message has been replied to.

[redacted]

[redacted]

Re: Notice of Proposed Premium Rate Change

Dear Metro plus Health Plan, and DFS,

I'm in received your unsigned letter dated: 06/16/ 2014
Informing me that my monthly premium to be raised 30% by beginning 2015. My proposed premium is: $ 592.64

When I signed with your company on 05/01/ 2014 my monthly premium was $ 462.69.
Than Forty Six days later you sent me a letter noticing sudden proposed Premium Rate Change.

That seems to me grossly miss leading to consumers who adapted your plain.
Your proposed increase what present a financially hardship for me .
I would jeopardize my ability to continue my membership with you.
Seems to me unreasonable proposal. I had found your service you provide to be wanting. For example:

Unfortunately I broke my toe a day after my insurance started. I called up Dr [redacted] according my card she supposed to be my primary physician. They said she could see me not earlier than 08/20/ 2014. I got phone numbers from Metro Health Care advisers, I called several office up. There were apparently no appointments for 2.5 months elsewhere.Than I went to the internet. After two hours searching, I found that only Institute for Family Health / 16 East 16th St New York/ could except my Metro Health insurance like a walking patient. After seven hours waiting in the Family Health Center they informed me, sorry but no orthopedic doctor to be found who could read my radiology chart, but I had to pay copayment for both unfinished services. Than I called you up again , crying what should I do? Your agent suggested me, go to the Bellevue Hospital urgent care, where the copayment is only $55. I did so.
What I saw there, was a horrible experience. I was surrounded on all sides by criminals, along with armed cops, drunk men, who were hovering around my broken toe. I was waiting together with those people who are not even paying any insurance. All together 14 extremely difficult waiting hours I got take care of my toe. Than I got the bill from Bellevue Hospital charging $100 copayment from emergency care. Your agent miss informed me.
After reading lot of informations on the net I found out, the waiting time in Family Health Center of Harlem not so long. I chosen Dr [redacted] primary physician who is available on Fridays, because I'm off on Fridays. I got an appoiment on 06/13/ 2014.
But Dr [redacted] was not there, she took a day off, and the office forgot to note me. Than I called you up on 06/13/2014 to change the doctor 's name on my card to Dr [redacted].
But I did not get that card yet.
The Doctor sent me to colonoscopy, but two hours before the procedure started they called me up, to cancel this appointment, because the machine was broken. They could not tell me when they could fix it. During the pass two months with you.
I had so much negative experiences.

To go through so much red tape and waiting hours to be seen, to someone who accept your insurance, compels me to ask the question what am I paying for? How can you possible request more money for such an inferior delivery for health care service? How can you ask people even more?
Giving such an inferior service please explain to me why you would expect people pay even more, than they are currently paying?

I had a good insurance before, than the law forced me to change it. Why should I asked DFS, government help for such a low service? You are advertising everywhere this is an AFFORDABLE HEALTH CARE. 30% premium hike within half years is not affordable. To using up taxpayers dollars to be seem to affordable it is sin.

Sincerely I look forward to your response.

[redacted]

My member Id is [redacted]

concerns of premium rate increases

[redacted] to: premiumrateincreases@dfs.ny.gov 07/11/2014 07:05 AM

History: This message has been replied to.

Dear Sir/Madam:

My name is [redacted] My medical insurer is MetroPlus; The name of the plan is SilverPlus-S1-3;

HIOS ID No is [redacted]

I received a letter from MetroPlus, which is to notify the medical premium rate will increase for 2015. I don't like this fact and can not take this burden if they increase the rate. Currently the reason I can afford this medical insurance rate is I have financial assistance from Advanced Premium Tax Credit. If they increase the rate, I can not afford that, it will be ended with dropping of this plan. I really do wish you can take some action to disapprove this rate change. If the rate increase going to happen, I think I'd rather to drop of this plan and take the penalty.

Thank you for your consideration

Sincerely

[redacted]

07/11/2014

Re: Notice of Proposed Premium Rate Change

[redacted] to: PremiumRateIncreases@dfs.ny.gov 07/11/2014 12:42 PM

Hello there,

I sent an e-mail to you, about premium raising. I did not get any answer from you. [redacted] Metro plus Health insurance...Re: Notice of Proposed Premium Rate Change

[redacted] 4 A

My member Id is [redacted]

Prior Approval Submission
NYS Department of Financial Services
To: PremiumRateIncreases

06/19/2014 06:06 PM

MetroPlus Health Plan
group
ppo
[redacted]
My health plan is the SilverPlus - S2 plan. If the proposed premium change is approved I will leave MetroPlus even for an equal or higher rate elsewhere out of protest for such a significant increase so quickly. I do not think it is founded. I have left the same comment with MetroPlus. Thank you.

