

Wellmark Blue Cross Blue Shield of Iowa Rate Increase Comments

Wellmark Blue Cross Blue Shield of Iowa has requested a base rate increase of approximately 10.8% for April 1, 2011. Consumer and consumer groups are welcome and encouraged to read and post comments or concerns on this rate hearing website or [Twitter page \(http://twitter.com/iainsuranceca\)](http://twitter.com/iainsuranceca). Comments and concerns will be reported by the Consumer Advocate and provided to the Iowa Commissioner of Insurance during the Wellmark rate hearing prior to making a decision on the requested rate increase. The Consumer Advocates report will be presented at the January 6, 2011 Wellmark rate increase public hearing.

YOU CAN ALSO POST YOUR COMMENTS HERE!

***The Comment period will close when the Commissioner of Insurance announces her decision. ***

This entry was posted on November 15, 2010 at 9:25 AM Advertisements and is filed under [Rate Hearings](#). You can follow any responses to this entry through the [RSS 2.0](#) feed. Both comments and pings are currently closed.

443 Responses to “Wellmark Blue Cross Blue Shield of Iowa Rate Increase Comments”

Robert Hillers Says:

November 15, 2010 at 1:28 PM

I just received my notice of possible rate increase. My rate increase was well over 23% in the spring of 2010. Then I heard on the news that the CEO's and other got huge bounuses. Now they want another rate increase of over 10%! That's over 33% in a years' time! I absolutely do NOT think this is fair to us!! I feel this rate is unjust, and should not be approved. I am a dairy farmer, my prices have been very low, I pay for my own insurance! Give me a BREAK!!!

Cindy Johns Says:

November 15, 2010 at 3:28 PM

Less than a year ago I wrote to elected officials regarding the OUTRAGEOUS costs of health care!! I just received

another "Notice Of Premium Increase" from Blue Cross Blue Shield!! My current monthly premium is \$294.60 (Which was raised in May from \$234.90). They want to increase it ANOTHER \$31.80 per month for a NEW MONTHLY total of \$326.40!! This a single policy with a \$2600 deductible that has to be met first. I rarely use my insurance!! With no health problems. What can be done about this???? A person can't be without, but also can't afford it anymore. Below is a copy of the letter I sent you less than 1 year ago:

I am writing in regards to the cost of Health Insurance premiums, which are outrageous! I am a single parent. My oldest child is married and I have son that is a student at a college. My son is covered under his dad's insurance. So I just have to cover myself for health insurance premiums. I work in a practice which only has 5 employees. Only 2 of us need health insurance- the others are covered under their spouse where they work. It was going to cost MORE to buy group insurance than it was to purchase a single policy. (Since there are only 2 of us.) So along with my salary, which is \$37,000 a year (full-time), my employer gives me some money to help purchase my monthly premiums as part of my benefits. These premium rates are getting outrageous!! 5 years ago when I signed on with Alliance Select-Blue Cross/Blue Shield of Iowa, my monthly premiums were \$175 per month. That is with a \$2600 deductible that has to be met first before anything else would be covered. They keep increasing the rates every year! My rate as of Feb 1st , 2010 was \$234.90 per month and now they want to increase the rate to \$294.60 per month a \$59.70 PER MONTH increase, slightly more than 25% per month!!! The increase was to take effect April 1, 2010 but got put "on hold" till May 1, 2010. If you were to look at my health records in my clinic chart, you would be able to count on ONE hand how many times in the 5 years that I went to a clinic to see a Dr. (My health insurance does cover 1 physical per year @ 100% but other than that, I have to met the \$2600 deductible first.) So my insurance premiums have gone up 75% per month in the last 5 years. I have checked into other insurance companies who are a little cheaper, but the problem with that is there are several clinics and some hospitals that won't accept those policies. I haven't heard of any health care that doesn't accept Alliance Select. Surely there has to be something that can be done to prevent these increasing rates in premiums!!! (Or possibly even lower the rates.) A person can not afford to go without health insurance.

Thank you for your time.

As elected officials, what can you do to help stop these OUTRAGEOUS increases???

Cindy Johns
Eldora, Ia

Alan Severson Says:

November 15, 2010 at 3:33 PM

Dear Consumer Advocate,

I am writing because I am appalled at what Wellmark is doing to my health insurance rate.

I lost my job and had to buy my own insurance about a year ago...and Wellmark got an approved raise in rates less than a year ago, and now want another one...that is ridiculous!

If you give them this rate increase my health insurance will have gone up almost 40% in the year that I have had it! And I have never even used the insurance...not one single dime!

40% is unconscienable. There is no way medical expenses have gone up that much in one year. From what I have read, Wellmark had profits of 2 Billion last year in California alone.

Please stop this legalized thievery.

Alan Severson
Sioux City, Iowa

Elizabeth Lasek Says:

November 15, 2010 at 3:34 PM

To Whom It May Concern:

I would like to voice my concern for the proposed rate increase that Wellmark would like approved for 2011.

I am very aware of the rising cost of health services and treatments and know that much of my premiums do go for this. However, can our state keep taking these huge increases each year? It is no wonder that so many people go without health insurance.

My husband and I are both healthy young people. On May 1, 2010, our rate was raised from \$360.35 per month to \$422.95 per month. If this new increase takes effect, our new monthly rate will be approximately \$469.00. That's over \$100 more per month than we were paying one year previous to the rate increase!

I am fortunate that my husband and I are both frugal and can afford our insurance. However, the rate is still ridiculous! There are many people my age and many families of all ages that just can't afford these high rates.

I don't have all of the answers and I certainly don't know how to fix this problem. But, I am asking for your help in controlling these rate increases and advocating for the residents of Iowa. Our pocketbooks can't take it anymore! The higher these rates go, the more people you will see drop their health insurance. That would be very unfortunate and end up costing all of us more in the end.

Thank you for taking the time to read my e-mail. I trust that you will keep all residents of the state of Iowa in mind when you make your decision.

Sincerely,
Elizabeth L. Lasek

Steve Schell Says:

November 15, 2010 at 3:57 PM

I just received my notice of a 15% increase in my monthly insurance premiums with Wellmark. That is a \$47.20 raise per month! To me, that is extremely outrageous. I'm trying to survive on a fixed income and there is nothing that has increased 15%. Wellmark, of course, has all of their excuses all lined up to prove they are entitled to this unfair rate increase. I just don't believe a word of it; everyone knows they can make facts and figure prove anything they want. And I have absolutely no recourse, except to drop the insurance altogether. Wellmark knows we can't afford to take that step. I have no confidence that the Iowa Insurance Commission will protect the ordinary consumer— why should they? The insurance commissioner is not an elected office and is not beholden to the consumer. I would not be at all surprised to learn that insurance company lobbyists are involved; they are every where else.

The things that angers me the most is that my monthly cost is, at this point, over \$300 per month. The only thing I have used my insurance for is my yearly physical exam and a couple of labs per year to

check cholesterol levels. This is all preventive care. I even stopped using Wellmark for my medications. I actually saved them money by not using insurance for my medications. So, how am I rewarded for careful use of my insurance? I get to pay an additional \$47 per month! Isn't the way I use my insurance the way Wellmark would like to see all of their customers using theirs? Why can't I get a break for my judicious use of my insurance? This is outrageous, unfair, and unjustifiable!

This is just an example of the insurance industry trying to squeeze as much money out of the consumer before this health care law takes full effect. Shame on them.

Rich Lucas Says:

November 15, 2010 at 3:58 PM

I am writing to you concerning the large increase Wellmark is asking the Iowa Insurance Division to approve this January. I implore you to deny Wellmark such a large increase. Last year our premiums went up 22% and this year they are asking for a 14% increase! My monthly premium for a \$2500 individual/\$5000 family plan for my wife and I has gone from \$412 a month to \$502 a month this year to a possible \$572 next year if you allow them to dictate what ever increases they want while the rest of us see no increases in our income. Nearly 30% of my monthly IPERS pension will go for health insurance that my wife and I rarely make any claims on. Luckily, we are in good health for persons who are 61 years old. However, the sad truth is we are afraid to use our insurance because our deductible is so high , our out-of-pocket expenses will be too much for our budget. That is the pathetic situation our uncontrolled insurance companies have put insured citizens in! Once again , I ask the Iowa Insurance Division to deny such an extreme rate increase when times are so difficult for those on fixed incomes. I am looking forward to a response from your office as well as all state representatives and senators who I also send this E-mail to. Thank you so much for the opportunity to express my opinion.

Richard Lucas

DeLores Morris Says:

November 15, 2010 at 3:59 PM

I just got a notice my Blue Cross & Blue Shield was going up \$30.20 a month, that's \$362.40 a year, how do they expect lower income people to keep digging deeper, when there's no place to dig? My husband took early social security so we could pull in a little more money, it's funny ss doesn't increase because they say the cost of living isn't going up, apparently these people that keep raising prices don't pay any of their own bills, now days you have to have insurance but I honestly don't know how I can keep digging deeper, we are very lucky my husband is a Vietnam vet so he gets good medical care but I have to buy mine.

John Breuer Says:

November 15, 2010 at 4:01 PM

I was just notified by Wellmark Blue cross,that they want to raise my rates by 10.8% !! I strongly object!! These insurance companies, raising rates with impunity,are destructive to the economy, to company finances,and to personal finances !!

I dont see why,with all other sectors,the inflation rate is 2 to 3 percent. How can insurance rates keep going up 2 and 3 times that amount ???

Please take steps to curb this bilking of the American people,by insurance companies !

My sincere thanks ! John Breuer

Doug Calsbeek Says:

November 15, 2010 at 4:02 PM

Greetings:

Individuals with limited incomes will be opting out of insurance coverage after a long series of double-digit premium increases. Some families, maybe many, if I would venture a guess, will leave the Wellmark health insurance network.

We have chosen to insure our family through a very-high-deductible Wellmark plan, and even with that, will be paying approximately \$5,000 a year for health insurance coverage.

That takes a large chunk from our annual income, and that's not a high-end plan. That's not a plan that an employer pays for, either. And, we should not use our employers to hide the incredible increases in planning for decent health care.

We'll probably be able, I hope, to afford the proposed increase.

But, if we can't, we'll probably join the ranks of the uninsured or underinsured.

The Wellmark pool will shrink with the proposed 10.80 percent proposed increase. The Wellmark pool will shrink with a five percent increase. The costs of caring for people in the remaining pool will increase as a result, hastening, I predict, our family's surrender to the inevitable. We won't be able to pay our premiums and will have to drop out of a very good insurance program.

There has to be an alternative.

If we have to drop out, we'll probably put \$300 to \$350 a month in a savings account so we can at least approach a health-care provider, in the case of a major medical problem, with good faith and hope, hope that we'll be cared for.

The situation is getting bleaker, not better, and I'm not sure the Iowa Insurance Division can do much about it. Thanks for, at least, allowing a forum for me to express my frustrations.

Doug Calsbeek

Raymond Witzke Says:

November 15, 2010 at 4:05 PM

To whom it may concern

First off, I am extremely ***** off that your company has the balls to ask for another premium increase based on "projected estimates". I'm going to assume that none of you people are depending on social security as your primary income because they sure don't seem to think that this increase would create any hardship. And then to say that the actual premium rate increase may be more or less? We both know which way that always seems to go,

I can just see the look on my bosses faces if I were to send them a letter stating that "due to an estimated increase in food, gas, insurance, etc that I expect a 15% raise – I'd be out on my ***, as your executives should be.

Hopefully other people feel the same way I do and will let you have an earfull too.

Raymond E. Witzke

Ft Dodge, IA

Brian Applegate Says:

November 15, 2010 at 4:06 PM

Ms.Robinson,

I am protesting the recent proposed rate increase by Wellmark(Blue Cross).The last increase was an extra \$55. out of my paycheck and now they want at least \$44.50+ from me per month.

The day I received my rate increase I also received a trifold card mailing(1st class mail,not bulk) explaining why my rates are going up. Included in this is a heading as Drugs listing premium drugs,most people by now take generic drugs to keep cost down. Under a heading concerning more facts about Wellmark, it says "We're a mutual company owned by our policy holders..... well if we are?"

This card also says I will be sent more communication about health care. I think this card and the soon to be mailings from Wellmark is in poor taste,especially following a proposed rate increase!

Thank you for reading these ramblings

Brian D. Applegate

Lauri W Says:

November 15, 2010 at 4:30 PM

I am attaching copies of my rate increases with Wellmark in 2010 and the anticipated increase for 2011. Combined, it is just over 42% in two years! I am not set up through my small business, just as an individual. Last year I tried to increase my deductible but they will not let me increase it any more, apparently, I am at the cap for deductibles with this policy. I could move into a different group, but would get a policy with less benefits, I think Wellmark does not want me to have the good insurance that I have and is trying to price me out of it. I am very healthy, have never had a major illness and other than having children in the 1980's have never spent the night in a hospital. If this rate increase is not criminal, I don not know what is! My small business has been hit by the recession and last year I took no salary at all. These premiums are difficult in even good times and right they have created a hardship. There is no one on this policy but me. Please let me know what I can do to stop Wellmark from making these outrageous increases, I feel like a target with no power.

Thank you for your time and attention.

Tom Hofmann Says:

November 15, 2010 at 4:49 PM

To whom it may concern,

Received notice again of another rate increase on my Blue Cross policy.

To put it mildly, I think this is outrageous.

Having only probably had one claim in the last 30 years, I think this is a rip off. We who have jobs, and struggle from paycheck to paycheck as it is, view this as almost a criminal act. We pay more, so the minorities of this world can sit at home, ***** all day, making babies they can't afford, and we have to pay for it.

Welcome to Obamas master plan. A white, hard working person in this country has no chance.

john h. Says:

November 15, 2010 at 5:33 PM

I only hope our Insurance Consumer Advocate has this situation well in hand. Citizens of Iowa have no real alternative but to rely on you.

God love you if you understand the Obama Care impact on this entire mess.

Good luck

Rhonda S Says:

November 15, 2010 at 6:32 PM

Consumer Advocate,

I received a "Notice of Premium Increase" for the second time this year.

In April the increase was 22 percent and now the increase is 10.8 percent. This is outrageous. I called Blue Cross and Blue Shield and they said "WE can raise the premium every year". It makes me feel like they can do what they want and we can't do anything about it. It is so unfair since I have not used my insurance for anything other than an office call once a year and then I have a co-pay. My deductible is very high also. If Blue Cross Blue Shield keeps raising the premium no one be able to afford it. Please help us.

Valerie Steffen Says:

November 15, 2010 at 6:42 PM

Almost had to drop insurance with Wellmark this year due to to other bills. Will have to drop insurance now if this increase happens.

Diana Coons Says:

November 15, 2010 at 6:50 PM

Consumer was concerned about her and her retired husband that live on a fixed income. Consumer concerned because she and her husband cannot afford the new increased rate. The insurance premiums have caused a financial burden.

John Breuer Says:

November 15, 2010 at 6:53 PM

I was just notified of a proposed 10.8% rate increase !! With inflation being 2%APR, i fail to see why insurance companies need to keep jacking their rates and stifling the rest of the economy. I'd like to see their request for this latest hike,refused !!!

Jo Ann S. Says:

November 15, 2010 at 6:56 PM

Iowa Insurance Division Consumer Advocate:

Please, please, please do not increase rates for Wellmark!!

My employer dropped our group insurance plan over a year ago because he said "he could not afford it". I am now on an individual policy. My rate went up 27% last April and now I get a letter stating it will go up again next April – this time 19%. That's over \$300 in a little over a year. I have gotten no wage increase since 2008 and my hours have been cut to 30 hours per week. My premium with the increase will now be over \$1,100 a month – that doesn't leave me much from my paycheck. My husband is self employed so there is no other employer to receive benefits from.

I am starting to think I should just quit work, go on Medicaid & welfare, and forget trying to believe in working for a living. I am 61 and have worked since I was 14.

Why does Wellmark need such large increases 2 years in a row?

Help!!!

Brenda Sorensen Says:

November 15, 2010 at 7:11 PM

TO WHOM IT MAY CONCERN:

I RECEIVED A NOTICE OF PREMIUM INCREASE FOR MY 17 YEAR OLD DAUGHTERS BC/BS INSURANCE POLICY.

I CURRENTLY PAY \$175.55 PER MONTH AND IT IS INCREASING TO \$193.15 PER MONTH AS OF APRIL 1, 2011.

MY HUSBAND IS DISABLED AND RECEIVES SOCIAL SECURITY DISABILITY EVERY MONTH. MY DAUGHTER RECEIVES A PORTION OF THAT PER MONTH. FOR THE PAST 2 YEARS THERE HAS BEEN NO INCREASE IN THE SSD PAY. BUT THE COST OF EVERY DAY LIVING CONTINUES TO RISE. AND NOW THE INSURANCE PREMIUM FOR HER HEALTH COVERAGE GOES UP AGAIN!!!

I DON'T KNOW HOW YOU CAN JUSTIFY THIS INCREASE FOR THOSE ON A LIMITED INCOME. IT IS DIFFICULT ENOUGH FOR ME TO PAY THE \$175.55.

I DO NOT AGREE WITH THIS INCREASE. PLEASE PUT A STOP TO IT! THE GOVERNMENT IS GOING TO ALLOW IT SO PEOPLE CAN NO LONGER AFFORD TO PAY THEIR PRIVATE PREMIUMS AND WE WILL BE FORCED INTO THE GOVERNMENT HEALTH PLAN.

BRENDA SORENSEN

Dakota City, Iowa

Marlena F. Says:

November 15, 2010 at 7:17 PM

Please help me stop this from being approved. I just got a Notice in the mail yesterday telling me my husband Insurance is going to have a increase of 15.00% with a proposed effective date of April 1, 2011 for his policy. This will be a increase of over 63.00 more for him alone. We all ready pay just for him 363.75 month just for one policy. And have a increase of that yearly on top of this news. We just can not keep paying this kind of Premium and be able to afford to feed and house are family on top of this.

I am a foster mom that only has a part time job as a school bus driver so NO insurance is offered for me or my biological children, so on top of my husband I all so have a premium to meet and with the two we will be paying over 700.00 month just in Insurance.

Please help me stop this from passing and make Wallmark stop starving killing the little guy.

Marlena F.

Sharon Hilmer Says:

November 15, 2010 at 7:23 PM

Hello,

I just received notice of a premium increase from Blue Cross Blue Shield.

Once again it is going up \$66.50 a month this has to stop. I cannot afford to pay this health insurance. \$654.20 for one person to be insured each month. They raised it over \$50.00 a month last year. When

is enough enough? How much prophet does one company have to make? This infuriates me to no end and it makes my blood boil.

It is time for government to stop this financial raping of its citizens.

I have worked hard my whole life. Raised a family of four and educated them and they are all now productive citizens with families of their own. Am lucky to be able save \$400 a month for unexpected expenses such as car repair, house repair, taxes, etc.

I for one was thrilled that our government wants to put these insurance companies in check they get away with highway robbery.

I am mad as hell and I willing to serve on a committee or do what ever it takes to put a stop to all of this.

You tell me how it can possibly be fair to charge one person \$66.50 more per month for their insurance. They have millions and millions of customers do the math and see just how much extra money they take in and put a stop to this or their will be an uprising in America like no one has ever seen before. One can take only so much and then it is time time to take action and I for one have had...

I am willing to help put a stop to this just tell me how to help. I may have to drop my insurance if they are able to charge this much of an increase. Maybe it would be cheaper to let the government take care of me.

Hope to hear from you soon.

Sincerely, Sharon Hilmer

Linda Schmidt Says:

November 15, 2010 at 7:28 PM

I wish to challenge the proposed 2011 Wellmark base rate increase for health insurance. Forced into early retirement and living on a very low fixed income, the only policy I can afford is a high deductible. I have had no claims this year. I eat healthy and exercise regularly. Any increase in the base rate directly decreases funds available for other basic necessities like heat and electricity. When consumers like me are required to cut corners and pare down to the very barest of necessities, Wellmark should be required to reduce profits as well, instead of just pass costs on to clients. Fancy new office buildings in Des Moines don't improve health care coverage for Wellmark's clients. If policy costs continue to rise at this rate, I will soon be unable to afford any insurance at all.