Prior Approval Submission
NYS Department of Financial Services
To: PremiumRateIncreases

06/19/2014 10:14 PM

MetroPlus Health Plan
group
other
[redacted]
06/19/2014 Dear Sir/Madam, Please be advised I am submitting the below comments due to the proposed premium rate change received from my insurer; my current monthly premium is $748.84 my insurance company (MetroPlus Health Plan) proposed a new monthly premium increase of 878.84 as of 2015. However I can barely afford to maintain my current monthly premium this new premium will be impossible to pay. As I am the only breadwinner in my household, since my wife is a fulltime student in college and we desperately need health coverage. I strongly believe this is unfair for someone in my situation, like I stated earlier the total out of pocket expense without having to pay a monthly premium is difficult to meet (even with the New York State exchange program?s help) much less a rise in our future premium. I am pleading with you to kindly deny the proposed increase of the premium. Please see below requested information, any other information needed please feel free to contact me. Name of Insurer: MetroPlus Health Plan Name of Plan: SilverPlus ? S2-2 Coverage: Family Coverage (husband and wife) [redacted] Yours Sincerely [redacted]

Prior Approval Submission
NYS Department of Financial Services
To: PremiumRateIncreases

06/23/2014 12:35 PM

MetroPlus Health Plan
group
hmo
[redacted]
On behalf of my wife [redacted] and myself, I want to express my strong opposition to a raised premium rate for my Metroplus "Platinum Plus 2" Health Care plan. It is already absurd to pay $925 a month for Medicaid, which is essentially what we are getting. There are hidden limits in the coverage (my wife's asthma medication was denied), excessive wait times in the hospital and clinic (we were recently on hold for 45 minutes when we called with an urgent problem) and our primary care physician is not a physician but a nurse practicioner who recently gave out incorrect information about a medication. It's not even in Metroplus' interest to do this; we were already seriously considering switching providers, but we are certain to switch if this price increase goes into effect. I recognize that there are massive statewide and national problems with our health care, but jacking up premium costs this soon after the start of the ACA is a terrible idea, and one we wholeheartedly oppose. Thanks for taking my feedback. Sincerely,
[redacted]

Prior Approval Submission
NYS Department of Financial Services
To: PremiumRateIncreases

06/23/2014 01:17 PM

MetroPlus Health Plan
group
hmo
[redacted]
The rate increase of almost 20% is too much for what I can afford or what my technicians I oversee and manage can afford. I have a silverplus [redacted]

Prior Approval Submission
NYS Department of Financial Services
To: PremiumRateIncreases

06/23/2014 10:56 PM

MetroPlus Health Plan
group
other
[redacted]

I am writing to contest the idea of increasing my premium from $372.42 to $439.42. I have been out job for awhile as a result of the injury I sustained from my place of work. This situation has made it very difficult for me to pay my bills. It has been a struggle to pay the initial premium I was given. To add more to the one I have is really going to be impossible for me to pay. This will therefore leave me without insurance which it not good for me. Please I want you to consider my condition and leave my initial premium as it is.

Prior Approval Submission
NYS Department of Financial Services
To: PremiumRateIncreases

06/24/2014 08:59 AM

MetroPlus Health Plan
group
other
[redacted]
Proposed rate increase is too much. If approved without an accompanying increase in our Advanced Premium Tax Credit, this will surely cripple us. We might have used our insurance benefits significantly since our initial enrollment, but it is only because we were previously uninsured and needed to make sure all is well with us healthwise.

Prior Approval Submission
NYS Department of Financial Services
To: PremiumRateIncreases

06/19/2014 04:03 PM

[redacted]
other
[redacted]
Metroplus is requesting to increase the monthly premium of the Silver Plus plan from $360 to $421. That's a $60 increase. NY health insurance is already pretty expensive. Even after the affordable care act. I don't know what to do. If that's the actual cost for healthcare I can't keep up with the mandate. Please verify MetroPlus's actual reasons for doing this. Be a consumer pitbull on behalf of NY's citizenry. Keep the afordable care act affordable.