Linda Schmidt

Anonymous Says:

November 15, 2010 at 7:30 PM

My husband and I just got our proposed rate increases from Wellmark of Iowa. This premium has gotten out of hand and we do not see how we can be expected to pay this increase which could be even more than they proposed. D&D H.

KMK Says:

November 15, 2010 at 7:32 PM

To Whom It May Concern,

I'm sure this e-mail is finding you amongst several others that are irate about the new premium increases. I was just curious, it says that the headquarters is moving into an "environmentally friendly" building, now approximately how much money did this new facility cost to build??? I'm guessing that this money came from the millions of dollars that are spent at the policy holders' expense. Maybe some new ways of cutting down spending need to be found by your company.

Here's an idea... Quit sending out so much crap in the mail (you know, the stuff that comes, you may or may not glance at it, then rip it up and throw it away). I'm sure all of that postage and professionally printed paper material has got to be extremely expensive, oh and extremely wasteful. Most folks have access to a computer these days, why not make everything electronic! Send out one final letter that says everything will be online from now on, explaining how much this will reduce costs (people aren't stupid, they'll understand if you draw them a picture!). Any bills that I personally receive now come through e-mail and online (with the exception of my healthcare bills, now maybe you should mention this same thing to them which may decrease their prices as well). I know it may take time to get things converted, but just IMAGINE how much MONEY this will SAVE EVERYONE!!!!!!!!!!

I have to say also, these increases, between my husband, my daughter, and I, will end up costing us an extra \$700/year. That is an extra \$700 that I'm going to have to find somewhere to spend on insurance, in a time where my husband and I aren't making near what we used to. This increase will also affect our family, see, we were going to start trying for another baby... but now I'm not sure we will ever be able to have more children, due to the fact that we won't be able to give our children the kind of life they deserve because we can't afford to buy them the things they need. It's very sad.

The insurance companies should be advocating for the people they serve, but instead, we get screwed over just so they can make money. It says on your little diagram that \$.88 on the dollar go to the healthcare providers, why should we believe that this is true? And if it is, shouldn't it be your responsibility to find a way to stop the increase in price? Not only through the company but from the providers standpoint as well. Maybe you should get a creative team together (maybe of just regular everyday people that pay your outrageous prices) to give some input on what they think would help you reduce costs so that more people can afford healthcare coverage.

To sum it all up... Get it together and figure it out.

Very Concerned,

KMK

Amy R. Says:

[November 15, 2010 at 7:36 PM](#)

Good Morning Angel;

I received a letter from my child's insurance provider of Blue Cross Blue Shield last Friday. My Child, Gabe, was enrolled in a private Blue Cross Blue Shield Policy as of November 2009 due to cost of having him on either my husband or my own insurance through our employers was too high. We originally looked into Hawk-I, but once we talked with a local agent we felt paying out of our own pocket would be the best for him. When we first enrolled we selected the lowest deductible of \$750 – at the time the premium was only supposed to be \$71 per month. Starting in December of 2009 we saw that the actual payment was \$80.05 per month – we questioned it at the time and was given a run around through the company, but in the end was told that we were quoted the wrong amount. We were fine with this and continued having this automatically withdrawn from our account.

At the end of February or beginning of March we received a letter from Blue Cross Blue Shield stating to us that due to high medical expenses that our son's insurance policy was going up \$20 per month, at the time we were not happy as he had not even used his insurance policy for any medical

expenses. Again we called Blue Cross Blue Shield and basically given another run around with no answers as to why his went up. Again since there was nothing we could do, we did not cancel the plan as our child's health is the utmost concern to us.

On Friday November 12th we received yet another letter from Blue Cross Blue Shield that in April of 2011 his insurance would be going up almost \$10 per month due again to medical expenses. Gabe was seen at a Doctor's office in August but has not had any other medical visits either in hospital or through the Doctor's office. We have paid to Blue Cross Blue Shield since November of last year a total of \$1162.45, his visit to the Doctor was our co pay of \$19.60, BCBS paid \$72.40 and of course got a discount of \$6.40. I could understand the premium going up if my child was seen a lot by Doctors at either the hospital or their office and even including pharmacy expenses, but \$72.40 is how much he cost them within a year. If premiums do go up I would like a detailed explanation from Blue Cross Blue Shield explaining why and showing how they figure this. Also instead of the run around I've been getting - I would like to know if this is going to be the trend with them every year.

Thank you

s.nielsen Says:

November 15, 2010 at 8:05 PM

What do you want? blood, my first born, half my income??? give us a ***** break, every year I have seen my insurance go up and I havent used it, last year was more than a hundred a month. when will the insurance companies be happy? im sick of working my ass off and watching a bunch of fat cats work 20 hour weeks and play the golf course the rest! GET A REAL JOB!

i.m.tired Says:

November 15, 2010 at 8:36 PM

crooks, polititions, lawyers, insurance salesmen and companies, doctors, dentist....you all rate as high as a leach

Jim B. Says:

November 15, 2010 at 8:06 PM

I was just notified by Wellmark Iowa that they want to raise my health premium from \$642.35 per month to \$724.65 per month. Their claim that they are asking for a 10.8% increase is a misstatement of facts. They desire to raise my premium 12.8% and that will obviously be a hardship to me, as my income, working two jobs, is only about \$30,000 per year.

I request that you deny their request and disallow their "right" to charge such a large premium increase. Since my income is not rising by 13%, I don't think theirs should either.

Please let me know what we can do to stop such abuse.

Jim B.

Mike S. Says:

November 15, 2010 at 8:08 PM

I understand the need to increase premiums from time to time. I wonder when the last increase happened. The article said Wellmark was asking for an 10.8% increase The notice I received said that my premium was going from \$402.75 to \$463.55 That is a 15% increase. There is no explanation on why my increase would be higher. Does that mean there are other people premiums will be lower then 10.8%.

The other concern I have is that Wellmark indicates their Administrative cost is 8% They also indicate that commissions are 4.3% To me these figure should be added together under administrative cost which would then be 12.3% which in my opinion is at least 2.3% too high

Thanks for your assistance

Mike S.

Martin B. Says:

November 15, 2010 at 8:09 PM

TO: Iowa Insurance Division Consumer Advocate

I just received my proposed rate hike (effective April 1, 2011) with my Wellmark Blue Cross/Blue Shield medical coverage and am shocked at my new rate. The letter states that Wellmark has asked for a 10.80% increase. But my proposed rate is 34.9% higher!

My present monthly premium is 693.40 and they are proposing a 242.50 per month increase, bringing my monthly rate to 935.90. This is outrageous! PLEASE intervene on this new proposed rate and help me out here!

Martin B.

Mark E. Says:

November 15, 2010 at 8:11 PM

To Whom it May Concern,

I just today got the information about the proposed premium hike in my health insurance in today's mail and need to express my displeasure.

Under the question "Why are my premiums going up?", the first reason listed is that people are using more medical services because of chronic conditions such as obesity and diabetes. That frustrates me greatly. I work out 6 days every week, watch my diet and try to live a lifestyle that minimizes opportunities to see a doctor. Why isn't that "rewarded?" Instead, punishment is handed out through increase premiums because of the lifestyle others "choose" to live.

I strongly believe that the customers of Wellmark who work at keeping themselves fit should be given "reductions" in their premiums.

Mark E.

Stacy Says:

November 15, 2010 at 8:12 PM

Iowa Insurance Division,

I recently received a notice that my Wellmark premiums may be going up again April 1, 2011. My rate will be going up 10.80%. I already find it hard to pay my premium each month, and this proposed rate increase has me worried I will no longer be able to afford the insurance. My specific plan (for a healthy 24 year old female) started two years ago at \$199 a month. My insurance is self-paid, not through work, and so the expense is felt more. Last year my plan increased to \$270 a month. This put extreme pressure on my finances. Now they want my premium to be \$336 a month. A \$137 a month increase over just two years on this plan seems crazy. I understand that costs for

Wellmark may raise, but I can't imagine how they would raise so quickly and by so much a month. Had I known that my premiums would get so unmanageable, I would have gotten insurance somewhere else, or either forgone it entirely. In short, I believe that an increase of 10.80% is ridiculously high and in these tough economic times creates even more of a financial burden not just for me, but for many other people.

Thank you,

Stacy

Riniker Says:

November 15, 2010 at 8:13 PM

I am against another premium increase for Wellmark.

They were just increased earlier this year.

It seems all this company does is raise the premiums.

Of course that is the game, Suck the customer in at an affordable rate and then have increases there after.

I guess it is time to start looking for a different policy soon.

At this rate of yearly increases, I won't be able to afford insurance from Wellmark.

What happen to the government insurance that was suppose to keep our premiums affordable for everyone?

William Says:

November 15, 2010 at 8:16 PM

PLEASE DO NOT ALLOW ANY INCREASE OF RATES TO BLUE CROSS AS I DON'T WANT TO PAY FOR THEIR OFFICES.I AM ON A FIXED INCOME S.S. 1435.OO. WHAT THEY WANT IS UNREAL FOR PERSON IN MY SITUATION. I CAN'T CHANGE COMPANIES CAUSE OF MY HEALTH. I PAY 570.00 PER MONTH AND THEY WANT ME TO PAY 680.75 WHICH IS A 16% INCREASE. ANY INCREASE WILL CAUSE ME TO DROP MY INSURANCE, JUST CAN'T AFFORD THAT MUCH. IF SOMEONE THERE HAS ANY IDEAS PLEASE CALL ME, I NEED HELP ***** I WILL BE 64 IN FEBRUARY OF 2011 AND NOT OLD ENOUGH FOR MEDICARE YET. I HAVE NOT EVEN HAD A COST OF LIVING RAISE IN TWO YEARS BUT THEY WANT 16% RAISE.

THANK YOU

William

PLEASE HELP ME IF YOU CAN.

Richard Says:

November 15, 2010 at 8:18 PM

I live in West Burlington,IA. I cannot attend the meeting on January 6th in Des Moines.

I have been unemployed for 16 months. For the last 14 months, I used my Cobra Insurance benefits. I signed up for this plan because I needed insurance and the premium was affordable. But now two months later, you are increasing my premium! I am struggling to pay all my bills and this premium increase will just add to my burden.I realize you are a HUGE COMPANY! But I am a single individual trying to met all my financial obligations. I protest this premium increase.

I hope Wellmark will take my circumstances in consideration.

Thank you,

Richard

Denise Says:

November 15, 2010 at 8:19 PM

Having received a notice from Wellmark of Iowa, concerning premiums to be raised in 2011, I am appalled that this is being allowed to happen, AGAIN! My sons insurance premium was raised by about \$13 this year 2010 and now it is to be raised \$13.60, in 2011. We have no improvement in service for these raises and there seems to be little control to stop these companies doing as they please. The Co- Pay on his prescriptions is as high as \$40 and it seems that despite having this insurance, I am constantly paying out of pocket each month.

I would like to put out my opinion that this should not be allowed to happen and that as a consumer of Private Health Care Insurance, I object in the strongest possible way.

Denise

Gail Says:

November 15, 2010 at 8:20 PM

Dear Iowa Insurance Consumer Advocate,

This morning we received a notice from Wellmark that our premium would be increased. In the letter, it states that the increase is "approximately 10.80%." In reality, the increase is well over 30%. Our current premium for 2010 is already an absurdly high \$1128.60 and the proposed increase is \$322.30, bringing our monthly premium to \$1450.90 and yearly premiums to a whopping \$17,410.80. In 2004, our monthly premium was \$609.80. In the past 6 years it has almost doubled and, if this proposed increase goes through, our premium would have increased over 170% in 7 years.

We are two healthy people, ages 48 and 54 with no children. It is ludicrous that we may need to spend close to \$20,000 a year for health insurance! What can we as consumers do to fight this? Please make sure this rate increase is not allowed to happen.

Sincerely,

Gail

Karl Says:

November 15, 2010 at 8:24 PM

I am writing to protest the attached proposed premium increase.

If the proposed premium of \$1450.90 is allowed, our premiums would have increased \$583.40/month since 31 March 2009. I have a pre-existing condition that is currently covered.

I am grateful for that, but in 2002, our premiums were 390.50. I understand that costs have spiraled, but we don't have maternity coverage/children and many services we use are not covered.

My wife and I are both self-employed. We can't take much more of this. We pay our share, we don't abuse emergency room services and we don't have dental or optical insurance.

Give us a break.

Karl

Cynthia Says:

November 15, 2010 at 8:25 PM

Rec'd in mail today, proposed rate increase for Wellmark. I am paying the monthly premium for my daughter that is in college. They are proposing an increase of 42.70 a mo. I am paying 151.25. I think this is terrible especially with the economy the way it is. I hope Iowa can step up to the plate and say no way will we honor this. Thank you for your time.

Bill Says:

November 15, 2010 at 8:26 PM

I urge you to deny Wellmark's proposed premium increase.

This increase, on top of the last one, will result in a 33% increase in the rate they are charging me. This is unconscionable!

I have certainly not have had an increase in my income approaching that amount, nor do I know of anyone who has. I am doubtful that I will even be able to afford health coverage if this increase is approved.

Thank you
William

Deborah Says:

November 15, 2010 at 8:29 PM

Hi Wellmark,

While I can appreciate the rising cost of "medical care" – I say, call it what it is, as it is not generally "health care," my family may have to forgo health/medical insurance all together. Our income cannot keep up with the rising monthly premiums. Already we have a high, high deductible.

We have a residential rental property business, but there is no possible way we could raise rents enough to cover a \$200 +/- premium increase.

Yes we are 60, but our real health insurance is being able to purchase good fitness shoes, swim suits, goggles, bicycles, helmets, memberships at our local Park and Rec center. Or buying into our local CSA. Paying the fees to enter 5Ks or triathlons. As a matter of fact, I bettered my time from last year in the September, 2010 U of IA Trihawks Triathlon. Brought home the medal for women 60-65 y.o.

My husband and I have liked our Blue Cross plan for the peace of mind of a major medical incident, but we are now faced with possibly canceling our plan. Could there be a reward, financial incentive, or pool for people who intentionally pursue healthy lifestyle choices – the equivalent of a good driver discount?

What can you offer?

With sincere wishes for good health to all the people in the State of Iowa and beyond,

Deborah

Bryan Says:

November 15, 2010 at 8:31 PM

To Whom It May Concern;

Here we go again! I just got home after a 14 hour work day, which I put in 5 days per week, then Saturday and Sunday I put in 6 hour days for a total of 82 hours per week that I work to keep my

business up and running. In the last 5 years that I have had insurance through Wellmark Blue Cross & Blue Shield, my premium has more than DOUBLED! During that same time I have only used my insurance 1 TIME, in which little of my doctor's expenses were even covered. I pride myself on living an extremely healthy lifestyle and personally require very little medical care at this point and hope in taking as good of care of myself as I do, I will continue to require VERY LITTLE HEALTH CARE! Yet, on my letter I receive, it states that my premium will go up because of "projected increases in use of health care services."

Now, explain to me how someone who has paid over \$10,000 in the past 5 years for a high-deductible policy and has received \$300 in payments towards medical expenses can have a projection of "increases in use of health care services!?" My auto insurance is minimal because of my spotless driving record and each year it continued to decrease until now, since I have met the deemed, "minimum payment" from the insurance company. Yet for my health insurance, I continue to be punished on an annual basis for a service that I never use!

The final straw has been drawn this year because I have seen a 20% decrease in business revenue, yet all the "deemed necessities" of electricity, natural gas, health insurance continue to go up at 10%, 20% and 30% rates or more. At the same time, I see their top executives getting \$700,000 or more bonuses on an annual basis. Now, if you need to raise rates because of "cost of business increase," then why are there executives receiving 6 to 7 – figure bonuses, when most people are currently taking pay cuts!? I feel it should be the Iowa Insurance Division Consumer Advocate groups job to make a stance against these hikes and make the insurance companies think twice about paying ridiculous bonuses than more than 95% of us make in an entire year of longer hours of work.

Bryan

Anonymous Says:

November 15, 2010 at 8:43 PM

I just received notice of another rate increase even though my rates just went up in April. I am retired and I have a fixed income and I can not afford an increase.

Wellmark has a new building that has to be paid for and some of the expense has to be passed down to the policy holders. I resent having to pay for a building when I can't afford a premium increase.

I think its terrible and crazy.

Please do not approve the rate increase.

Judy Says:

November 15, 2010 at 8:45 PM

I am writing this letter to complain about your rate increase..Last year it was \$96.00..this year it is \$44.20..For the last 8 years since the company I worked closed..I have worked hard to keep my insurance..every every year it goes up not a little but allot...do I get raises no...this is so unfair of you...your milking the American people ..You build a building that cost \$250 million and I have to take on more work just to try and keep insurance... I don't even go to the doctor because even having insurance I end up with a large bill..I have not had a breast x-ray or gone to the female doctor. in years....How do you sleep at nite..and if I do go to the doctor I have to worry that if I ask about a sore knee..if I drop my insurance and try to get another.I hear you have a knee you complained about so now you have a joint problem..gee your not covered...so don't go and ask or have a problem because then they won't cover you...I tried to get on a cheaper Blue Cross group...I

have one joint that has a problem...now I have joint problem so all joints are not cover and my back...I have never and I mean never had a problem with my back. In the ..Last 5 years I probably have not gone to the doctor more then 3 times a year...I have insurance but yet I don't...pretty soon people are going to get so tired of your raises and conditions that they will go with out insurance...I would now in a heart bet...I am so tired of your raises...I don't even get a raise...I am trying to survive...stop raising our rates...give us a break...just once...A building that cost \$250 million you have allot of nerve....

Judy

i.m.tired Says:

November 15, 2010 at 8:48 PM

ok. ok. I will leave out the f word....what do you ***** want? do you want my firstborn? my blood? or just half my income? last year you raised my rates by a hundred a month, and I dont think I used my insurance at all! I think all of us are getting tired of working our ***** off so you fat cats that sit behind a desk can have your twenty hour work week with another twenty hours of golf course time. GET A REAL JOB! one that pays 25 grand a year instead of 75

Sam Breeden Says:

November 15, 2010 at 8:50 PM

Wellmark,

I just had an increase in rates, why do I have another one? how much money do you have to make. Since you are so greedy, I'm shopping around for insurance, because I can't afford to stay with you.

Sam

John Kommetler Says:

November 15, 2010 at 8:53 PM

Raising rates again after rates were raised this year? Its too much! Please disallow the 10.8% rate increase. I live on a fixed income and I hardly ever use my insurance. People cannot afford this and I don't believe in Wellmark's pool system. I might have to drop my insurance because I can't afford it anymore.

John

Beverly Says:

November 15, 2010 at 9:37 PM

I live on social security (a fixed income) and I can not afford this rate increase. My increase is of \$75 after my rates just went up this year already. What happend to Obamacare? I thought insurance was supposed to become affordable, but I don't think this is affordable. Wellmark should not get thier rate increase approved.

Janet Lampe Says:

November 15, 2010 at 11:44 PM

This is absolutely ridiculous. The policy we have with you is for an 8 year old girl that has gone up this last year with a huge increase and now you are going for another increase? I know there is some kids that are very sick and we are blessed to not have health issues BUT I highly doubt that the 3-4 times a year at best for either a UTI, cold or what not is killing your budget. Why punish the people who do not use the insurance as much as others? PLUS we pay the co-pay, you get a write off and you pay LESS then what we pay. That does not justify an increase. I hope the Insurance Division

inspects every aspect of this business and starts to take care of the people in Iowa who work hard for their money and are tired of the insurance companies taking advantage of them! This needs to be stopped!

C.L. Says:

November 16, 2010 at 10:30 AM

Please do not allow another rate increase to our Wellmark Insurance. We cannot purchase other insurance due to previous health conditions and are being held hostage by Wellmark. Our current policies cost \$1,154.30 per month. A rate increase of another \$127.40 is outrageous. With the proposed increase we will be paying \$15,380.40 per year. Where will it all end? I went for a yearly physical and was denied benefits. Another \$191.00 out of my pocket. If I had my life to relive, I would definitely become an insurance executive so I could sit back and rake in the money. Who else has a license to steal? Perhaps Wellmark should consider a name change to Scrooge of Iowa as they seem to have no problem playing the part.

Christine Says:

November 16, 2010 at 12:34 PM

Please do not allow this rate increase!! I urge you, to deny the increase! Rate hikes at this pace are greedy. Where can we find the list of how much people are paid and their bonuses at Wellmark? Also the actual items they deem necessary as expenditures? Give me a break and quit making excuses for the new Des Moines building. A true advocate for us would be asking many, many questions and making the insurance company answer each and every one. Again, please DENY this rate increase. Christine

Tom Says:

November 17, 2010 at 3:01 PM

I am very upset with this recent raise in my insurance premium. This is bull. Plain and simple. You raise our rates and raise them again. My premium used to be affordable. I understand that it is difficult to do what you do but really? My rate was just raised a year ago. Stop with the crap and leave it alone. I mean a 10% raise? Come on. I am very disappointed with this company.

A very disappointed customer.

Tom

William Says:

November 17, 2010 at 3:41 PM

I am writing to express my concern over the proposed rate increase by Wellmark. I feel Wellmark is misleading you and the public by announcing the increase is 11%. I currently have an HSA account with a several thousand dollar deductible designed to keep rates low. I currently pay \$396.00 per month the policy which just covers me and one son. They are proposing a rate increase of \$178.00 per month which is a 45% increase. I feel like this is outrageous and I'm wondering how much of this they are trying to cover up by announcing an 11% increase. My wife has a policy of her own and they are proposing a 20% increase on her. That means I'll be paying 65% more in health care premiums. I understand the concept of pooling, but size of increase is too much. They have never paid a penny on my policy since I've had it due to the large deductible and the policy is designed to keep premiums low.

Please consider denying this dishonest request by Wellmark.

Thank you

Rhonda Nelson Says:

November 17, 2010 at 4:27 PM

Please say no to the rate increases asked for by wellmark. We have had raised for the last 8 years and finally...we no longer can afford this last increase. I have always said we need our insurance...now we need help with the premiums. We, my husband and I are paying over \$800.00 a month..and we are healthy people. My husband had NEVER used his policy and his increase is \$100.10 a month. Why soooo much. What has happened to 'affordable' healthcare in this country. I am deeply saddened as I feel just as we should be getting ready to retire in a few years, we will be going into out late 50's with no healthcare..Sad..

Patricia Says:

November 18, 2010 at 9:23 AM

I recently received information that my Blue Cross / Blue Shield family insurance premiums will again be increasing – for the 2nd time in less than a year. The letter stated that these increases are based on PROJECTED increases in medical claiemes expenses. I am horrified that this insurance company continues to take advantage of customers like myself. I have been a loyal customer of Blue Cross Blue Shield for the last 20 years of my life. If this increase is approved, I will drop Blue Cross Blue Shield and find another carrier.

Peggy Says:

November 18, 2010 at 9:26 AM

I just received an outrageous notice for another rate increase. I have only been with BC/BS since Jan. 2010 and this is my 3rd increase!!! I am a small business owner in a small town and this is unaffordable! I will now pay \$410/mo. and it doesn't seem to even cover anything—I had to pay out of pocket for a mamogram, flu shot, lab work, etc. This is almost a \$600/yr. increase!!

This rate increase is unacceptable. No wonder so many people go without insurance. I don't want to be one of those people but I certainly can understand why so many people are uninsured.

Please feel free to pass my comments along to the appropriate parties.

Frank Says:

November 18, 2010 at 9:30 AM

Complaint: November 15, 2010

Susan Voss,

Iowa Insurance Commissioner

Dear Susan,

I just received another announcement of increase in my Wellmark Health Insurance of 31% to take effect in April of 2011. I don't like but I can afford it. I write for those who are sick and dying.

This year Wellmark CEO John Forsyth will make 2.4 million dollars for failing to meet his most basic job responsibility – to work for reasonable and responsible rates for their customers. Yet, we have given Wellmark the privilege of the tax breaks afforded to non-profit public benefit organization in Iowa. Where is the public benefit?

American medicine has become a joke – often unsafe and largely ineffective – led by men and women making 10 times more than the people they serve.

Looks like greed – plain and simple.

I am ashamed of my state.

I am ashamed of my country.

As a people, I am ashamed of what we have become.

I appreciated you calling me earlier this year and reviewing the Wellmark Increase when we had an outrageous rate increase of 19% on my Wellmark Health Insurance in May. I talked to Governor Culver, Lieutenant Governor Judge, Senators Grassley and Harkin and Iowa Senator Tjepke and everyone thinks its an outrage and no one has suggested that they have one single realistic thing we can do about it.

Any ideas?

Do you think that you will serve Branstad? If not, it might be a wonderful opportunity to go out in a “blaze of glory.” I think the Register and the NYTimes and Washington Post would publish your opinion.

Frank D Wiewel
Founder and Volunteer,
People Against Cancer

Terry Says:

November 18, 2010 at 9:33 AM

Three years ago I had insurance with Blue Cross/Blue Shield. The coverage included the usual health care and prescription drugs, plus vision care and dental. I was happy with the insurance even though I felt the premium was quite high. It had risen 198% in just 5 years. Then I got the notice about another proposed increase – 18%. Needless to say that pushed me over the edge and I started shopping for different insurance. I found a different policy and enrolled. The new policy didn't include vision or dental care and the deductible was 200 times higher than the previous policy. But the premium was affordable, half of the proposed increased rate of my BC/BS. The new policy was also BC/BS (Wellmark) but I figured the difference in premium was due to less coverage and higher deductible. I was looking for a policy that covered catastrophic illness and this one foot the bill. My savings would more than pay for my annual visit to the dentist and optometrist.

I've retained this policy for two years. During those two years I've visited my doctor twice and I use the prescription coverage for medication every three months. Drugs usually cost me \$8 every 90 days. Once I went to refill the prescription early and was informed insurance wouldn't pay unless I waited another week. Asking how much difference I would have to pay I was surprised to find I only needed to pay another \$2 rather than come back in seven days. My insurance was saving me \$2 every ninety days.

Beginning the second year of this policy my premium was increased by 18%. Just today I received the latest notice of increase, bringing the two year increase to 37%.

I don't begrudge a company making a profit. And I read the pamphlet from the insurance company explaining why rates are going up. But honestly, is there any other service, or commodity, that has risen 37% in cost in less than 2 years? My food bill hasn't, nor my heat bill or gasoline price. Not even the price of gold has risen as much. My latest doctor bill was within a few dollars of the previous one

(still under \$200) and the aforementioned drug cost is exactly that of two years ago. Considering I cost the insurance company less than \$250 annually I feel my \$4800 in premiums is sufficient. Diabetes, obesity and the other health issues listed in the insurance company's pamphlet most certainly cost considerably more than my personal drain on the insurance companies bank account. I believe the insurance companies should be able recoup those expenses and make a reasonable profit. I also agree that insurance is a pool into which all participants contribute for the benefit those who require the coverage. However I don't agree that historically healthy individuals, that contribute thousands annually to the pool yet draw little or nothing in return, should be penalized by the abhorrent increases the insurance industry is promulgating. If costs are exceeding revenues then those who are creating the costs should be shouldering the majority of the burden. Wellmark says 88% of my premium goes to paying Health Care Services. In my case it's only half of one percent. I wonder how many Iowans actually have medical bills that exceed their annual premiums. Perhaps these people should be in a "pool" of their own.

I eat wisely, watch my weight, cholesterol and blood pressure. I do smoke and understand an insurance company charging a higher premium for me than a non-smoker. I can only presume that an obese person who smokes and has diabetes pays an astronomical monthly premium.

The exploding cost of medicine, described in the pamphlet, just doesn't hold water. Are we to believe the medical profession has experienced annual inflationary costs in the double digits, while those on Social Security are denied a COLA under the guise that the economy is anemic and costs haven't risen during the past year. Should we believe that every other industry in this country isn't paying more to their suppliers, yet are able to maintain with only modest increases? Why is it only the health insurance industry is experiencing this massive inflation in cost? My experience doesn't point to my doctor or my pharmacist.

The pamphlet named 5 prescription drugs as an example of rising drug costs. A 30 day prescription ranged from \$108 to \$189. The pamphlet then alludes that the insured pays only \$30 and the company picks up the balance. I can easily agree with Wellmark's example. But when the insured is already paying \$400, or more, each month in premium costs it would appear the insurance company has plenty of monies to pay for admin costs, commissions and taxes.

I would encourage the Iowa Insurance Commission to examine VERY CLOSELY the need for another double digit rate increase.

Barry Says:

[November 18, 2010 at 9:34 AM](#)

Last year Wellmark raised my health insurance premiums from 477.30/mo. to 747.80/mo.. Now they are being raised again to 832.50/mo.. That is 74.4% over a two year period. Isn't there some sort of regulation that should be applied here? If not, there is no need to respond to this email.

Becky and Gregory Says:

[November 18, 2010 at 9:35 AM](#)

My husband and I have insurance with Blue Cross Blue Shield of Iowa. We have recieved notice of a price increase on April 1, 2011. This increase is a total of \$86.80 a month. We now pay a total of \$701.15 total each month with a high deductible. I have a full time job and have taken on a part time job to keep up with our bills. My husband has a full time job plus an acerage where we have livestock. If this rate increase happens we may have to give up our insurance coverage and pray that no serious health problems come up for us. It is hard enough for us to pay the premium that we have now.

Our son also has an increase shown of \$17.00. Right now he is in no position for an increase on his insurance plan.

We are in an economy that can not afford this price increase!!

We are asking that you consider NOT letting BCBS of Iowa have an increase in premiums.

Denise Says:

November 18, 2010 at 9:37 AM

Hi, I'd like to know how insurance companies expect us to pay these prices every year? Do you want us to drop our ins. Coverage so you don't have to pay claims anymore? My husband and I have five kids and really need the coverage. It takes my husband 1 and a half weeks per month to pay this off. How the heck can you do this to us? Why don't you look at what the top people are making in these insurance companies. I'm sure they are making millions and have huge elaborate houses they don't really need. Give us a break!!! Our world needs to think more about love and family than making more money. Maybe more ins. Companies should be pushing natural remedies as opposed to DRUGS DRUGS and more Drugs and then maybe we would see premiums decrease. Maybe ins. Companies need to go after the drug companies and all the companies making vaccines, because we sure don't need all those either. Please try to help us out, there has to be something you can do.

Martha Says:

November 18, 2010 at 9:39 AM

Wellmark is seeking another premium increase on individual policy owners, the eighth double digit increase in a row. I run a one person business and am in excellent health. I'm thinking about cancelling my insurance policy. Wellmark complains that they must raise rates because of healthy people dropping out, but healthy people like me are dropping out because of these increases. It is counter-productive and will only exacerbate the problem they claim to be addressing. Please do not give them a rubber stamp yes. Please help keep my premiums stable so I can maintain my policy.

Bert Says:

November 18, 2010 at 9:51 AM

I just wanted to let you know that I believe that the rate increase proposed by Wellmark BC/BS is outrageous. Apparently they are asking for a big increase hoping they can settle for less. The rate I already pay is a huge burden on my family. I hope you will resist any increase at all.

Dennis Says:

November 18, 2010 at 9:52 AM

I have a few questions in light of your intention to increase rates in April of 2011. I certainly understand that increasing costs of providing service are a large culprit in health care rates. I would ask, however, that you answer the following:

- (1) Does Wellmark/Blue Cross own a private jet?
- (2) If so, please demonstrate to me how owning the private jet is less expensive than flying commercially when necessary.
- (3) Do you hold your high level meetings by conference call or do you send the jet or pay airfare to get everyone to the meeting?
- (4) What are the top level executives at Wellmark/Blue Cross paid annually?
- (5) Do they get paid bonuses, and if so, how much?
- (6) Explain to me the commission structure for an insurance agent who sells your product. I know

that in my case, I have little, if any, contact with the agent after the policy is written. Are the agents paid a renewal commission and, if so, how much and for how long?

(7) What are we doing to educate users of health services to do so responsibly?

(8) What are we doing to penalize people who abuse themselves physically and use health care services in an abusive manner?

Carol Ann Says:

November 18, 2010 at 9:54 AM

I am emailing you to carefully consider Wellmark's proposed premium increase for 2011. In the notice of premium increase letter, the increase in my husband's premiums would be 15%. This is above the approximate percent increase by over 4 %. Last year the actual increase was about 25%, also well above the approximate increase initially given.

We are in the early 60 age group and this seems to work against us. Because of back and stomach problems over 10 years ago, my husband already has riders on his policy. However, he has had very few claims the last 3-4 years and is not on any daily prescription medicine. It seems this history should be taken into account as well.

Please note that we are strongly opposed to such a large increase in our premiums, especially after last year's large increase. The premiums seem to continue rising and rising. The insurance company should continue to look at ways to keep the premiums down without jabbing us with high premiums.

Thank you for your time. I hope that this letter has an impact on your decision.

Rick Says:

November 18, 2010 at 9:55 AM

I would officially like to lodge a protest to the proposed 36 percent increase in my Blue Cross, Blue Shield health insurance premium. It seems way over the top to me. I currently pay \$1,397 a month for insurance, and under the proposal I received Nov. 15 that would increase \$502.80 to a total of \$1,899.80 per month. That's an insurance premium of \$22,797.60 PER YEAR which seems absolutely ridiculous. Should my entire paycheck go toward health insurance?

Max Says:

November 18, 2010 at 9:57 AM

I just received a notice of my Insurance premium increasing \$42.90 per month. My premium increased NOT LONG AGO!!!! Insurance companies keep

increasing our premiums and Iowa Insurance Division keeps letting them do it. I STRONGLY URGE YOU NOT TO LET THEM INCREASE OUR

PREMIUMS THIS TIME!!! I have not have any major illness or any major claims since I've had this insurance years ago and yet my insurance keep going up

every year. It's unfair for Wellmark to keep increasing my premium. I'm 47 years old & currently paying \$400.40 per month. I'm not in any high risk as far as

my health is concern. I don't normally write to urge any part of our government to stand behind the citizens of this state. I'm not political by any stretch of the imagination. Please do not let them increase our premium this time. I'm a business owner I don't get to increase my services every year. Why do you think

it is justified for Wellmark to increase their premium with such frequencies.

Please don't let them!

Theresa Says:

November 18, 2010 at 10:00 AM

We received notice again of another rate increase. We are not talking a couple dollars we are talking nearly a hundred dollars and we increased just a little over a year of over 100.00. When are we the people going to be heard that we are BROKE we can't afford another increase of insurance. We are middle age people that are trying to make a living and the insurance companies just like all these big companies want to suck the life right out of us. When will the madness stop! Please Please vote this down we don't need another increase. Please step up and say enough is enough. Show the world that we the people have spoken and we can't afford any more increases. It is us that need to make this economy turn around. And it needs to start here!

VOTE NO!

Joseph Says:

November 18, 2010 at 10:02 AM

Please find my comments for the proposed rate increase by Well Mark of Iowa

I am 64 and have had the insurance for approximately one year. My current premium is \$408.65 a month with a \$2,500.00 deductible. I have hardly used the insurance and I know they have paid very little whatsoever.

Now they are asking to increase my premium to \$469.55 per month which is a 14.9% increase.

The Notice of Premium Increase says that the proposed premium increase is 10.8%. I wonder how mine is much higher. Obviously, they are raising some well under the 10.8% to make up the difference.

I could certainly understand this type of increase if I was using the insurance but I have not. This obviously is one of the reasons why the economy is doing so poorly.

You take another \$723.00 away from my disposable cash and wonder why people are not paying as much.

I am self employed and pay for my own insurance. Someone needs to look at this much closer than some increases from doctors and hospitals. They seem to be doing very well.

I strongly urge you to fight a increase of this size to someone who simply can not afford it.

Thank you

Molly Says:

November 18, 2010 at 10:04 AM

I am writing in to tell you my comment on the proposed premium rate. My rate will have gone up twice now(if this one goes into effect) in 2 years. I am extremely dissapointed. We budget our money so carefully and have just recently switched our plan to the most cost effective plan structured to our needs. If my plan goes up the proposed \$43.10 I will discontinue my service with you and find someone more affordable. I feel like I shouldn't even bother looking at the proposed rates before I

sign on a plan with you as it won't stay that way anyway. Very dissapointed to hear about this notice of possible premium increase. I have defended you to my husband a few times now and don't have any more stamina to defend you any more as I am starting to agree with his anger over your rate changes. Thank you for taking the time to read this and I do truly hope that this will have some bearing on your decision as I know there must be thousands of others in my shoes.

Donna Says:

November 18, 2010 at 10:06 AM

To Whom It May Concern:

I am writing to protest the insurance rate hikes proposed by Wellmark of Iowa.

We are a self employed family and maintaining insurance coverage is a huge burden on us. Wellmark raises our premiums every year without fail. Our premiums go up but our wages stay down. We own a small plumbing , heating & A.C. business in a small town, and for us to raise our wages (like Wellmark does) would put our customers in place where they could not afford to stay warm, stay cool, or have whatever work they needed done to be done.

If Wellmark needs this extra income, maybe they should not have built that big beautiful new place they call "home". I think it is absolutely insulting to ask US to pay more every month when they obviously are more interested in maintaining an extremely high-end office building. I know they say that the money to build that did not come from consumers. If that's true, why didn't they take the money used for that extravagant building & put it towards HELPING Iowans & LOWER our premiums?

If Wellmark gets permission to raise its premiums, we will have no choice but to drop them as our carrier. My husband has heart issues and getting him covered by another company may be nearly impossible, but we CANNOT afford to pay \$70.20 more each month for health insurance.

PLEASE tell Wellmark enough is enough! No more rate increases!

Karen Says:

November 18, 2010 at 10:07 AM

I am writing in response to a flyer received today notifying us of a proposed rate insurance on our Wellmark Blue Cross/Blue Shield insurance coverage effective April 1, 2011 if approved.

I am terribly distressed at this news. My husband and I retired in March of this year and he enrolled in the Transitions product as he was denied coverage under other products offered due to a preexisting health issue (which by the way hasn't been a concern for him for over 5 years but will follow him insurance-wise forever it seems). We knew this coverage would be a bit higher than other plans but recognized it was vital he have coverage. Right after the coverage became effective we were immediately hit with an almost 25% premium increase which was a significant amount and impacted our fixed income and budget dramatically. Luckily I have been able to pick up part-time job which helps with this increase, but to now tell us we may be dealing with the same scenario in a few months is very unsettling. We are trying to do the right thing but using coverage only when necessary, taking care of ourselves, etc. but when we hear news like this it is very frustrating. It seems as though there is a deliberate attempt to price people out of the coverage. I'd often heard about people having to make life choices due to health insurance/medical costs, etc. and find I am likely to be one of those folks. For those people without employer paid health insurance coverage, and purchasing their own, to continue to stress them financially with these annual increases can be

shattering and life altering with no way to cover the increases, especially for those who are retired or unable to create additional income to cover the cost increases. I would hope you would actually consider these real life situations, the impact of premium increases to people you probably know and care about, and make decisions that are fair and morale and not just in response to numbers on a piece of paper. Your choices should include as much care as caution as we are being asked to take in our health care usage and decisions. Please NO NOT burden those unable to absorb it with another giant rate increase. It would not be fair or right and would in fact to great harm.

Vickie Says:

November 18, 2010 at 10:09 AM

This email is to express my EXTREME OPPOSITION to Wellmark's request for a 10.80% rate increase in insurance premiums. How LUDICROUS!!!! Last year the increase was 13%!!!

If the Iowa Insurance Division approves this request, then something is really WRONG. Our economy is in the toilet and it's not getting any better. Many people are still unemployed. It is hard to fathom why Wellmark thinks they have the right to request such an increase, especially when they award themselves (and I am talking about the CEO and Executives) with pay raises and bonus payouts which were indeed paid out in 2009, yet the employees of Wellmark are NOT getting pay raises. There is something terribly WRONG with that picture.

I plead with the Iowa Insurance Division NOT to approve a rate increase.

Rod and Beth Says:

November 18, 2010 at 10:10 AM

I am writing to voice my concerns! I just received the notice of a premium increase on the policy for my two daughters ages 19 and 15. According to the letter there will be a 10.8% increase, yet the amounts included are actually a 79.45% increase... From 265.80 to 477.00 per month, that is an increase of 211.20 each month.