MetroPlus Rate Increase is outrageous

[redacted] to: premiumrateincreases 06/19/2014 04:34 PM

Dear DFS,

Less than half a year after I enrolled with MetroPlus Health Plan, they sent a notice that they plan to increase my premium by 20%. Apparently they worked it out with NYS that they would offer reasonable rates to come in compliance with new laws, but not even half a year later, they are jacking up rates...and I am sure they plan to do it every year. Can you think of any other utility or area of expense that raises its rates 20% a year? The health care system is manned by thieves and incompetents, the federal government caved into "free-market" Republicans and abandoned the government-run single-payer program that could have used economy of scale to pressure insurers into better practices and reasonable rates. The new law instead puts no restrictions on premium increases (or on executive pay), and if DFS does not regulate them they will continue to line the pockets of their executives, lawyers and bureaucrats even while providing limited services to patients. Excuse the pun, but It makes me sick!! MetroPlus should not be allowed to raise premiums any more than the cost of living standards. Their requested increase of nearly 20% for 2015 is outrageous and should be rejected.

Another angry consumer disgusted by how greed and incompetence rule our society,

[redacted]

Metroplus.org silver (S2) health plan - proposed increase

[redacted] to: premiumrateincreases 06/19/2014 05:45 PM

Hello,

I just got a letter from MetroPlus saying that they put in for a rate increase for 2015. As a (reluctant) consumer of their health plan, I am very upset. Don't let them raise the rates. Because of the (Un)Affordable Healthcare Act, I was forced to get insurance. I have been unemployed for a long time, and can't afford the rates as they are (and, I don't want to go on Medicaid). Actually, my mother is paying my premiums. As someone on a fixed income, she does not have endless income for this increase. Someone, some group, some government agency has to do something to help the people. I wish that President Obama would realize that this healthcare plan is broken. The government should scrap it, and start all over again. All 'parties' should work together to help The People, even if they only pass small measures. I am not in a position to benefit (in fact, I am in a position to really lose) with this system, and these increases. Please, keep MetroPlus from raising the rates.

much.

[redacted]

Comments on Proposed MetroPlus Premium Increase

[redacted] to: premiumrateincreases 06/20/2014 11:30 AM

To Whom It May Concern,

I received a notice that DFS is considering raising my MetroPlus premium to $503/month, up from $412/month, and that public comment on this matter was welcomed.

I am not speaking just for myself, but for millions of other New Yorkers who were overjoyed to finally have affordable health insurance. I am grateful that my plan includes both vision and dental coverage as I have had neither since I was 23 and still on my parents' plan.

But I bought an exchange plan because my employer refused to insure his employees and while the range of coverage is excellent for the price, it was still difficult to afford $412/month plus basic living expenses on a $42K salary. The subsidy doesn't kick in unless you make $29K/year or less without adjusting for areas with higher costs of living like NYC.

Then like millions of people nationwide, I lost my job and found myself ineligible for unemployment while my housing expenses just increased. An increase of almost $100/month for the same exact coverage is pretty much the last thing I need right now. I'm currently piecing together various part-time gigs and my own business, the very same that disqualified me for unemployment comp, and you can guess that none of these options will offer me health insurance even if I was declared an employee and not a contractor.

It is unfair to shift this administrative cost burden onto the rest of us who are being victimized by a poor economy. A minor premium increase every 1-2 years is one thing, but an extra $100 per month is an undue burden for those of us who are struggling to make ends meet and fall into the canyon of not being poor enough for expanded Medicaid but not earning enough to comfortably afford other living expenses.

In light of the above, I hope that DFS will consider disapproving the proposed premium increase.

Sincerely,

[redacted]

Premium Rate Increase

[redacted] to: premiumrateincreases 06/20/2014 11:57 AM

To whom it may concern,

Greetings, I am emailing you in regards to the proposed premium raise from my current health insurance provider, and I severely hope I am not the only one who does so. I am insured under MetroPlus, who have notified me that they have requested a $125 a month raise to my plan's premium. Not only is this outrageous, I'm shocked that a premium raise of that amount is even legal to request. That is more than a 25% raise; that is a good ten times the rate of inflation.