I am completely shocked and concerned at this unprecedented increase. My daughters are both healthy with no chronic illnesses. This makes no sense.

I wonder where the voice of the consumer is in this conversation. We are at the mercy of the insurance company with no apparent options.

Any information or support would be greatly appreciated!

Jane Says:

November 18, 2010 at 10:11 AM

I am writing in regards to the Notice Of Premium Increase I recently received in the mail. I understand there will be a hearing on January 6.

I am requesting that you do not approve the proposed 10.80% increase. This is what is causing Americans to not be insured. Who can afford it with these types of increases? My current monthly insurance costs me \$400.35 for myself and husband & they now want to raise it to \$455.05?!!!. This premium comes with a \$5500.00 deductable, no copays etc. – the bare minimum so I can be insured! Last year I had to up my deductable to \$5500 from \$3000 due to the increases. With the recent economy, no employer pay increases and outrageous increases such as this it is extremely difficult to swallow this type of an increase. If this continues, I am sure I will be the next American to be uninsured.

The poor can get free medical insurance for their children (which I am paying for with my taxes) and the rich can afford it or their insurance is being paid for by their employer.

Every insurance salesman I know is certainly living a very good life and it's due to the premiums I am getting charged. Maybe it's time to take a look at the commissions these salespeople are getting paid off of the policies and start looking for ways to cut costs rather than always taking the easy way and just charge more.

This is getting totally out of control and it is time that someone steps in to do something about it.

Tommy Says:

November 18, 2010 at 10:12 AM

I would like to voice my concern and opposition to the rate increase proposed by Wellmark for April, 2011. I have individual coverage with them that started October, 2010 and have not even had any claims with them yet. Now, they want to increase my premiums (on a high-deductible HSA plan) within just 6 months! I switched companies in part because of Wellmark's reputation of service and value. As it stands, unless my wife or I experience a catastrophic health event, we will probably never get past the high plan deductible, which is supposed to be why the HSA plan saves money, but the proposed increase wipes out any possibility of contributions to my HSA. Please stop them from this destructive action.

Julie Says:

November 18, 2010 at 10:14 AM

to whom it concerns

i am a wellmark insurance customer.

i am 38, in great health and my health insurance premiums continue to increase every year.

i do not submit claims other than a yearly physical exam each year . . . yet my premiums continue to increase every year.

i recently received notification that wellmark will have a public hearing before the iowa insurance division on jan 6, 2011.

i am asking you to consider declining their proposed 2011 premium rates, based on the fact that wellmark is passing on the healthcare costs of the obese, the unhealthy, the pill-popping & the diabetics, to healthy people such as myself.

I am sick of paying for these people!

insurance companies should be looking to provide incentives to healthy customers such as myself, not penalizing me with increased rates to offset the rising costs of the obese & lazy, which leads to the diabetes & heart disease & pill-popping.

please send a message to wellmark, that they need to stop digging into my pocket each year, to squeeze more \$\$ for all of their sluggish customers!

Michael Says:

November 18, 2010 at 10:15 AM

My wife and I are retired and have to provide our own health insurance coverage. We were recently informed by Wellmark Blue Cross/ Blue Shield that they are proposing a 19% increase in our premiums effective April 1, 2011. This is after we had a 22% increase in April 2010. This amounts to a 41% increase in our premiums in the past year despite the fact that we have had few claims on our

policy. These increases are not reasonable by any standard and they are not sustainable for consumers. Why should our costs go up so much just because we have to buy our own coverage? These proposed increases testify to the fact that in spite of the lip service given to the passage of a health care reform bill, the system is dysfunctional and remains broken. Something must be done to stop these spiraling costs. Please do not allow these proposed increases to take effect!

Margaret Says:

November 18, 2010 at 10:17 AM

I just got a letter from Wellmark Blue Cross

blue Shield. My monthly payment as of right now is \$1,072.20 for myself and my husband. They just informed me that my monthly payment is to be increased to \$1467.20 monthly as of April 1st, 2011. That is an increase of \$395.00 a month! That is about a 37% increase. Is this legal? We cannot afford this. We are buying a small motel that was built in the late 1940's. We cleared \$30,000 last year, and do not live in a fancy house or live a fancy lifestyle. We paid \$17,000 for our house. paid it off, and then mortgaged it for the down payment on our motel. My husband and I are sitting here dumbfounded as to what to do. It would be cheaper for one of us to die but neither of us wants to volunteer. I feel like the insurance companies want us to die so that they don't have to bother with us. They definitely want our money but they don't want to help us if we are ill. What is their objective? I cannot rationalize how they think this is a solution for anyone but the insurance companies. I am thoroughly disgusted with the system. I am sure this e-mail will just get disposed of as nothing ever changes. I just hope in the hereafter there is justice for all who have had a part in this fiasco. There is also another part of this which needs to be dressed. The state of Iowa counts your premiums as income and does not allow them to be used for deductions. I cannot fathom how they consider this to be helpful for any Iowan. I do not feel the state of Iowa has my best interest at heart, and would love to do something different if there were any other option. I am so heartbroken over this, I wish there was somewhere to go for help but there is no where!!! My husband and I were married in 1969 at the age of 16 and 18 respectively, we have been married for 42 years and have 3 children and 10 grandchildren. It is not beneficial for an Iowan to be self employed and that is a sad state of affairs for all of us.

Doug Says:

November 18, 2010 at 11:29 AM

Members of the Iowa Insurance Division

Today I received a notice from Wellmark informing me that they are petitioning for a 10.8% rate increase. This didn't sound so bad, but they

WANT TO INCREASE MY PREMIUMS BY 48%, from \$370.90 to \$561.40, an INCREASE OF \$190.50/MONTH!!!

Doesn't that sound totally unreasonable??

Hoping for a reply

Christine Says:

November 18, 2010 at 11:31 AM

I have a health insurance policy with Wellmark of Iowa, since 2009. The only way I can afford this policy is because I have a high deductible. In 2010, Wellmark has increased my premiums, by 20%, which was reviewed, and approved by the insurance division of Iowa. This November 2010, I received a letter of notice of premium increase of a projected 10.80%, effective April 1, 2011. Now, the

new law says that ,we , the patients have to be notified; that the premium increases, have to be reviewed, and approved by the insurance division of Iowa; this is very nice, but does not help the patients, since the insurance division always approves the increases. Insurance companies have higher cost, (so do patients). I would advise them to do what patients do: cut cost, negotiate better rates with the medical establishment, as the VA does. Somehow the VA manages to provide excellent care, and pays the private medical establishment a fraction of what private people are asked to pay. I hope the Iowa insurance division, will side on the side of patients, choosing the moral thing to do, saving peoples' life, by keeping them insured. As surely, you realize that as insurance premiums keep going up prohibitively, many low income patients, like myself, will have no choice but to drop out of the insurance system, and rely on emergency care, which is costlier. And of course, the insurance company, will keep losing members, and will continue to try to recoup their loss by increasing the premiums!

Amy Says:

November 18, 2010 at 11:38 AM

am a policy holder with Welmark. I recently recieved a letter stating that my policy will increase in April around \$30.00. I know that this may not seem like a lot to some people but I am a full time student going to nursing school and working part time. This increase will severly affect my already tight budget. Is there anything that I can do so that my insurance will not increase or is there a similar plan that does not cost as much. Please assist me in getting affordable insurance.

Evelyn Says:

November 18, 2010 at 11:39 AM

As a healthy American who has not been to a doctor in almost 2 years, I do not feel I should have my premium raised. If I am responsible enough to keep myself healthy, I should be rewarded for that. My health history reflects that.

Shelly Says:

November 18, 2010 at 11:41 AM

To the Iowa Insurance Division, Hi I'm writing to you and asking you to consider very strongly on our behalf to not let Well Mark and Blue shield raise our premiums. I understand that the medical field is very expensive but there has to be a time when someone will step in and protect the middle and lower class people who are struggling to just keep afloat. Most of us our on fixed incomes that really don't change from month to month,so asking for rate increases to our monthly bill sometimes isn't possible.Most of us live paycheck to paycheck and our bills are calculated into that with not much room for any outside expenses. If anything we should be fighting for someone to step in and put caps on how much the medical profession can charge instead of hitting us with added preiums every few months. Thank You for listening, Shelly

Anonymous Says:

November 18, 2010 at 11:50 AM

Wellmark needs to force physicians to reduce their cost structure as opposed to raising premium. In Burlington there is only one insurance company that is accepted by the majority of physicians. The physicians do this because they know Wellmark allows them to have a higher cost structure.

Anonymous Says:

November 18, 2010 at 11:57 AM

We are realtors self employed. Myself and wife have \$5000 deductible and rarely use insurance for maybe an annual visit. How can they justify a 30% increase in this market after the economic decline? Our out of pocket is premium per year plus doctor visits up to \$5000 deductible. Wife's

premium went up to 12%, \$340 to \$386. Mine went from \$185 to \$205, increase of 29%. Please don't allow this increase to take effect.

Nancy Says:

November 18, 2010 at 11:59 AM

Daughter's policy amount went from \$135.90 to \$378.80 as of April 2011. I am a single mom paying for her medical bills. I can't afford this- my daughter has cancer and we can't go anywhere else for insurance.

Anonymous Says:

November 18, 2010 at 11:59 AM

Vote no on the rate increase.

Jay Says:

November 18, 2010 at 12:01 PM

15% is extremely outrageous. I'm going from \$583.35 to \$688.25. They reduced my benefits they don't cover preventive flu shots. I wish there was a single payer. I don't appreciate price gauging.

Sharon Says:

November 18, 2010 at 12:03 PM

I have a high deductible already at \$1500 and I don't want to see this increase go into effect making my premium \$440.

Jo Ann Says:

November 18, 2010 at 12:04 PM

I have had BCBS for 35 years – they cut my services – raise the rates – and deny coverage – all the while making year after year record profits.

You must stop this – no more increases for a while – 3 years. We are suffering my income is down 59%. Help-

A stupid self employed woman – stupid because I care and think you will help.

Joanne Says:

November 18, 2010 at 12:07 PM

Insurance was cancelled at least 1 wk ago. So please make sure it is taken care of & no further payments are due. This is B.S. License to steal.

Robert and Carol Says:

November 18, 2010 at 12:21 PM

My husband and I are retired, living on a fixed income, have no debt, take no prescription drugs, and we both have annual physical exams at our participating doctor's office.

In light of the national debate on health and health insurance, we are complaining loudly and bitterly about the notice of premium increase from Wellmark Iowa.

Wellmark has asked the Iowa Insurance Division to approve an increase of "approximately 10.80%" in our premium rate. The notice reflects a total lack of consumer control of expense. This is what my husband and I are required to pay for is the insurance commissioner approves the increase:

*Increase is ANTICIPATED

*Actual rate may VARY

- *INCLUDED BUT NOT LIMITED TO
- *AGE, GEOGRAPHIC AREA, PLAN BENEFIT DESIGN
- *CHANGES IN THESE FACTORS
- *PENDING INCREASES
- *PROJECTED INCREASES
- *INTRODUCTION OF NEW HEALTHCARE SERVICES
- *NON-MEDICAL EXPENSES
- *RISK MARGIN
- *PROVIDE CONSISTENT LEVEL OF PREMIUM INCREASE FOR ALL...

We do not want to pay for anticipated, various, pending, new, risk laden, medical and non-medical expenses for all in our "pool". We have no control over our "pool" or how all the variables affect our expense. We do have control over our own personal health, and if something happens, we should be able to use medical services to help us get better. We bought health insurance for this reason.

Wellmark Iowa sent a question/answer brochure to its clients- "find out where your money is going and why." It states- "we estimate the money we will pay doctors, hospitals and pharmacies for your care." "New technology" costs more. "Drugs continue to rise". And, the kicker- "Your premium dollars are managed collectively in a pool with other members." One of the rallying cries of the last election was related to Obamacare- and we have, in reality, been paying for everyone's healthcare ever since health insurance was invented. We have been paying for the health needs for our "pool," and now the projected health needs of our "pool." The brochure states that we are not paying for their new building. They do suggest reducing medical expenses- but if we are in a pool, we do not understand how that will work. And, in other areas of our economy, reducing expenses has caused a raise in rates- public utilities.

In 2007, our plan premium was \$539.00 for the two of us. It went down to \$469.05 because we changed plans within the Wellmark system. Then, it went up to \$525.95. Then, it went up to \$641.15 in February, 2010, and in November, 2010, we are warned that our premium will go up to \$729.35. This represents a 64% increase from the lowest rate in 2007 – 64% in three years- for projected, anticipated changes in non-medical and medical expenses. In the past three years, we did pursue a couple of health issues and had one minor surgery, but have ended up being healthy, taking no prescription drugs, and having annual physical exams. We have gotten three years older.

Gregory Says:

November 18, 2010 at 12:23 PM

Nonsmoker, nondrinker, no health issues, 15 years + or – with Wellmark, age 59 single coverage, \$1500 deductible.

Current monthly premium \$294.80

Proposed new monthly premium \$446.40.

?

Vi and Alan Says:

November 18, 2010 at 12:28 PM

We recently received a letter informing us that Wellmark has asked for an approval on insurance rate hikes. Our increase is anticipated to be an increase of \$60 PER MONTH!!! Within the past year we have also had to swallow a \$100 per month increase.

Although we highly doubt voicing our objections will have any effect, we do wish to ask that this

increase not be granted. Yes, costs have risen; we, the people, are more aware of this than anyone!! If this increase is given, we are going to be forced to drop our health insurance and that is a weighty matter since Alan is a diabetic. We do as much medical work for him through the Veterans Administration as we possibly can. This saves Wellmark many dollars. We are cutting down our medications, skipping check ups, etc. all to save money just to pay for health insurance!!

How does that make any sense?

Wellmark, like, the general public must find ways to tighten their belts. Maybe getting rid of a few of their agents who only sell insurance and are never available for help would be a start.

We ask again, do NOT grant this request.

Concerned Citizen Says:

[November 18, 2010 at 1:10 PM](#)

I would like to complain that we keep getting too many price increases from Wellmark. There is too many kickbacks in the health care system driving up costs and prices for consumers. I also believe that consumers should receive some sort of discount for living healthy lifestyles and never using their insurance, like I do. I don't believe that I should be lumped in with people who choose not to lead unhealthy lifestyles that lead to more medical claims.

A concerned citizen

Tom Says:

[November 18, 2010 at 1:11 PM](#)

Why are my rates going up again?! Is there nothing we can do to stop this?

Randal Oliver Says:

[November 18, 2010 at 1:14 PM](#)

The new price increase will take over 1/3 of my retirement income. I will be paying over \$600 a month. I've tried to leave Wellmark, but no one else will offer me insurance and Hip-Iowa cost \$100 more then Wellmark. I don't use my insurance and I don't file claims. I can't afford this increase and I'm going to have to drop my insurance and become uninsured.

Anonymous Says:

[November 18, 2010 at 1:16 PM](#)

I hope this does not get approved. This notice of increase is outrageous and insurance does not pay for anything anyways. A 63 year old retiree should not have to pay over \$600 a month for insurance. Will the Commissioner use this to get another raise.

Anonymous Says:

[November 18, 2010 at 1:17 PM](#)

I'm getting a 30% increase in a year! *** *****.

Anonymous Says:

[November 18, 2010 at 1:17 PM](#)

Why is this happening again?!

Charie Says:

[November 18, 2010 at 1:46 PM](#)

I'm retired and I live on a fixed income. I also have pre-existing health conditions. The new rate increase will leave me with only \$200 a month to live off of. I can't go any further in pinching penny. I don't spend money on anything except for bills and some food. I don't mind paying for insurance,

but I've simply ran out of money with this increase. What am I to do? Become uninsured?

Tom Says:

November 18, 2010 at 2:02 PM

This rate increase is not affordable for individuals on a fixed income. The new monthly amount will cost as much as what I receive from social security.

Erin Says:

November 18, 2010 at 2:28 PM

My Name is Erin, I'm 22yrs old. I currently have a minimum wage Job warking part time 3 days a week at Target, currently living with my parents because of a Dui I had gotten this past September. I'm paying for that mistake along with my own bills & other expenses; credit card, loan payment, gas for my vehicle & cell phone. Oh and don't forget the all mighty expensive HEALTH INSURANCE.

I recently received a letter stating that my rates for my policy/plan may go up. If you're going to raise my rates for my Health Ins. Policy/plan, how do you expect me to keep it with having a minimum wage job making only \$9 hr while paying other bills on top of Health Ins. Back in High School I was very active in sports and I've had a lot of injurites, thank God for Health Ins. then covered by my Father's Job for my family. My Father is currently retired for over a year now.

I currently had changed my policy/plan with Blue Cross Blue Shield to a plan that I could afford to pay for it. And now after receiving this leter stating that my rates may go up I don't understand how you expect not only me to be able to pay for Health Ins, but other Americans like me in my same situation. I chose BCBS (Blue Cross Blue Shield) in the first place because it was affordable, and I could pay for it. Any other Health Ins. either; A, didn't cover my needs or B, I couldn't afford to pay for it.

The Economy isn't that great during these current times. I don't want to worry about weather or not I can afford to pay for my own Health Ins, so for that "Just in Case" event that could happen that I may need Health Ins. It would be like worrying about what could happen while not having Health Ins at all. So if they not only raise my rates, but rates for other Americans paying for Health Insurance, how do you expect us to be able o afford to pay for it?

I'm writing to tell you if you raise my rates for my Health Insurance, I'm unable to afford to pay for my policy/plan with BCBS.

Craig Says:

November 18, 2010 at 2:29 PM

OBVIOUSLY WELLMARK'S LOBBYING AGAINST "OBAMACARE" HAS BEEN ENORMOUSLY EFFECTIVE.

Scot Says:

November 18, 2010 at 2:36 PM

I am writing to protest Wellmark BlueCross BlueShield proposed rate increase. I am a Wellmark customer who purchased an individual health insurance policy, and they increased my rate this past year. Here's why I oppose their new rate increase:

My policy with Wellmark is nothing short of extortion. I am in my mid-50's and have been unemployed for 3 years. I live on my savings and occasional temp work. My policy has a high deductible, and I pay Wellmark \$2,300/year. For this I receive no healthcare. Nothing but a

newsletter 4 times a year.

I have not seen a doctor in the past 3 years because of the high deductible. And I am afraid to ever use the policy because I have friends in their 50s who have used health insurance policies _ one for breast cancer treatment and the other for back surgery – only to find their policy rates increased beyond affordability – in other words they were forced out after faithfully paying their premiums over the years.

Wellmark may claim the increase isn't due to their expensive building project, but I doubt that. You don't have to look around much to see who's been thriving in our economic crisis – the hospitals, health clinics, pharmaceuticals and health insurance companies have all been improving their facilities and equipment during the recession.

Therefore I am asking you to side with consumers and deny their rate increase.

Thank you.

Fonda Says:

November 18, 2010 at 2:37 PM

Please do NOT approve an increase on my insurance premium. Insurance rates are too high already.

Thank you.

Jennifer Says:

November 18, 2010 at 2:40 PM

I am in receipt of the letter regarding premium increases. I wish I could attend the public hearing but unfortunately I have to work to pay my premiums, which are already too high, and to be able to save for the increase. As you can probably tell I am a bit frustrated and disappointed. I am completely against the increase. If insurance is being used and abused research by whom and increase their rates! We rarely go to the doctor.....we are afraid to because of cost on top of our premiums....how sad! We may have to start looking around for cheaper coverage. We were so proud we were recently able to up our benefits for piece of mind and now we will probably have to opt out for less coverage so we can afford the new premiums! My faith in our government and health care is deteriorating!

Patricia Says:

November 18, 2010 at 2:49 PM

: I RECENTLY RECEIVED A LETTER FROM WELLMARK BC/BS AND THEY ARE PLANNING TO RAISE MY INSURANCE RATE ANOTHER \$63.30 A MONTH. LAST YEAR WE HAD A BIG INCREASE THAT ALMOST MADE US CANCEL ARE INSURANCE DUE TO AFFORDABILITY AND I THOUGHT YOU PEOPLE WOULD TRY TO HELP OUT.

WITH THIS NEW INCREASE IT WOULD MAKE IT ALMOST IMPOSSIBLE TO CONTINUE COVERAGE WITH WELLMARK, SO WHAT ARE OUR OPTIONS WITH GOING ON TO STATE HEALTH. PLEASE SEND US INFORMATION AS WE CAN NO LONGER CONTINUE INCREASES WITH WELLMARK.

Daniel Says:

November 18, 2010 at 2:57 PM

I am writing concerning a notice of proposed premium increase that I received from Wellmark. My wife and I have had our current policy with Wellmark since 2008. We are not covered by a group plan. When we began our policy in approximately May of 2008, our monthly premium was \$576. The

premium increased by 8.9% to \$627/month in 2009. It increased by 26.2% to \$791/month in 2010. Now Wellmark is requesting an additional increase of 16.4% to \$921/month for 2011.

We are well aware of the ever increasing health care costs but with so much of the economy stagnant especially in the area of wages and salaries over the past few years, it is hard to believe that Wellmark can justify yet another exorbitant increase. If this premium increase is approved, our policy premium will have increased by 59.9% in just three years!

I would guess that Wellmark has managed to "massage" their numbers in such a way to prove that this increase is necessary. I urge you to see through the smoke screen and help protect consumers such as ourselves from what I perceive to be price gouging in advance of the Federal Government's health care reform.

I appreciate your attention to this matter.

Marta and Chad Says:

November 19, 2010 at 9:10 AM

Please do not allow Wellmark to raise their rates, AGAIN! Last year we were forced to take a plan with a higher deductible, \$9,500.00 a piece, in order to weather their last rate increase. This plan allows for NO preventative medicine, no mammogram or annual check-up. It does not cover dental or eye exams. It is basically worthless unless there is a catastrophic event. If it goes up again, we will be forced end our health care coverage.

I have paid for my own health care for the last two decades, and Wellmark is the worst coverage I have ever had. When we moved from Colorado we lost Kaiser, although not perfect, at least it covered preventative care, for the same rate that we pay now and a small co-pay. Wellmark was the best we could do to replace it.

The new administrative offices of Wellmark let us know that their priorities are in the wrong place. An opulent office, while those they are supposed to cover lack basic care.

I hope that the new health care plan recently enacted by the government will force insurance companies to offer less expensive and better coverage.

We hope this response becomes a part of the public record.

Matthew Says:

November 19, 2010 at 9:12 AM

This past week I received notice that Wellmark has yet again asked the Iowa Insurance Division to approve their requested increase on their (read "our") individual monthly premiums.

I am writing to ask you, my Consumer Advocate, to strongly and forthrightly, deny this request.

This is not because I am obese (I am not at 5'5" and 125 lb). This is not because I am old and consume a disproportionate amount of health care services (I am under 30). This is not because I think all health care should be free to everyone. (I know there are costs associated with everything in life and am willing to pay a reasonable amount for them.)

I am asking you to deny this request b/c it is clear that the health (read "sick") care system is on a completely unsustainable path, regardless of the new Health Reform passed by the US Congress this past spring. The industry must be reformed from the inside, and denying this request will hopefully force the hand of the industry to reform itself.

I have and continue to lead a healthy lifestyle, and in this, quite frankly, crappy state of our national economy, I am unable to find full or even part time work that will provide benefits of any type.

I currently pay my \$141.65 out my my own pocket every single month, and have since June when I was terminated from my last employer. This 10.8% raise in my premium, as is to nicely laid out on my notice letter, would be an extra \$15.90/ month, which works out to an extra \$190.80/year, bringing my total for 2011 to be \$1,842.90. $(141.65 \times 3 + 157.55 \times 9)$

Since I left my parents insurance over 5 years ago, I have used an average of \$600/year, and thats for FIVE years. This premium is more than THREE times the amount of health care that I use on an annual basis. This math DOES NOT EQUATE.

This is nothing but PROFIT for Wellmark. And as a corporation, that is their objective: minimize costs, maximize profits. Looks to me like they are doing a fantastic job of making money, and far more money than I think is reasonable to require for me to pay for the services I actually use.

There are ways to make a profit and not screw people out of money they don't have for things they don't use. The system can be reformed, but it must first start with a firm "NO" from the regulating authorities.

Thank you for your time.

Patti Says:

November 19, 2010 at 9:17 AM

I have just received notice from my health insurance company, Blue Cross/Blue Shield, that they intend to increase my rates.....again! My husband and I run a small business and pay for our insurance privately. We have the highest deductible offered in order to continue to afford insurance. The last increase took us to \$600/mo AFTER we increased our deductibles to \$4200 per person (we also have two daughters). Had we not increased our deductible at that time, the premium would have been almost \$700/mo. (which would mean this increase would have taken the premium to \$775/mo with our old deductible of \$3200 per person).

This latest correspondence indicated they wish to raise my premium by 10.8% which would make my monthly premium \$665. This is ridiculous. If they continue to do this yearly, it will not be long before we can no longer afford health insurance. Then what?

We are a responsible family and certainly do not abuse our insurance. We use only as a necessity in order to avoid risk of being cancelled, our rates being increased, or riders attached. As a private consumer, I feel as though I'm between a rock and a hard place. Do I continue to pay these ridiculously high premiums for bare bones insurance, or do I risk everything by not having it? Oh wait, health care reform says I have to have it or I will be fined. What's a person to do?

Thank you for taking the time to listen to my concerns. I certainly hope you are able to help keep premiums low so that we may continue to be insured.

Jody Says:

November 19, 2010 at 9:30 AM

When I got my letter it announced 10.8% increase and broke down the line items that summarize the end result. It did state that other factors could come into play that may explain my proposed new premium, which was going to be actually 50% higher. I think better transparency and less headache

in my case, since I will be moving to a new age bracket, would have been to add one additional line item to account for that. Would have saved much consternation.

My biggest complaint, and again it revolves around transparency, is that Wellmark personnel would not give me the per cent change they project for each of five pools of programs they have (four of which are obsolete and cannot add new clients). As an example if I have five investments, that I think can do an average of 10.8%, I would know what each has done in the past and project what each can do for the future in terms of my anticipated average return. If Wellmark needs an average 10.8% increase, what percent is each pool adding to the end result- -some may be going up (significantly) others down.

They say they can't predict that until they get the announced approved rate. I say unless they know that going in, how can they ask for an average rate; frankly if they don't know that, it is very likely they will have to come right back and do this again soon. Am I lost here or shouldn't a company know the driving force in each pool (percent change) that will end up resulting in an average of 10.8? And do I want to do business with that type of management? Or is something being withheld??

Finally, in mentioning the obsolete pools (1-4), this appears to be planned obsolescence of sorts, because when pools are closed, attrition results from three reasons: death, age, dissatisfaction.

Those left face naturally higher premiums and are forced to do something different: for example raise your deductible to save premium (I just love that one), or try to get in the new pool which is used as bait to grow the business (since it's new and younger); in the process the company would naturally love to find out more about your health in the application process, so that they can promptly 'rate' you or decline you. DO THEY ALL DO IT THIS WAY??

Mark and Danita Says:

November 19, 2010 at 9:54 AM

We are sending a comment about notification from Wellmark Blue Cross and Blue Shield of a premium increase.

Again, the consumer is asked to give more. My husband has this private insurance because he is self-employed. The demands placed on the self-employed never decrease and more is taken from them all the time. He hasn't used his private policy in the time he as owned it. However, his pool or whatever it is called must be high risk. When will the increases ever stop! We feel that we should direct deposit our monthly income into the Wellmark fund and they can tell us what we have left at the end of the month to pay the rest of our bills. Health insurance is a huge issue with us. We seldom use our health insurance and ask ourselves why we even pay the premiums. We do know that we will have to make some changes to the policy by either increasing the deductible again or making changes to the co-pay. All these changes have an impact on us the consumer not the insurance companies.

We are sure this message will be heard on deaf ears as not much changes when it comes to change.

Jeff Van Maanen Says:

November 19, 2010 at 11:19 AM

My name is Jeff Van Maanen and I have received a notice in the mail that you are going to raise my rates another \$50.30 to a total of \$302.50 a month. I own a fitness studio with my wife where I work with people with poor health and overweight. I am 45 and I am 6 foot 1 inches tall. I weigh 170 pounds and have a body composition less than 10%. Why on earth would I want or need to pay \$3,630 a year for health insurance? Over another 10 years is \$36,300 and that's if you don't raise my rates anymore. Being self employed I cannot afford this kind of insurance to subsidize people around

my age that make choices to promote poor health. I would like another plan or I will have to cancel my insurance.

Kathleen Says:

November 22, 2010 at 10:34 AM

I understand there will be a hearing soon on Walmart's (BC/BS) second premium increase in less than one year. I lost my husband quite suddenly last year. He was the sole income provider and we had health insurance through his work. Now I have very little income other than \$1000 that I receive monthly from my husband's IPERS, and I pay for my health care out of that. I, as so many Americans, am at the mercy of a broken health care system and can no longer sustain the costs. My first premium increase notice last spring indicated an 18% increase, which became 26%. I have just received another notice indicating an additional 10.8% increase with the caveat that it could be more.

I am quite jaundiced about these premium increases (both surfaced at sensitive political times—health care bill vote and November elections that favored anti-regulators) and believe they are politically driven.

Please ask Walmart and consider these factors:

1. How much of the budget is spent on Walmart executives, including salaries, bonuses, benefits, etc.
2. How much is spent on advertising, eg the slick color mailer I received via snail mail. (This would include creating the flier, printing and mailing.)
3. How much of their budget was allocated to lobbyists and related devices to defeat the Health Care bill?

With the exception of elevated cholesterol level, I am 59 and healthy and have always led a healthy lifestyle—non smoker, fruit and veg eater, regular exerciser, etc. I have already reduced my health care coverage by eliminating eye and dental care, with a \$2500 deductible and 20% co-pay. It seems that fiscally I would be better off dropping my coverage, putting the same amount in a savings account and waiting until I am eligible for Medicare. I know it seems risky, but so is depending on a health care conglomerate that takes this much of my income and refuses legitimate claims. (my personal example, my doctor has said I need a colonoscopy, but it is not covered.)

Angie Says:

November 22, 2010 at 10:42 AM

I received a mailing from BCBS/Wellmark regarding the raise in health care premiums and I wanted to voice my concerns. I am from a middle class family that includes myself, my husband and my 3 children. My husband works for his dad at the family owned small transmission business. We were blessed with a son conceived thru IVF and then spontaneous twins 15 months later. Due to the cost of childcare and other issues we decided it would be best for me to become a stay at home mom. Unfortunately my husband's family business doesn't offer insurance due to only having 4 employees so that left us no choice than to purchase our own plans. At the time (2008), to cover our family of 5 it would have cost at least \$800 per month. That was unaffordable to us and left us no choice but to check into health care through the state of Iowa for our children whether it be Medicaid or Hawk-I. We just qualified for Medicaid so our children have that, and my husband and I have our own individual plans. Last year our premiums increased approximately \$70 per month and now in April 2011 they are going to raise another \$60. This is absolutely ridiculous. How is a middle class family supposed to afford \$500 per month for just two people? I will be honest, I did vote for Obama for

president in hopes that our premiums would not continue to drastically raise. I was under the impression the new Health Care Act was to help out middle class, small business owners such as ourselves and obviously that is not the case or atleast if it is it's for a higher cost. I am in hopes that BCBS/Wellmark will reconsider their 10++++% increase. My current premium is \$280.45 and going up to \$313.00 which is more than a 10% increase.

Ed Says:

November 22, 2010 at 10:43 AM

I want to challenge the proposed 2011 wellmark base rate increase for health insurance

I am retired and on a fixed income. As you know we have had no increase in social security in two years .But they certainly have increased premiums substantially each yearthe proposed increase will raise my wifes and my premiums over one hundred dollars a month.....Who do they think they are kidding.....they need to better manage the resources they have.They are basically providing less for more at every turn.....while we are required to cut corners and pare down to the very barest of necessities, Wellmark should be required to reduce profits as well, instead of just passing costs on to us Fancy new office buildings in Des Moines don't improve health care coverage for Wellmark's clients.

Their vague reasons for the increase like potential claims for the group.....

How did the last increase play out? What were the actual figures for that increase.....

Now with apparently no proof other than their assumptions , theory and conjecture here they are again for another increase.....All on what could prove out to be bogus assumptions before the facts

Let them apply for increases after the fact..... based on facts..... not before based on assumptions theory conjecture.....they call a forecast

Please look into their past increases before allowing them new ones

Brian Says:

November 22, 2010 at 10:44 AM

A 10% increase is an outrage. These insurance companies have raised our rates time and time again. I know I'm not getting a 10% pay raise this year, why should they? I'm a single parent struggling to make ends meet as it is, are they trying to process themselves out of the market? It won't be long before I can't afford to insure my child. Will it be on their minds that children are going without healthcare? No, it won't. They are only concerned with profit. Put a pirate flag up at the insurance headquarters. Here's an idea: lower your prices, then more people can afford insurance. Instead of taking a lot of money from a few people, take a little money from a lot of people. Everyone wins.

I oppose this rate increase and pray my voice is heard

Carolyn Says:

November 22, 2010 at 10:45 AM

I just received a letter from Wellmark saying they are raising my rates another \$50 from \$314.35 per month to \$364.35 effective April 1, 2011. They have got to be kidding! This is outlandish. They just raised my rates \$64.35 per month a few months ago. I'm already paying for virtually no health care cost assistance as it is with my \$5,400 per year deductible and they have the nerve to ask for more money. This is highway robbery!

No one else is allowed to get away with imposing these kinds of increases on their customers. If their costs are going up so much then they need to address the health care providers who are raising their rates. It's called cost-control.

Our health care system is out of control. When is this going to stop? I have depleted my savings paying these high premiums and now I have to seriously consider going without health insurance because I can no longer afford it if this increase goes through.

Something must be done to stop this!

Cindy Says:

November 22, 2010 at 10:46 AM

Wow! I can't believe that the insurance companies think they have the rights to raise rates every year. I am currently paying 557.-00 per month for a single policy. If they increase it at least 130.00 per month, I will not be able to make the payments. Oh, yes, the letter did say it could be higher than the 130.00 per month increase. Last year it jumped up considerably but I figured it was because I turned 60. But 130.00 per month increase?!!! This does NOT include any dental coverage. I see their reasoning but maybe they need to raise deductible amounts on everyone thereby lowering the monthly fee. I was never in favor of the national health care program but if the insurance companies are going to continue to rape their clients, I am thinking I need to reconsider my philosophy of insurance. I hope and trust the state will not allow this. Middle class America in Iowa is taxed and insured out of helping the economy grow.

Carol Says:

November 22, 2010 at 10:49 AM

I have been thinking of this increase since I have received this notice. Looking back at my records, on April, '09 I had a 14% increase, May, '10 there was a 22% increase and now they are wanting a 18% increase starting April, '11. (They are saying it's 10.8%, which is false.) That is a 54% increase in two years. I haven't seen my wages or the cost of living go up!

I just recently used my policy for a freak accident, which has been the first since 2002. When I see the prices that are charged by Doctors, hospitals and then we get discounts for this and that what a scam..no wonder we are in need of health care reform. I am pleased on the end results on BC/BS paying for what they did, but there needs to be a cap on everything and I believe we have reached it.

A widowed 55 year old woman on a fixed income just can't scratch to much more...Please act in my good will to not let them have this rate raise.

Dale Says:

November 22, 2010 at 10:52 AM

In regards to the notice to Dorothy M****, premium notice, this is the most ridiculous thing for Wellmark to even give consideration to raising Premium increase, after the recent article in the news paper, in regards to Wellmarks EXTRAVAGANT fitness /exercise building, how many MILLION \$, all this in a struggling economy, unemployment, downsizing struggling employees to maintain there status in life.

I beg of you the Iowa Insurance Division, to deny Wellmark such increase in premium rates, that is just unreasonable.

I am responding for Dorothy C M****, her husband.

Larry Says:

November 22, 2010 at 11:49 AM

Rate Increase is affecting my household with 4 children and going into winter with bills it's just a little overboard. Wife had thyroid cancer not covered on the policy due to pre existing condition. Premiums are \$700 a month not including \$800 for me and the kids.

Anonymous Says:

November 22, 2010 at 11:58 AM

If the increase takes effect it will be too much for me to handle. I just started a fulltime job and don't feel I can pay this premium. It's \$248.70 now and the proposed amount is \$293.20. My new job is minimum wage and they offer no insurance where I work.

Elbert Says:

November 22, 2010 at 11:59 AM

Family policy has gone up from \$857 a month to \$1037.70, a difference of \$180. We can't afford it.

Robert Says:

November 22, 2010 at 12:01 PM

Every year it's a large rate increase. I am currently paying \$416.25 and now it's going to \$473.65. This policy has a \$5000 deductible!

Al Says:

November 22, 2010 at 12:02 PM

My premium is going to \$425. Two years ago it was \$245.85. I got a single policy and this has gone up 50%. By the time I hit Medicare age it will double or triple in price.

M.K.T. Says:

November 22, 2010 at 12:08 PM

I read with great interest the comments posted here regarding the notice of rate increase from Wellmark BCBS of Iowa.

Last year my premium increased by 25% – for 2011, I was disheartened to see a projected increase of 10.8% (\$646.60 a month). In 2009, I was diagnosed with breast cancer – I required a year's expensive treatment and can go nowhere else for coverage now.

I believe both the costs of medical care and the costs of insurance premiums need to be looked into. As a cancer patient it's a pretty scary scenario and one wonders how much longer we can sustain this. I feel very bad for those who are forced to drop coverage – at this rate, that could be any of us.

I don't believe a company that spent \$250 million to build the "most expensive ever constructed in Des Moines" (D.M. Register website) – as their headquarters and who have people drawing six figure incomes on their payroll are justified in raising premiums. Please deny the projected increase.

Ben Says:

November 22, 2010 at 12:15 PM

I'm writing in regards to a proposed increase for my monthly health insurance rates. Currently I struggle to pay the 169.65 per month plan, and my insurance (Wellmark Blue Cross Blue Shield) would like to increase my rates by 29.00 minimum; making my new monthly premium 198.65. Although I have great respect for Blue Cross Blue Shield, this rate increase is just not acceptable, rarely do I use the insurance (the last time I've used insurance was 2008, before beginning my policy

with Wellmark) and the new rate proposal could be significantly higher due to age, geographic location, and plan benefit design. So basically, I'll pay upwards of \$30.00 a month more for a service that I don't use, but need to have just in case. Unfortunately for me, if this is passed, this will mean I will have to drop coverage in favor of paying bills like rent, and paying for food; as I cannot qualify for Medicaid services, this will mean I no longer have health insurance. I realize that your office will be flooded with letters similar to mine, begging you not to increase rates (as I'm sure it is every time this is brought up) and I'm sure as individuals you see this rate as another hurdle for the public to jump to stay in the game, but I do ask that you consider what this means across Iowa. If I have to spend more on my health insurance, there's less money I can safely spend on things like new clothes, food items beyond basic nutrition, regular maintenance on my vehicle, etc.; and likely this will be the same for many people.

Betty Says:

November 22, 2010 at 3:01 PM

I am 59 yrs. old. I'll be 60 next April.

I have Blue Cross health ins. I received a letter last week saying that my premium is going from \$418.40 a month to \$463.50 a month. And it could be more of an increase. And I can't afford to hardly pay the premium now on my wages.

I work forout of Atlantic and I make around \$600 every two weeks. Well the premium takes almost all of one check. I have other expenses. Light & gas, water, telephone & T.V. plus eating & house expenses.

I also have a health ins that only pays 80-20. So i have meds to pay, and other dr bills.

I am asking you to please say no to there increase of premiums.

I hope you do take time to read all of my letter & others also. I know I'll have to do something else if this goes into effect.

So please say no. Thank you for your time.

Colleen Says:

November 22, 2010 at 7:40 PM

I don't even know how to address this issue. It's ridiculous! Presently we pay 889.80 per month with a high deductible and you want to increase this to 985.90! Our policy is for major illness, which thankfully we have not had to file, so each year our dollars go out and we get nothing in return. None of our minor claims are covered just because we cannot afford the lower deductibles. My paycheck alone goes entirely to cover our insurance rate – do I need to get a second job? Someone please stand up and voice opposition to this new increase. If this goes into effect, I can promise you we will be looking elsewhere for insurance coverage.