This email isn't just about me, or my insurance provider alone. I can imagine that all other providers under the Affordable Care Act are doing much the same thing right now. You should not only deny a premium hike for my provider, but for any other provider that is requesting such an absurd raise. I am lucky enough to be able to (barely) afford my current premium as it is, I'm sure that others are not so lucky.

A premium raise of this amount will, without a doubt, result in me leaving this provider. And seeing as they "used to be" the most inexpensive provider on the ACA list in New York State, I can only foresee that I will once again be going without insurance. Keeping this plan will put me at $200 more (every month) than what I was paying before the ACA, for the exact same coverage.

Insurance companies should not be given the idea that it is ok to raise a premium 25% in one year. My salary is not raised enough to cover that. Nobody's is. I live in New York City, no one can really expect that I would have extra spending money after paying bills, and unfortunately (mostly for me), shelter, food, and clothing come before insurance, something I really should not have to choose between.

I apologize for the tome, but I do hope it is read and considered when deciding whether to approve this premium raise. If such a large raise is approved the first year out, I can't even imagine what the following years will look like, and the theory of these ACA policies being a less expensive option will no longer be true, rendering the whole Marketplace moot, and the prospect of healthcare for all completely ridiculous, yet again.

Please consider my argument while reviewing the MetroPlus request. Your decision will determine whether I have health insurance next year or not.

Thank you,
[redacted]

p.s. The letter from my insurer instructed that I send you my personal information about my plan and ID number, which is wholly unnecessary. The type of plan I have, or anyone has, is irrelevant to my statements above.

Re: NYS Department of Financial Services Consumer Assistance Unit Inquiry

Consumers to: [redacted] 06/23/2014 11:01 AM
Sent by: [redacted]
Cc: Premium Rate Increases - Public Comments

History: This message has been forwarded.

New York State Department of Financial Services
Consumer Assistance Unit
One Commerce Plaza
Albany, NY 12257
800-342-3736 (Consumers Hotline)
518-474-6600 (Outside of NYS)
518-474-2188 (Fax)

[redacted] [redacted] 06/23/2014 09:30:32 AM

From: [redacted]
To: [redacted]
Date: 06/23/2014 09:30 AM
Subject: NYS Department of Financial Services Consumer Assistance Unit Inquiry

Dear [redacted]:

Your inquiry submitted to the NYS Department of Financial Services Consumer Assistance Unit has been received and will be reviewed promptly.

The information you entered is as follows:

Your Name: [redacted]
Email: [redacted]
Address: [redacted]

Your Company/Organization:
Daytime Telephone#: [redacted]
You are a(n): CONSUMER
Type of Insurance question/comment: HEALTH

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

* *

I was informed by my health insurance company, MetroPlus Health Plan, that they are requesting a premium rate increase. I would like to comment on this request, they said I have a 30 day comment period, but failed to provide me with the contact info for D provide me with the DFS contact info for this matter. Thank you [redacted]

* *

Sincerely,

New York State Department of Financial Services
Consumer Assistance Unit.
email at: consumers@dfs.ny.gov

Complaint about NY health insurance premiums

[redacted] to: premiumrateincreases 06/23/2014 02:20 PM

Dear NY State Department of Financial Services:

Since you asked my insurance company, MetroPlus Health Plan, to take the time of mailing yet more annoying paper mail to my house (we are in the 21st century after all - some consideration for the environment would be great), I wanted to take 5 minutes to complain about the exorbitantly high health insurance rates available in New York City.

I am a healthy, non-smoking 29-year old with no major medical history. I eat well and exercise at least 5 times a week. Yet, a simple health insurance policy (admittedly not the rock bottom cheapest plan, but a modest plan nonetheless) is $412.79 EACH MONTH. Now, the insurance company is letting me know there will be a 22% increase - **22% (!!)** increase next year to $503.81 per month.

I could go through the details of my modest plan, but that would be a waste of my time.

Who can afford these ridiculous rates? As long as the pharmaceutical, insurance, and medical device companies continue to rip off the health care system (in the name of increasing shareholder value and paying their executives 8-figure salaries and flying them around in corporate jets), health care will NEVER be affordable for ordinary Americans. That's why America spends more on health care per capita than ANY other OECD country, yet our health outcomes are near the bottom of the developed world.

I pay nearly 35% taxes to live in NYC, and this is what I get?