Wes Says:

November 22, 2010 at 9:33 PM

I am self employed and its a hard time right now. I have to pay this rate increase of loose coverage.

Jayne Says:

November 23, 2010 at 8:50 AM

Dear Commissioner:

In March 2010, Wellmark increased our premium by nearly 50%. Our premium was \$436 (\$5000 deductible) and it increased to \$632! Wellmark does not need another 10% in April 2011... The first increase was far beyond anything I heard from other people. In addition, our son turns 26, and even though he is still a student, he probably will not be able to stay on our plan and this premium will only be for two people.

Just say NO.

Jim Says:

November 23, 2010 at 8:53 AM

I love it when I am perfectly healthy and my rates are supposed to go up. Is this going to happen every year? This really is irritating when I see the Wellmark name is plastered everywhere I go for advertising. I would imagine that is not cheap. Why don't you take your name out of a stadium and keep my rates lower?

Dean Says:

November 23, 2010 at 9:05 AM

We were notified by Wellmark that they have asked the Iowa Insurance Division for an increase in premium rates effective April 1, 2011.

At the beginning of 2010 Wellmark increased our rate from \$2946.90 a quarter to \$3840.30 a quarter. In the 2nd quarter of 2010 they again raised our premium \$446.70 to a total of \$4287.00. In that six months we have absorbed a 45% increase.

Neither my wife nor myself advanced into another "age category" to account for this increase. We are the only two people on this policy.

My wife has multiple sclerosis and we cannot switch insurance companies because of her pre-existing condition.

Wellmark's proposed increase in premiums are estimated at another \$462.90 a quarter which would bring our premium to an overall increase of 61% in 15 months.

I find this to be totally outrageous and plead with you to deny Wellmark any increase in premiums. No other industry I know of gets to increase their prices by anything close to what the health care industry claims to need to support themselves.

Once again, please do not allow this to be passed onto the poor public another time.

Laurie Says:

November 24, 2010 at 11:02 AM

I am emailing to give my comments about the blue cross premium increase. I have been playing phone tag with Angle Robinson and I thought this might be better. This rate increase is ridiculous. We have had an increase almost every year for one reason or another and maybe they had better look at the reason behind this rather than keep increasing their rates. We had to take our son to the emergency room and saw the dr for MAYBE 2min for him to say yep its broken and the charge just for the dr was almost 300.00. The total bill was over 800.00 for that 2min, a tongue depressor wrapped in gauze for his finger(which broke by the time we got home) and the room. That didn't include the xray. When I complained they said they paid by what code the dr wrote down. Do you suppose the dr lied!! If this premium goes up we will probably drop it and let the state pay for all of the kids insurance. Right now blue cross covers first then medicaid picks up whats left and my

husband is covered. I have my own plan because blue cross put so many riders on it wasn't worth it. I will see if my husband can get on with me and let the state pay for my kids...sad right, but if this goes up we will be up to over 800.00 just for health insurance premiums and I have a loan payment for medical bills from when a joke of an insurance company said they would pay my bills, and didn't. I am soooo sick of insurance companies I am close to dropping all and letting the state take care of us all and maybe we could dig out of the hole we are in because we are insurance poor.

Jeremea Says:

[November 24, 2010 at 11:04 AM](#)

This email is for the proposed health insurance premium increases that are to be reviewed by Wellmark with help by the Iowa Insurance Division. As a single father, I pay for health insurance for myself and my young son age six. I am opposed to health insurance increases by Wellmark. I started self insuring for medical coverage with Wellmark in Dec. 2009. My premium then per month was \$205.00 p/mo. Now less than a year later the premium was raised to \$243 p/mo. And again Wellmark is asking to raise insurance premiums yet again. I understand our open market for medication and the continual rising cost of health insurance, but as a Wellmark insuree I have never filed a claim or a single script for prescription medicine. Now Wellmark is asking to raise the premium again to \$271.15 or possible higher. Being on a very tight budget already makes it virtually impossible to absorb these costs by Wellmark. I ask you to truly be an advocate on our behalf & help us keep our insurance premiums low.

Pam Says:

[November 24, 2010 at 11:05 AM](#)

I recently received yet another notice of my health insurance premium being increased, the increase last year put my payment per month as being the second most expensive that we have, only our house payment is higher. I have had to increase my deductible to be able to afford coverage and thus I am unable to afford to have the wellness test a person my age should be getting. What is wrong with this picture?

Joe Says:

[November 24, 2010 at 11:06 AM](#)

Please consider the following comments to be submitted to the Jan 6th 2011 Public Hearing.

My monthly premium is going up by an estimated 10.8%. This will bring my yearly cost to nearly \$17,800 for a family of 4.

I thought the Obama-care plan was suppose to reduce costs? From reading the documentation sent to me it sounds like Wellmark is raising rates based on anticipated costs going up. Since the Obama-care plan was designed to lower costs, this is unacceptable.

I respectfully request that either the cost increase is rejected, or that Wellmark, and the Iowa Insurance Division Consumer Advocate properly notify Iowa's members of the Senate and the House of Representatives, and the White House of their failed work.

Kathleen K. Says:

[November 24, 2010 at 12:54 PM](#)

I am writing this after receiving the Wellmark of Iowa Notice of Premium Increase, with premium increases to take effect in April 2011. Wellmark states the premiums are going up (again) because "people are using more medical services and new technology costs more," but I can't help but think this is related to price gouging ahead of the anticipated changes coming from the Health Care

Reform Law.

The Notice of Premium Increase states Wellmark of Iowa is asking the Iowa Insurance Division for a 10.8% increase but in reality this will mean another \$112.20/month or 18.57% increase in our premiums. Combine this with annual increases since 2008 (9% increase in 2008-2009, 12.77% increase in 2009-2010, and proposed 18.57% increase for 2010-2011), and this will actually be a 40% increase in health care premiums!

Please deny this request for yet another premium increase. These increases have gotten out of control. It is more and more difficult to continue to pay these huge premium increases, especially in light of the high deductible we must pay in order to afford health insurance coverage at all and lesser coverage we receive.

Tom Klemesrud Says:

November 24, 2010 at 3:36 PM

My premium increase was 48.8% and the Notice claimed this was an 11.33 % increase.

I'd like to get ride of Wellmark. What are my options?

PS: What was that health care reform that Congress just passed? Was it written in providing 50% annual increases in premiums per year?

Tom Says:

November 24, 2010 at 3:42 PM

Please represent me in the Jan 6, 2011 hearing. Wellmark wants to increase premium/mo from \$480.20 to \$714.70 – \$234.50 increase/mo ... and they claim that is a 11.33 % increase.

Dennis Says:

November 29, 2010 at 12:01 PM

I am sending this email in response to the proposed rate increase by wellmark. this email will most likely fall on death ears but at least i will have said my peac i wish to strongly apose the rate increase as being on an income that varies week to week i am getting to the point i will have to drop my covrage in order to keep a roof over my head and food on the table so i strongly wish you would opse the rate increas but i know you will let it go through as you most likely support obamma care take over of our lives and lively hood.

Kathy Says:

November 29, 2010 at 12:02 PM

We have had Wellmark HSA for at least 3 years and never made a claim that had to be paid for by the insurance company in other words we have never made our deductible. It was our understanding last years huge increase would be sufficient for quite sometime however as usual this is not the case.

Under your heading what can you do: Be informed, Eat right and move more, Spend your dollars wisely. We have been doing this from day one, common sense should tell everyone this. That is why we have never, fortunately for us made our yearly deductible. But still our rates increase at a very high rate \$49.80 last year and a proposed \$38.10 or more this year for a total of \$87.90 in just two years.

If this continues, we as well as allot of other people who pay their own health care cost will be forced

to drop their coverage.

I think that looking to legislature to pass laws that restrict malpractice lawsuits and regulate cost charged by physicians along with those who continue to abuse the system by running to the doctor for every little problem would be a better route to explore.

Although there is clearly not a simple solution to this globe problem I think it is your duty as a company to look to other ways of balancing your budget other then raising our rates.

Nancy Says:

November 29, 2010 at 12:04 PM

Feb. 25, 2010, I submitted a complaint about my Wellmark premium going up nearly 20% for 2010. Their increase was declared appropriate, so I went from a premium of \$258.95 to \$310.65 a month.

This week, I received word that my premium is going up another \$38, to \$348.65. This is another 12% increase. This is an increase of 34.6% over a two year period.

I do not care to fund the new building in Des Moines with my premiums!

What would I like to happen? First, for the Iowa Insurance Commissioners to investigate Wellmark's intended rate increase ... and this year, to deny Wellmark's increase.

Jim and Sharon Says:

November 29, 2010 at 12:06 PM

Dear Commissioners,

We will be unable to attend the public hearing on January 6, 2011, so we are sending our comments electronically.

Since we retired from teaching 5 years ago, we have been part of the Wellmark Health Savings Account (HSA). This was the most affordable option for us with coverage that we felt was adequate. We have paid our monthly premiums during those five years and have NEVER requested a medical claim. We increased our deductible to \$2500 to escape a rate increase a couple of years ago. A rate hike for us seems unfair.

We realize that we are considered part of a "group", however if you consider us as individuals, we have never received one dime from the Wellmark insurance company, yet our premiums keep rising. We understand that the health care plan Congress has passed is confusing, to say the least, and insurance companies are scrambling to raise rates now to cover implementation of the Health Care Plan (which very few people understand). However, the intent was to help retired persons, such as us, manage the cost of health care. Every dollar is important to us when we are on a fixed income. We do feel raising our rates, when we have not had a claim with Wellmark, is not justified.

Thank you for your consideration in this matter.

Ida Says:

November 29, 2010 at 12:22 PM

This week I received a notice from Wellmark Blue Cross/Blue Shield on their proposed monthly premium increase to my health insurance policy that is to go into effect 4-01-2011. I strongly oppose this increase. If this increas is allowed to go into effect on 4-01-2011 that will mean my premiums would of gone up +53.8% in the last 2 years. Here is a history of my health insurance premiums over

the last 2 years.

Date Premium rate % increase \$\$ increase

3/29/2009 \$223.25

4/1/2009 \$248.55 +11.3% \$25.30

5/1/2010 \$302.15 +21.6% \$53.60

4/1/2011 \$343.25 +12.0% \$41.10 (Proposed)

In 2 years my health insurance premiums would go up +53.8 of \$120.00 per month

My deductible is all ready at \$9500.00. I do not want to drop my health insurance coverage for myself and my son. But this propose increase would take up 31.0% of my monthly income. Two years ago my health insurance took about 20.0 of my income. It is going to be hard paying my monthly bills with over 30% of my monthly income going to pay my health insurance premiums.

Soon all Iowans that need to have health insurance but will not be able to afford it. It is all ready difficult for me to afford my health care premiums now. This IS NOT AFFORDIBLE HEALTH INSURANCE. Wellmark is positioning themselves for more profits. Look what they did when federal health care went into effect to cover all children with pre-excising conditions. They DROPPED individual children health care insurance.

At the public hearing to be held on January 6, 2011 please encourage the Iowa Insurance Commissioner to vote NO for any health care premium increase in 2011 for Wellmark Blue Cross/ Blue shield.

Lee and Frances Says:

November 29, 2010 at 12:32 PM

I'm writing to urge you to reject the proposed rate increase proposed by Wellmark Blue Cross and Blue Shield of Iowa.

Our daughter is an R.N. at *****Health Center in *****. They quit contributing toward health care when the premium was \$438 monthly. In April, 2009 the raise was \$43.90 to \$482.70 per month. And the latest, as of April, 2010, her monthly premium went up \$106.20 to \$588.90. That's for a single person, age 55. It's more than she can afford.

I firmly believe the days of for profit health care must end.

Erin Says:

November 29, 2010 at 2:27 PM

I am writing because I am extremely concerned and disappointed in Wellmark's decision to stop selling child-only plans in Iowa. As a parent and as a human I believe that every person has a right to have access to health care. While my kids are covered, I shudder at the thought of a child going without care because his/her family cannot afford the family plan that Wellmark says is available for kids with pre-existing conditions. It seems to me that this would be a form of age discrimination. I would like to know what the Insurance Commissioner plans to do about Wellmark's decision.

Ellen Kulisek Says:

November 29, 2010 at 3:30 PM

I am writing to express my concern for and strong objection to Wellmark's request to increase rates by 10.8%.

Last May 1, 2010, my rate was increased by more than 34%!! I am a healthy retiree who would like to monitor her health with annual visits to two doctors in order to avoid any potential catastrophic health events. I think that is a reasonable thing to do and would be considered acceptable by most people, including Wellmark. I have asthma which requires a single visit to my specialist a year at a cost of about \$150. Does that warrant an increase of my premium by nearly \$900/year? Oh, I forgot, I also see my primary physician to insure that everything else is working well. That might add another \$400/annually to my health cost. Again, I assure you that my current annual insurance premium of \$8359 should cover that, don't you think?

Last winter, I needed to visit a specialist. It was shortly after this visit that I received the notice of increase which was to take place April 1, but as noted, started May 1. The reasons listed were "increased activity". This increased activity was still well below my annual premium. I believe that no matter what the rate increase request, Wellmark will have a reason which they feel justifies the increase. I feel that in order to be protected, we have to endure increases annually and increases that will soon exceed my ability to pay. This would leave me in a very vulnerable position.

Now....I know that medical costs in this country are extraordinarily high and I find it remarkable that anyone who is retired or even working with a decent income could afford a hospital stay without insurance. Everyone MUST be insured if they are going to avoid potentially going bankrupt, going into foreclosure or worse if a hospital stay is required. To be fair, I do feel that there are medical institutions and/or individual doctors who are not completely honest and pad their pockets by ordering unnecessary testing which still does not lead to a clear diagnosis. Also, why is it when someone must purchase an individual policy, it is impossible to learn who is now currently in that person's "pool"? For all I know, I may be with diabetics, cancer sufferers, or people who are not taking care of themselves (forgive me, but extreme obesity is one example of not taking care of oneself) which may lead to very costly treatments down the line. Is my high premium helping to cover the medical care of these people?

I am just trying to manage my health so that I can stay healthy, enjoy an active life style, which, by the way, helps to keep me healthy and take care of my 91 year old mother. I do not and have never abused the medical community with unjustifiable visits or treatments!

By increasing my premiums, you are swallowing up my pension and causing anxiety for my future welfare.

I implore the Commissioner to deny this increase.

Thank you,

Ellen Kulisek

Mike Says:

November 30, 2010 at 2:19 PM

28% is what my rates increased last quarter. Of course you probably already know that because you allowed that one as well. I sent a copy of it to Harkin also (never heard back) right after he sat on the round table discussion about Obama care and introduced a phony letter from one of his aids and embarrassed Iowans. I really don't know why I bother, when you get out of the cocktail lounge, drunk from BlueCross buying you drinks all night going to their room to sleep with them, a consumer doesn't stand a chance. I guess we should put together another consumer advocate group to watch you, (which would cost the consumer more money, create more jobs, and in the end be

another form of a tax) what a novel idea. History in the making, quite a time we are living in! "When you don't know where your going, chances are you'll end up somewhere else... When you don't know what your doing chances are corporate America (Blue Cross Blue Shield) will show you the way. When the fox (you) is finished guarding the hen house there won't be much of a chicken dinner left for me, in this case an average Mike.

Richard Says:

November 30, 2010 at 2:20 PM

The recent request by BC/BS – Wellmark to increase premiums in Iowa needs to be looked at very closely and at least redused or even rejected. This needs to be controled somehow. Health insurance carriers are dictating the market place along with service providers. Everyone is entitled to quality health care but it needs to be controled by someone?? Who??

Christopher Says:

November 30, 2010 at 2:21 PM

This is in response to the letter I received regarding a possible increase for insurance. I think it is ridiculous the rates that you are charging are already high enough. Its know wonder people cannot afford to have health insurance. I would like to see rates stay the same versus such a huge increase, that is insane

Ron Says:

November 30, 2010 at 2:27 PM

I am writing to you regarding the proposed changes to my insurance premium which is to become effective April 1, 2011.

The overall request from Wellmark was 10.80%. Per my notice my premium increase is 27.47%. I had to read the notice twice because I could not believe the increase.

I have not had any major medical issues for over 10 years. I visit my doctor religiously 3 times a year and take all my prescribed medication. This consists of 2 blood pressure pills and is the generic type. I have had a colonoscopy last year because I am over the age of 50 and receive a clean bill of health from this.

I am doing everything that is asked of me but my premiums increased by the 2.25% more than what Wellmark is asking.

I am not against Wellmark having a slight increase, but 27.47% is outrageous.

I would like to know what I can do to lower this premium because I will not be able to afford the payments soon.

Thank you for your consideration and advocacy in this matter. Hopefully some type of resolution may be reached in my matter.

Billie Says:

November 30, 2010 at 2:30 PM

PLEASE,PLEASE do not allow the 10.80% rate increase. My husband and I are 62 years old, we've worked our entire life and always paid for health insurance.

Two years ago my husband was without a full time job for 20 months. We had to decrease our coverage to a rate we could afford. Right after that they increased rates again.

We cannot afford a 10.80% increase. We always try to do the right thing, all of the rate increases are making people drop their coverage.

I hope there is something you can do.

Bill Says:

November 30, 2010 at 2:33 PM

I am completely against ANOTHER, rate increase. My insurance premium was around \$700 3 years ago. It has raised EVERY single year. The proposed new premium, \$1069, nobody can afford this health insurance. From \$700 to \$1069 is 50% higher from just 3 years ago.

This is unacceptable!

Molly Says:

November 30, 2010 at 2:52 PM

I recently rec'd yet another notice that my premiums for my health insurance through BC/BS of Iowa will be increased AGAIN in less than a year's time. I have a high deductible policy (\$7500.00) and currently pay \$481.15 per month for myself and my three children. Every year that I have been with Wellmark, they have made \$2-3000.00 from us, as we are healthy and rarely access medical care, unless it's absolutely necessary. How is it that they can increase my premiums when we have not been a liability???? They are making thousands of dollars off of our backs! How is it that people who are trying to live healthy lifestyles and rarely need dr. visits or medical care are punished by higher premiums every year!!!! ? They want to raise my premiums by well over \$600.00 per year—tell me how this is fair and just for a family like ours? BC/BS needs to look at individuals before raising premiums on EVERYONE—we should not have to pay more for others who are not healthy and prudent with the use of medical care.

I cannot keep going paying higher premiums—I don't even know what I am going to do to have medical coverage ? I am a stay at home mother who can't seem to get anyone to listen to the absurdity of what is happening with premium hikes. Am i paying for the new building that BC/BS "had" to build? What a f'ing monstrosity!!!

I expect a response and for my voice to be heard at the upcoming hearing being held on January 6, 2011. But what I REALLY expect is for my premiums to match our use of medical care—which is little to none.

Please let me know how these issues will be handled

Elizabeth Says:

December 1, 2010 at 3:19 PM

After teaching in Iowa for over 26 years and retiring, at the age of 62 I was forced to apply for individual insurance. I chose Wellmark and was, within less than a year, told my rates would be increased. I am upset with Wellmark when it states "they may also change my coverage, and benefit" and I am upset that they could be allowed this increase.

The original rates were excessive and the cost of medical care is way out of balance in the United States, at least for people on teacher's salaries who have to get individual insurance policies. It's time for medicine to be more competitive by providing federal insurance for all who want it. I would definitely benefit from federal insurance rather

than pay Wellmark's excessive rates.

Wellmark's increase should not be allowed to happen. I adamantly oppose making individual policy holders pay more for the insurance policies they applied for and already received.

Timothy Says:

December 2, 2010 at 9:33 AM

I have trouble understanding my insurance rate gain again. I am a teacher and was insured by BC/BS and was being charged over \$500 a month with no health problems. I was told the reason for such high rates was that I was part of a pool of people that had many needs. Okay, I understand. Finally the state stepped in and said that BC/BS had to now finally give me the opportunity to have a single policy. I have had that policy just a few years. With this proposed increase again, I will have almost doubled my premium (from \$198 a month to \$328 to the suggested 10% increase on top of this – \$360). During this time I have continually taken all the steps to remain healthy so that I would not have to use my insurance. Yet, look at how I am getting charged. Now if teaching contracts had risen this much, I would understand this.....that is not the case. So how can a healthy person's premium go up about 45% in less than two years? Please explain how staying healthy is helping me keep my rates down so that I can educate the students in my classroom how this works.

David Says:

December 2, 2010 at 11:22 AM

This new proposed Wellmark rate increase for April 2011 appears excessive. My rate went up over \$60 a month in April 2010. I thought our new medical insurance reforms and programs were supposed to be beneficial.

Anonymous Says:

December 2, 2010 at 11:30 AM

Please do some thing for the people and not let this raise take place this year. Last year they sent out the notice and said the increase would be around \$78.00 and ours was a \$150.00 increase. We can not afford this much longer. Then Wellmark was on the news bragging about their 19% profit. I am sorry but what is wrong with this picture?

I would suggest that you refuse to let them increase the premiums this year and ask them to look inside themselves on where they could make some cuts. That's what Chevy and Ford where told by the Government when still showed up to their meetings asking for Government bail out in their private jets.

Here I can even help them get started on ways to stop wasting money. To notify us of their next requested rate increase, they sent to our 1 household four items. One to each of us on what the increase could be (but we all know it's always more) and the flyer on the rate increase hearing. So lets review if they would bundle us together in their computer, they could have put 1 flyer (not 2) with the rate increase notices – all in 1 envelope, so instead they used 4 stamps that could have been 1, 2 envelopes that could have been 1 and 2 flyers that could have been one and every thing could have been in one envelope. They do this with every household, and they could be saving a lot of money. Why not ask them to cut back on their waste instead of making it so easy on them and just giving them what they want when they ask.

I doubt that I get heard but thought it was worth a try.

OUR INSURANCE PREMIUMS ARE SO HIGH NOW WE CAN NOT AFFORD TO GO TO THE DOCTOR.

Philip Says:

December 2, 2010 at 11:42 AM

I am a self-employed farmer in Northwest Iowa. My wife and I and our son, a junior at Iowa State University, are very concerned about our Wellmark Blue Cross and Blue Shield health insurance premiums.

Wellmark of Iowa, an Independent of the Blue Cross and Blue Shield Association is proposing another increase to our premiums. They want \$196.20 MORE per month, raising our monthly premium cost from \$937.00 to \$1133.00 PER MONTH – a 20.9% increase.

When combining last year's increase with the proposed increase for 2011, that would be a \$364.00 increase PER MONTH in two years. This brings my total out-of-pocket expense, as a self-employed farmer, to \$13596.00 per year for health insurance, and that is with a \$1000 deductible per person. This increase is unrealistic and difficult to handle in our budget.

The Des Moines Register ran an article on Saturday, November 13, 2010, concerning Wellmark's premium increase. In that article, it listed Wellmark's increases since 2006.

2006 13.1%
2007 4.3%
2008 9.3%
2009 9.3%
2010 18%
2011 11%
= 65.0%

Sixty-five percent is far and above the normal standard of living increases since 2006. As a farmer, I would love a 65% increase in income since 2006.

Wellmark's new 250 million dollar headquarters seems irresponsible in these times of economic uncertainty. I have several unanswered questions – how much money was paid in salaries and bonuses to top executives? Wellmark wants a 3% profit on its premiums collected. Three percent does not sound like much, and yet, three percent of billions in premiums could convert to huge sums of money in profit.

I know I am only one small voice – one short letter, but please take all of these points into consideration and help the little guy struggling to make ends meet. I don't know what I am going to do to be able to afford health insurance for my family.

Dee & Mike Says:

December 3, 2010 at 8:26 AM

I would like to know why doctors, hospitals and pharmacies, automatically assume they can demand more money every year. My wages have been frozen for the last 2 years. The government has not given cost of living increases to those on Social Security for the last 2 years. How are people supposed to budget for the yearly increases in health care insurance, when they aren't getting any extra compensation to do so?

I get very frustrated when I watch the evening news and 9 out of 10 commercials are for drugs. The drug companies could cut costs if they didn't advertise so much. We have been told by our insurance carriers to avoid any drugs that are shown on television. The insurance company will not cover the cost of "new drugs", yet one of the reasons for this new rate increase is "drug costs continue to rise". Perhaps if more time was spent reducing fraud, and less spent on advertising, there wouldn't be a need for such huge increases demanded every year. Please "just say no" to more increases at this time.

Sara Says:

December 3, 2010 at 2:46 PM

I'm concerned that Wellmark is again raising rates. I'm retired, and my policy already does not pay for anything related to the heart.

I hope someone at the state level can stop this. I want more than a two month delay in raised premiums this time.

Derik Says:

December 3, 2010 at 2:49 PM

There are responsible consumers out there that work to minimize health care dollars. I object to the projected increases in costs. A projection is just a possible and not a guarantee, and I already had to double my deductible to afford the premiums.

Wellmark must stop, where is this going to stop? What am I supposed to do? 20% of my income goes to health insurance. I am so frustrated.

Bruce Says:

December 3, 2010 at 2:52 PM

BCBS should control the costs from hospitals, big money is being spent there, and it's being passed on to share holders.

That new office had to be paid by someone. If this new building is really saving them money, it should be passed on to shareholders. All funds and money ultimately comes from the share holders.

The average person can't afford insurance increases.

Anonymous Says:

December 3, 2010 at 2:54 PM

I had a \$800 a year increase and I just bought this policy last year. I believe that Wellmark is deceiving us about their costs. Why do they need 28% in one year?

I took early retirement, and if this trend continues, I will not be able to have any health insurance at all. I feel like I'm being placed in a really bad position.

Joyce Says:

December 3, 2010 at 2:55 PM

I'm self employed, and I'm very upset about this increase. I'm going to have to drop my insurance coverage.

Arlen Says:

December 3, 2010 at 2:56 PM

My rates keep going up and up. I can't afford this! Either I stop taking my medication or I give up my health insurance, because I can't afford both.

I know I can't be the only person in this position!

James Says:

December 3, 2010 at 2:58 PM

Wellmark is a well-capitalized business, they don't need this increase. What they should be doing is giving credit for consumers that are healthy and not using their coverage. I don't believe that this large an increase is necessary.

Bill Says:

December 3, 2010 at 3:00 PM

This is a huge increase, way too much. Half of what they are asking for may be reasonable. They should be looking at ways to control their costs more. 10.8% is too much.

Maybe hospitals shouldn't be charging so much. The increased premium is too much for me to pay when I'm not even using my insurance.

John Says:

December 3, 2010 at 3:01 PM

No one in this economy should get an 11% per year increase. It's ridiculously high. I understand they have costs, but so do we.

Jill Says:

December 3, 2010 at 3:03 PM

This is the second increase I've had in the two years I've had the policy. For two people, we're paying almost \$16,000 a year. This is crazy! I'm being forced out of my healthy risk pool because of price.

Shawn Says:

December 3, 2010 at 3:04 PM

I can't afford the premium increase. My pay per hour has been cut on my job, and I have two children to support.

Steve Says:

December 3, 2010 at 3:05 PM

The letter I got was confusing. It's hard for me to understand why they need to increase their premiums so much for someone healthy.

Keri Says:

December 3, 2010 at 3:06 PM

I haven't been able to work for the last few years due to a medical condition, and I've seen a 37% increase in premiums in one year. We already have a high deductible plan. What do you do in this situation?

Heather Says:

December 3, 2010 at 3:08 PM

I'm self-employed, classic middle class. We can't afford over \$800 a month in premiums!

It's tempting not to be insured.

If we have any say, we would not like this rate increase to occur.

Mark Says:

December 3, 2010 at 3:08 PM

Prices are always going up. I feel like there's nothing we can do.

Alex Says:

December 3, 2010 at 3:10 PM

I can't afford a rate increase. I'm self-employed in the agriculture business. I don't think the increase should be allowed.

I get a \$5000 deductible and I can barely afford that. I'm very unhappy with Wellmark due to all the increases.

Expenses are going up and income is going down, and the end result will be me losing insurance coverage.

Darwin Says:

December 3, 2010 at 3:12 PM

I run my own business. I raised my deductible, changed pools, and I hardly go to the doctor. There are people who abuse the system, you should be going after them for rate increases. The system is totally messed up.

Anonymous Says:

December 3, 2010 at 3:14 PM

We are continually getting rate increases each year. The last rate increase caused our family to go into a high deductible plan.

Insurance is not even paying for anything! We are paying every medical cost out of pocket plus monthly premiums of over \$700.

Anonymous Says:

December 3, 2010 at 3:16 PM

The past three years my insurance kept going up. I don't know how they can think that people in this economy can pay this.

Someone is being very irresponsible with the people in Iowa, it is getting to the point where how much money do these people have to have?

No one else has had equivalent pay increases, and I can't get the same coverage for a private/small business either.

Robert Says:

December 3, 2010 at 3:18 PM

I'm over 60 years old. I have a high deductible HSA plan. Price never go down.

I don't believe the mailing sent out by Wellmark. I think they're making money and that we the policyholders are paying for their new building.

It's getting to the point where I can't afford insurance at all.

Steve Says:

[December 3, 2010 at 3:22 PM](#)

The requested increase is more than 10.8%. Prices have gone up almost 50% in the last two years. This is ridiculous!

I might have to leave the insurance market, because it's not practical or affordable to pay so much for insurance that is never used.

Larry Says:

[December 3, 2010 at 3:23 PM](#)

My insurance is going up nearly double.

Jeffrey Says:

[December 3, 2010 at 3:26 PM](#)

My premium will go up over 50%. It's out of control! I can't send my entire paycheck to Blue Cross Blue Shield. I think they have a monopoly.

The money for that new building had to come from somewhere, seems like my whole retirement check is being used toward funding their building.

Bruce Says:

[December 3, 2010 at 3:31 PM](#)

I believe in paying my insurance premiums, but the rate increases keep coming. I feel Wellmark is making excuses for why they need the increase.

I'm 60 years old, and it's difficult to afford this, it's just getting ridiculous. I work for myself and this health insurance is not working for me. The monthly health insurance payment is my highest bill.

I also don't think government employees' health insurance should be paid for. There aren't enough self-employed workers to have a big enough pool, and 100% of government workers' health care should not be paid. I pay enough, and I pay it all out of pocket.

I will have to make a choice about having health insurance coverage, or dropping it. Wellmark has no competition, and they control the politicians.

Mavis Says:

[December 3, 2010 at 3:32 PM](#)

My increase was \$240. I think that is horrendous! I'm at the age where I can't switch insurance very easily, and I don't think the age rate increase is reasonable either.

Harold Says:

[December 3, 2010 at 3:34 PM](#)

I am disappointed about this increase. We go through this every year and they get significant raises.

I'll probably drop my insurance coverage.

Lanny Says:

[December 3, 2010 at 3:34 PM](#)

Rates are getting awfully high.

Elizabeth Says:

December 3, 2010 at 3:35 PM

How can I afford insurance when it keeps going up? It's \$1200 for just me, that's ridiculous!

Sharon Says:

December 3, 2010 at 3:36 PM

This is the second year in a row we've had a big increase. My husband and I are semi-retired, we can't afford this. How can Wellmark justify this much increase? How much money do they have to make? I would serve on any kind of committee to stop these increases from coming every year.

Alan Says:

December 3, 2010 at 3:37 PM

I'm totally against the Wellmark price increase, it's not justified. There's no reason for an increase of this amount. Hospitals have raised some rates, but not that high!

Anonymous Says:

December 3, 2010 at 3:38 PM

Are the CEOs getting an increase? How about that new building?

Anonymous Says:

December 3, 2010 at 3:38 PM

My insurance has already gone up \$50, now it's going up another \$50.

I understand why it goes up, but I don't want to have to pay that much.

Kim Says:

December 3, 2010 at 3:39 PM

a 49% increase is RIDICULOUS. I can't afford that amount every month.

Anonymous Says:

December 3, 2010 at 3:41 PM

We are retired and on a fixed income. I'm not happy with this year's increase and extremely unhappy with next year's increase.

We can't afford the extra costs. It seems like no one is looking into how they can cut medical costs.

If this is Obamacare, I don't believe it's helping at all.

Payer and Physician Says:

December 3, 2010 at 3:44 PM

Insurance premiums are too high. I'm a low insurance utilizer and a family physician, and I pay \$1,400 a month. As a provider I see people use services, and no one truly knows where all the money goes. Provider reimbursements are going down..where's the hole?

Insurers are making payment more difficult for their own reasons.

Rhonda Says:

December 3, 2010 at 3:44 PM

I don't understand why there is an increase when my son never goes to the doctor. We might have to shop around for better prices.

Tom Says:

[December 3, 2010 at 3:46 PM](#)

I had a 17.8% increase last spring. I have no health problems, no chronic care issues, no big claims.

I don't understand why Wellmark is having yet another rate increase? Who is responsible for that?

James Says:

[December 3, 2010 at 3:47 PM](#)

The increase will make my premiums nearly \$600. I don't know how much longer I can pay this, I have a wife and kids to support.

Rhonda Says:

[December 3, 2010 at 3:49 PM](#)

This is the second increase in as many years. We might have to change insurers if the increases keep coming every year.

Why do they keep increasing their rates? They can't keep doing this.

My insurance has nearly doubled in the last 4 years.

People will drop their insurance coverage, and that won't help anyone.

Please deny the increase. No one can afford this.

Shirley Says:

[December 3, 2010 at 3:50 PM](#)

Retired people are not going to be able to afford insurance. When will it all stop? We will not be able to afford insurance if it keeps increasing.

Anonymous Says:

[December 3, 2010 at 3:51 PM](#)

This rate increase has put a financial strain on my family. I don't know how BCBS thinks they can keep raising rates and have people still afford their product. It eats up a HUGE amount of income. It's getting so expensive people can't afford their basics.

I feel like voicing my opinion won't help, but please...their current rates are high enough.

Paul Says:

[December 3, 2010 at 3:52 PM](#)

BCBS don't need their high salaries and new big buildings.

Bob Says:

[December 3, 2010 at 3:53 PM](#)

I don't believe a 52% rate increase is justifiable.

Marlena Says:

[December 3, 2010 at 3:54 PM](#)

Increase more? Again?

Please try and negotiate them down.

Kirk Says:

[December 3, 2010 at 3:56 PM](#)

I have a high deductible plan. I don't know why the rate is rasing so much. How are their costs increasing from me? Over the past three years, that's a huge increase.

I'm a farmer/ self-employed. I don't know if I can afford the new rate. I want Wellmark to cover more preventative care. My rates have increased almost 20% every year, way more than inflation. It's just not affordable anymore.

John Says:

[December 3, 2010 at 3:58 PM](#)

My increase is very substantial. The cost of living keeps going up, but wages don't. It's coming to the point where insurance is not affordable anymore. My increase this year was 15%- and they just had an increase last year. High deductables aren't even affordable anymore. If increases continue at this point, I'm done.

Anonymous Says:

[December 3, 2010 at 3:59 PM](#)

I just upped all my deductables and my monthly payment could be \$1500 with the new increase. I don't know what to do. I already have a high deductible!

Joseph Says:

[December 3, 2010 at 4:02 PM](#)

I've over 60 years old, with a policy exclusion for heart problems. My rate increased over 42%. This is ridiculous! I'm diabetic and I can't afford my testing system. I may have to go without insurance.

Jean Says:

[December 3, 2010 at 4:04 PM](#)

I'm on disability, and my husband works three jobs. My daughter no longer qualifies for Hawk-I or Title 19. We might be forced to drop her from our coverage, or move into a high deductible plan.

Matt Says:

[December 3, 2010 at 4:06 PM](#)

This is the second rate increase for us. We rarely go to the doctor. We'd be better off paying for health care out of pocket. My increase is going up 14%.

Members should have a voice since this is a member-owned company.

I don't know why we even bother to pay for insurance, no one else would buy from a company that has a 37% increase over two years.

Coale Says:

[December 3, 2010 at 4:07 PM](#)

These rate increases seem to happen every year. We are going to have to pay over \$17,000 annually.

Al Says:

[December 6, 2010 at 10:35 AM](#)

Wellmark is targeting those who do not have group coverage- these people could easily be unemployed or underemployed. Also, why do I always seem to be part of the pool that suffers bad health?

Carol Says:

[December 6, 2010 at 10:38 AM](#)

Wellmark increased my premium last year and now they're doing it again! I can't afford this. I would be paying \$600 a month. I have a pre-existing condition, so I can't go anywhere else. I work three jobs and no employer pays for my coverage. I pay out 1/3 of my salary to Wellmark. This has to stop.

The premium hike will cause massive hardship to me. I especially have a hard time dealing with this while Wellmark is showing off their fancy new building.

Paul Says:

December 6, 2010 at 10:40 AM

There's no cost of living increase for Social Security, but we do have a rate increase with Wellmark. This is a problem because the pool groups everyone together.

My policy has double in cost over the past three years even with a \$10,000 premium.

I don't know how they are getting such a large increase amount- it's way too much.

Bruce Says:

December 6, 2010 at 10:41 AM

I don't know when these rate increases are going to stop. It's unfair, and I haven't had any significant claims.

George Says:

December 6, 2010 at 10:43 AM

Wellmark raise my rate this year already. Now they want to do another rate increase. I can barely afford the existing coverage. I'm getting closer to 65 and I have no other options for insurance. I think that Wellmark is really taking advantage of this age group, all because of greed.

Nathan Says:

December 6, 2010 at 10:46 AM

My coverage started 2 years ago. Just the increases in that time will cause a \$200/mo increase. How does this work? I don't ever get raises that are over 10%. I don't get coverage through my job, so we pay premiums all on our own.

A \$600 monthly premium is not affordable for us! We're told by Wellmark that they are raising rates because they are not making a profit. I find this hard to believe- we are healthy people who barely use our plan benefits. They're making lots of money from us.

Naomi Says:

December 6, 2010 at 10:49 AM

I was retired, but I have to go to work now just to pay for insurance coverage. I can't afford this! I think it's terrible for seniors to have to work just to be properly insured.

I feel that some of us are too deated even to comment on the proposed rate increase, because we feel we don't have any choices.

And that new building! A totally unnecessary expense.

Don Says:

December 6, 2010 at 10:51 AM

This is crazy! Why should an insurance company get a pay increase when no one else is? The economy is in bad shape, they should suffer with the rest of us.

Lois Says:

[December 6, 2010 at 10:52 AM](#)

Each year the rates keep going up. I lost my job, but I'm fortunate that I don't have to use my insurance coverage. Something HAS to be done. Social security payments haven't gone up. There should be a cap on premium payments.

Ken Says:

[December 6, 2010 at 10:54 AM](#)

Our overall increase is over 50%. The rate increase is unjustified- Wellmark got an increase just last spring, how can they justify another big increase less than a year later?

I haven't even filed insurance claims in years due to our high deductible.

Tiffany Says:

[December 6, 2010 at 10:55 AM](#)

I'm a student, and I don't have enough money to pay an increase. I might have to drop my coverage, but I'm required to have health insurance for school. What can I do?

Robert Says:

[December 6, 2010 at 10:58 AM](#)

I am against the Wellmark rate increase. I don't use my policy benefits, and I haven't been to the doctor in 7 years.

A lot of people don't take care of themselves. Why should I be penalized for their bad choices? I feel like I'm being penalized for having good health. Every time I turn around, my rates increase.

This whole thing is crazy, doesn't make sense.

Patty Says:

[December 6, 2010 at 11:00 AM](#)

Our projected rate increase is dramatic. How does Wellmark think people are going to pay these inflated premiums? We need help, we can't afford what we are paying now.

We own a small business, we can't afford our own coverage, much less to pay for employee coverage.

Steve Says:

[December 6, 2010 at 11:05 AM](#)

We just went through a rate increase. How can Wellmark need another one already?

I have four years to go before I can go on Medicare. Under the proposed rate, I will be paying \$14,000 with a high deductible plan.

I'm self-employed, I can't afford rate increases like this every year.

We need to control doctors' office bills, the whole medical industry needs to be looked at.

If anything, policy discounts should be given to those who are healthy and not costing the insurance company money.

Also, I don't like paying for a fancy new office building!