Please, let there be an affordable PUBLIC option for health insurance that will put the best interests of the consumer, rather than company executives and shareholders, in mind. I can't imagine what a family of 4 would have to pay for basic health insurance in New York City.

Your concerned citizen and taxpayer,

[redacted]

--

[redacted]

[redacted] to: premiumrateincreases@dfs.ny.gov 06/23/2014 04:09 PM

Dear Department of Financial Services,

Today I received a letter from MetroPlus saying that they have requested to raise my premium from $374 to $440 - that would be an 18% increase! This after only a few months after signing up thought NY State of Health! Were they misleading me when I signed up?

I am so angry about this that I can't reasonably express it here. What good was the contract I signed? Why can't the corporations be restricted to once-a-year rate increases that are reasonable?

I can see it now, the State won't allow the 18% increase, decrying a victory for consumers. But they'll allow a 10% increase - still outrageous - to appease the corporation.

Who works at these corporations? Mere cost benefit analysis algorithms?? Disgusting! Infuriating! Please defend consumers against this rate increase.

Sincerely,

[redacted]

[redacted] to: premiumrateincreases 06/24/2014 08:57 AM

Dear whoever is reading this,

Today I received a letter from MetroPlus saying that they have requested to raise my premium from $374 to $440 - that would be an 18% increase in just a few months!!! Were they lying about their rates when I signed up through NY State of Health???

I am so angry about this that I can't reasonably express it here. What good was the contract I signed? Why can't the corporations be restricted to once-a-year rate increases that are reasonable?

I can see it now, the State won't allow the 18% increase, decrying a victory for consumers. But they'll allow a 10% increase - still outrageous - to appease the corporation.

Who works at these corporations? Mere cost benefit analysis algorithms?? Disgusting! Infuriating! Please defend consumers against this rate increase.

Sincerely,
[redacted]

MetroPlus - Decline the Prosposed Premium Rate increase

[redacted] to: premiumrateincreases@dfs.ny.gov 06/24/2014 04:43 PM

Please respond to [redacted]

Dear Sir/Madame,

I received notification today that the premiums for my coverage with MetroPlus in 2015 are going up by $780.00 per year. That is more than a 20% increase. So that means that I will need to earn another $1,100.00 before tax, to cover the additional premium.

NONSENSE !

I am Not in favor of allowing such an increase and here is why -

MetroPlus has been in business for over 13 years and they employ professionally certified actuaries, and accounts, to determine the claims to be paid and the revenues collected, to run a profitable company. The CFO, John Cuda has been in the heath insurance business for more than 20 years and 13 of those years he has been at MetroPlus, according to public records.

Therefore it appears to me that they have knowingly priced their coverage low to attract first time customers, with the clear intent of raising premiums once customers sign up. I believe that is a deceptive way to run a company.

If they don't know how to price the service that they provide after 13 years, then they don't deserve to generate a profit.

They are probably banking on the fact that most customers will just pay the increase.

If they are Not granted the increase customers will not have to pay it. Maybe they will have to go back to the hospitals and renegotiate the fees they are charged. It's just easier to keep passing it along to the consumer because they cannot organize or have a lobbyist group that can push back and say No.

If the rate increase is approved, I will move to another carrier. I bet the other carriers are trying to push increases too.

Its time to stop "sticking it to the little guy".

Sincerely,

[redacted]

[redacted] to: premiumrateincreases@dfs.ny.gov 06/24/2014 10:03 PM

Please respond to [redacted]

To whom it may concern,

I received a letter stating that my premium of my metro plus health insurance will be going up to $592.64 a month. I wont be receiving any increase in my pay in 2015. So why will my premium be raised? When I am currently struggling to pay my current amount of $462.69. How is it possible to stay with the remaining rate and or how can it be lowered? If rate is raised I may have to change my plan.

Sincerely,

[redacted]

[redacted] to: premiumrateincreases 06/26/2014 08:28 AM

I just signed up for MetroPlus plan active Feb 1, 2014. Its going up 20% in 2015! This is absolutely outrageous!

I haven't had a income increase in nearly 10 years, in fact my income has decreased significantly, yet prices of insurance ***skyrocket*** every year, not to mention the cost of living.

This is out of control. I call for DFS to take strong action to oppose this increase.

Where are all these costs going! Who's profiting? Stop this madness!

Reject this increase!

[redacted]