Connie Says:

[December 6, 2010 at 11:06 AM](#)

I've had my policy since 2007 and I've never used it because of my high deductible. These rates are ridiculous! I feel like there's no way I should be billed this much. The government needs to do something!

Wayne Says:

[December 6, 2010 at 11:08 AM](#)

In the last 2 years, my rates have gone up over \$275 a month. I have a pre-existing condition, so I can't switch insurance companies. Why can't everyone in Iowa be in the same pool instead of multiple mini-pools?

I have a high deductible plan, and even that doesn't seem to keep the premiums down much.

Donna Says:

[December 6, 2010 at 11:09 AM](#)

My husband and I are retired, ages 58 and 64. If our premium gets any higher we are going to have to drop our insurance. Why does Wellmark get to keep raising their rates? I just don't understand.

Debrah Says:

[December 6, 2010 at 11:10 AM](#)

My insurance has tripled in price. The premium is getting to be more than I can handle budgetwise.

Every year it goes up!

Lavan Says:

[December 6, 2010 at 11:12 AM](#)

Please, protest these rates. I pay for my daughter's policy, she can't afford it on her own. It's gone up over \$50 a month just in two years. Her wages haven't gone up at all in this time. She simply can't afford the coverage.

Andy Says:

[December 6, 2010 at 11:13 AM](#)

My premiums would increase over \$200 a month- that's way too much. Our insurance rates have continued to go up each year. We are both turning 60 this year, and have low usage of our policy.

Myland Says:

[December 6, 2010 at 11:17 AM](#)

My proposed premium will be about \$20,000 a year, over a \$300 per month increase. Totally ridiculous that I have to pay that much. I'd be better off dropping my insurance coverage and living on the state.

EVERYONE should be in the same pool, and no pool-switching should be allowed.

I've already had to raise my deductible to afford coverage. And that was last year. Now what can I do?

Bonnie Says:

[December 6, 2010 at 11:18 AM](#)

I'm truly concerned about this increase. My rates went up over 50% just last year. We're a retired couple. What can we do? You can't get free health insurance.

We must take a stand against unreasonable increases.

Karen Says:

[December 6, 2010 at 11:20 AM](#)

This Wellmark rate increase is so upsetting. It's almost a hundred more per month. I pray that this rate increase won't go through.

I know that some of the mandates are expensive, and it's been a difficult financial time for the last three years, but I can't afford to keep this insurance if the rates go up. I may have to go on public assistance.

Larry Says:

[December 6, 2010 at 11:22 AM](#)

I'm 62, have had insurance with Blue Cross for years. My wife and I pay \$1027 a month now, our increase is over \$100 a month. What does a person over 60 do? Are there any options out there for us?

We should have the Canadian system. Then at least everyone would be covered.

Judy Says:

[December 6, 2010 at 11:23 AM](#)

We have been paying \$1500 a month, and we're a less than middle income family. We can't afford this.

Jean Says:

[December 6, 2010 at 11:25 AM](#)

I'm 63, and I don't qualify for low-income programs. I'm still trying to recover from Blue Cross' last increase. I'm scared to even use my coverage, in case that triggers further premium increases.

The new increased amount requested will take a WHOLE PAYCHECK- my employer doesn't offer insurance.

Diane Says:

[December 6, 2010 at 11:27 AM](#)

I think the increase request is crazy, because Wellmark just increased their rates.

I live off a small widow's pension and have a small income. Premium prices keep going up, and we have to pay for the people on government insurance too.

Mr S Says:

[December 6, 2010 at 11:30 AM](#)

I'm on a fixed income on social security, but I'm not old enough for Medicare. I can't afford the current deductible and I'm trying to find ways to pay that now. I've already lost my home, and there's no money left after paying the bills.

With my health condition, I can't change insurance. If the increase is passed, I will have to drop my insurance.

For the elderly, there is no help coming- the rate increase isn't affordable. I don't want to lose my coverage and be left on public health assistance.

They want a rate increase, and all I see if how they spent money on a brand new building.

Diana Says:

[December 6, 2010 at 11:31 AM](#)

My husband and I are retired and on a fixed income. We can't afford the increase of \$554 every 3 months. It will be a burden to find the money to pay it.

Lee Says:

[December 6, 2010 at 11:33 AM](#)

Last year we had a huge rate increase. You would think that BCBC had received enough extra money last year!

I even changed my policy after that, and I still have a rate increase.

Anonymous Says:

[December 6, 2010 at 11:34 AM](#)

I definitely want to complain about the Wellmark increase.

Rates keep going up, it's just ridiculous People are not going to be able to afford coverage at all.

Andriette Says:

[December 6, 2010 at 1:10 PM](#)

The executives don't need their mega salaries and bonuses. I feel like its white collar crime. I also resent that my rates go up for the unhealthy lifestyles of other people. People like me who never file claims, have a high deductible, and work at being healthy should not be penalized with this rate increase. Insurers need to look into treating those with healthy lifestyles differently.

Kathy Says:

[December 6, 2010 at 1:13 PM](#)

I have a limited income and everything has gone up, including Wellmark's prices this year already. My family does not use this insurance as it is a high deductible (\$10,000) policy. I would like to protest this increase. The problem of increased costs need to be fixed. Simply charging more in premium each year will not fix the issues and is not the solution.

Josephine Says:

[December 6, 2010 at 1:16 PM](#)

This is just terrible. I like my health insurance but I don't know if I can afford to keep this. Why does this keep happening? Its constantly going up and it has increased over \$200 over tow years. I disagree with this increase.

Debbie Says:

[December 6, 2010 at 1:19 PM](#)

It seems like my health insurance goes up all the time. i raise my deductible as much as they raise the premium and I still end up paying more with no additional coverage. I am married with children and self- employed farmers. i am paying \$507 now and its going up to \$585.00. I have a \$5,000 deductible I have to meet first, so I pay for all of the doctors visit. i can't afford this anymore. paying everything out of my pocket, due to my deductible.

Ceceila Says:

[December 6, 2010 at 1:21 PM](#)

I received a letter about my rates going up in April 2011. The new amount for my son's policy is too

high.

Roger Says:

December 6, 2010 at 1:28 PM

The coverage we signed up for couldn't be farther from what we have received. However, BC/BS still extracts the same monthly amount out of our checking account. They have not offered to lower our monthly premium compensating for the lesser coverage, but they have been extremely good about raising our premiums 20+% annually for the past 10 years. Apparently, they operate off of a different inflation rate than what the government reports.

Dallas Says:

December 6, 2010 at 1:47 PM

My increase is over 50%. I can't believe it. This is a lot more than the little less or little more than the 10% mentioned in the letter. That will be over \$600 a month for me and my wife. We are both going to be sixty next year. This is cost prohibitive and I don't know what I'm going to do if this rate increase goes thorough.

Jan Says:

December 6, 2010 at 1:59 PM

We had an increase this year of 44%. Our only option was to get into a different group plan with a younger members and we were denied that option (due to pre-existing conditions). So we went into a HSA plan. This is a lesser policy which does not offer prescriptions.

Another increase is making it tough. My husband is unemployed and only I am working. Its not affordable and I'm trying to keep my health insurance, but I can't afford this.

I think the company is wasting resources: the new building, mailers, and other things that could be found on the internet. I wanted to share my objections (though I don't know if it is going to do any good).

Michael Says:

December 6, 2010 at 3:15 PM

Please present this comment at the public meeting. We want a public option for health insurance instead of present insurance company for profit health coverage. Your public meeting is pointless without a choice of government public option or private health insurance. The buyer has no option except annual underwriting by an insurance company at this time. At the meeting please hand out national lobbying payments to congressmen at all levels by insurance industry in past two years. Since I can not attend, please mail the lobbying payments list to me. Where is lobbying payments in the rate increase amounts to be discussed at the public meeting ?

Scott and Barb Says:

December 6, 2010 at 3:17 PM

I would first like to say, I am quite happy with the coverage that myself and my children receive on our Wellmark Blue Cross and Blue Shield of Iowa Insurance. It has been EXTREMELY disappointing to have have our Premium Rates Increase approximately 33% from April 1 of 2010 to April 1 of 2011- (Adding the 2010 (20%) and 2011 (13%) rates together).

While I understand the Wellmark is a business and needs to make a profit, I also feel at times they need to take a risk and possibly not make quite as much money some years. This is an extremely bad time to raise rates for customers and will most likely resulting in people going with out insurance or

underinsurance – which will raise costs again, continuing this cycle.

I respectfully hope that the Iowa Insurance Consumer Advocated can convince the Iowa Insurance Commissioner to think strongly about the rate increases over the last year and deny or reduce this increase to to be more in line with a cost of living increase of 2 or 3 percent.

Darlene Says:

December 6, 2010 at 3:19 PM

I want to voice my opinion on the proposed rate increase by Wellmark. Flat out, I think its robbery. Our rates went up \$60 a month at this time last year and now they want another \$42 plus a month? No way. I don't have it.

These consistently high rate increases will force many people to drop insurance all together and join the thousands who are without insurance. Therefore, you will be contributing to the problem rather than helping fix it.

We are both healthy and rarely go to the doctor. We would be better off paying out of pocket for services and bagging Wellmark insurance all together. If rates go up, we will be looking elsewhere for insurance or joining the uninsured, and we will put our hard earned money towards something else rather than paying for Wellmark's good fortune.

I understand that cost rise, but this is outrageous. Please deny Wellmark from raising rates yet again.

Toni Says:

December 6, 2010 at 3:22 PM

My BCBS insurance is going up from \$450.35 to \$519.25 a month. We are struggling to afford the first premium.

Here is my situation-

My husband and I were hog producers. Have been since, it seems, time began, selling 30,000 pigs a year. In 2007 we ordered new gilts from PIC. They came with the disease PRRS. That about broke us but we survived. Next year in 2008 Ethanol drove corn prices up to \$7.00 a bushel. We were paying \$1.86 before the hike. Can you imagine feeding 1,600 sows and all the pigs \$7.00 a bushel corn and surviving? We did survive that. In 2009 'Swine Flu' came into effect shutting down all exports and driving prices down. Well, guess what? That was the straw that broke this camels back. Our financial advisors closed us down sending truck after truck, lining up on the gravel road, backing down to the sow units and loading up our beautiful sows to go to market. Truck after Truck after Truck. Unless you have been in this situation, it's about more than a man can handle. Understand, we did not get any of this money. Our lenders got it. Then the bank forced us to sell our inheritance land. 40 acres that has been in the family for more than 100 years. We received no money from this either. We have been trying to sell the sow unit and have a wonderful Realtor for this, but no one is buying. No one! We have to sell it by the end of this year or we will be forced into bankrupsy. This is the LAST thing we want to do. My husband and his brother are very reputable farmers.

What I am saying is, we have no extra for this increase in my insurance premium. My husband was an ARMY Platoon Leader in the 101st Airborne in Viet Nam and gets VA benefits, so we are not too worried about him. It is me.

I am 50 years old. I had to have a breast biopsy, a biopsy on my nose and my toes operated on this past three or four years. I could not help any of these procedures. They had to be done. I hope I am

now healthy enough to withstand the next twenty years without any major operations.

Please, Please help us to maintain my health insurance without having to pay a higher premium. My husband will be 65 next year. We really need your help!

Pam Says:

December 6, 2010 at 3:23 PM

This email is regarding the proposed rate increase to my children's health insurance. We have consistently experienced a significant increase in our their health insurance rates for the past 4 years – much more than a normal cost of living increase. Unfortunately, because my oldest daughter was diagnosed with cancer 5 years ago, we have to pay the highest premium possible and can never get her into a lower paying category. This is very disturbing to me as parents who suffer the most financial burden due to their children's medical conditions must also pay a significantly higher amount of money for health insurance for their children. Health insurance rates are out of control and we, the consumers, are the ones having to "pay" for it!

Judy Says:

December 6, 2010 at 3:26 PM

My husband and I recently received a notice of intent for a medical insurance rate increase from WBCBS of Iowa. The notice stated that we could offer our comments regarding the rate increase and that this would be considered public record.

They stated our approximate increased rate will be an additional \$383 per year. Our rate just increased in May of this year by \$108 per month. We have only been able to afford medical insurance coverage with a high deductible, \$2,500. My husband and I our on Social Security and he recently got on Medicare which takes \$110 out of every Social Security check to pay for that plus we are trying to keep a medical policy going on each of us. We must pay out of our pockets an additional amount for his medical insurance over and above what Social Security takes out for Medicare. We are struggling with these hikes and we are not alone. The prescribed drugs we need to stay healthy are getting higher and higher as well. Recently I was diagnosed with a colon polyp that the doctors say could turn to cancer so I am scheduled for surgery to have that small portion of my colon removed. The colonoscopy test alone was \$2,400 and that is only the hospital charge not the doctors. We will need to make arrangements to pay the medical bills.

We do not need nor do we live extravagant lives. We live in a 36 year old modular home that we painstakingly paid off by both my husband and I working off the farm plus raised two children. I worked full-time from the time my children went to school to finally retiring a little over a year ago. That was 27 years of working at jobs to enable us to afford health insurance coverage and pay off our home. We both have worked hard for a lot of years and feel we should have the right to retire and not have to drop dead at a job just to keep our finances going.

What will happen to us if we no longer can afford medical insurance or our prescription drugs? Our fears are real judging by how many people are having to go without.

Please help us take a stand with the powerful medical insurance companies! We won't be able to attend the January 6, 2011, public hearing but we hope you will convey what a heavy yoke these increases are putting on people struggling to get by.

Robert Says:

December 6, 2010 at 3:47 PM

I wanted to voice my concerns and share my complaints. Why does insurance get increases every year when no other industry gets the same amount of increases. How are people supposed to afford all of these increases. We can't afford what we have now and we won't be able to pay with this

increase. You can not let them raise rates again. Its crazy. You can't let them do this.

Craig Says:

December 6, 2010 at 4:35 PM

I'm over 60 years old and I've had BC/BS for 20 years. I have spend in 20 years about \$2000 in claims money only. Last year we had just had to drop my wife's insurance last year because it was too high. We will have to look and to see if there is another insurance that company I can use.

Mark Says:

December 7, 2010 at 9:27 AM

I am writing to request you deny the rate increase asked for by Blue Cross Blud Shield. They have raised the rates of my policy by 40.80% in the last 3 years. If this increase is granted, from 307.55 to 454.05 per month.

I would love to enjoy such raises, my exspenses have increased in the last 3 years also – but I can't pass them on – I must absorb them.

Look at their physical facilities in Des Moines – rather over the top for a supposed non-profit!

Please feel free to deny such over board request by the company, I won't hold it against you.

My wife and I live a frugal life style – no cell phones, no computers – no internet – perhaps B.C.B.S. could become more frugal.

Dorreene Says:

December 7, 2010 at 11:11 AM

I can't afford it. I have not used my insurance at all. If you don't use your insurance you should not have to have an increase. I'm not happy with them and its a burden now. I only make \$25,000 and I'm self-employed.

Suzanne Says:

December 7, 2010 at 11:14 AM

I would like to stand on record against another rate hike for our health insurance. We have Blue Cross Blue Shield Transition health insurance. When I took early retirement from my employment after 28 years, I was able to convert to this policy without a rider for my husband because of his heart attack he had in 1997 because of a blood clot in an artery of his heart. He has not had any repeat or problems with his heart since this attack. When we started on this plan on Oct. 1, 2008, it was \$748 a month for the 2 of us (family plan). Since that date, we have already had 2 increases and are presently paying \$1,052.85 a month with a proposed increase in April, 2011 for our new rate to be \$1218.85 a

month. I understand that the medical professions are having to increase rates because of those unable to pay, but, I also know that insurance companies set the rate they will allow for treatments and that medical services have a floating range of charges. We cannot continue to take these rate increases and manage to pay the monthly premiums. We are semi-retired farmers in our 60's.

It will be over 2 years before my husband is eligible for medicare (if that is still an option for us). We ask that you carefully consider the impact approving another rate increase for health care has on the middle class people who are the backbone of this state as well as the country. This greediness of the entire health care system has created a spiraling circle, taking us all down into a level of poverty. It has to stop. When we all start qualifying

for welfare and state aid, who will be left to pay that tab?

I thank you for taking the time to read and consider my concern and I hope and pray that you will see another increase will not be in the best interest of the people of this state.

Linda Says:

December 7, 2010 at 12:13 PM

I see no reason for this rate increase. Its way too much. Even their rate increases are above inflation. 11% this year and a high amount last year also. I really disagree. Its gone up 22% in the last two years and that is unreasonable. I do not use or cost Wellmark anything because I take care of myself, I should not be subject to rate increases.

Tom Says:

December 7, 2010 at 1:49 PM

As it stands, within one year of becoming a policyholder of Wellmark Blue Cross Blue Shield I will have sustained/endured a 35% increase in my premium (without a change in coverage). Let me repeat that for anyone not listening: a 35% increase in premium for the same coverage; in one year. Name any other industry that we would tolerate passing on these kinds of cost increases. In order to do my own analysis of Wellmark's financial status, I contacted Wellmark to inquire, as a policyholder and owner in this mutual insurance company, about their financial statements. Attached is the course of that inquiry. Mystifying is the word that comes to mind with respect to their response; also quite patronizing. Interestingly enough, and not surprisingly, their final reply avoids the entire topic. The statistics provided by Wellmark in their application do not address executive compensations and offer little insight into the profitability of the company. I would assume/hope that the Iowa Insurance Commissioner has better access to that necessary information.

I was amused by the letter of application by Wellmark to the Iowa Insurance Commissioner for this proposed rate increase: "Dear Klete" ???..... What?!! Frat brothers? Drinkin' buddies? Golf partners? We're being told, by Wellmark, that the increase in the premiums is due to actions of others and events beyond Wellmark's control. Does that mean, then, that if those actions by others should change to decrease those costs which seem to be beyond Wellmark's control that Wellmark would reflect those changes with a decrease in premiums? Pardon me if I take a few moments to laugh out loud.

I do understand that the State of Iowa has a very cozy and beneficial relationship with the insurance industry. Maybe the State of Iowa should act in a manner expected by its constituents and consistent with a governing body. Too big to show a reduction in profits? Not to the policyholders of Iowa.

Oh yeah, Merry Christmas.

Documents from Tom:

Inquiry Status

Correspondence Number 24103250000100

Plan Member Number024

Plan Member Name THOMAS * ****

Submit Date 11/21/2010 15:07:12

Completion Date 11/22/2010 09:06:38

Question AS A "MEMBER" AND "SHAREHOLDER" OF THIS MUTUAL INSURANCE COMPANY, AND IN LIGHT OF THE PENDING PREMIUM INCREASES, AM I ALLOWED TO SEE THE FULL

FINANCIAL DISCLOSURES, INCLUDING PROFIT AND LOSS STATEMENT AND OFFICERS' COMPENSATIONS

OVER THE LAST SEVERAL YEARS?

TOM *****

TIMESTAMP 11-22-10 09:06:38 E235

Response THANK YOU FOR YOUR INQUIRY. WE APPRECIATE YOU CONTACTING US TO RESOLVE YOUR QUESTIONS AND CONCERNS. WE APPRECIATE THE TIME YOU TOOK TO CONTACT US ABOUT YOUR CONCERNS WITH YOUR RECENT RATE PREMIUM NOTIFICATION. WE UNDERSTAND YOUR CONCERN, AND WANT TO ASSURE YOU THAT WE ARE WORKING TO HELP SLOW DOWN THE RISE IN HEALTH CARE COSTS AND KEEP HEALTH CARE PREMIUM AS LOW AS WE CAN. YOU CAN GO TO [WELLMARK.COM/ABOUT WELLMARK/COMPANY INFORMATION/FINANCIALS](http://WELLMARK.COM/ABOUT_WELLMARK/COMPANY_INFORMATION/FINANCIALS) FOR ADDITIONAL INFORMATION.

LISA L. TIMESTAMP 11-22-10 09:06:38

Status Completed Inquiry

Inquiry Replied To

Replies To This Inquiry 24103260020100

Inquiry Status

Correspondence Number 24103260020100

Plan Member Number024

Plan Member Name THOMAS * *****

Submit Date 11/22/2010 10:49:10

Completion Date 11/24/2010 09:10:12

Question RE CORRESPONDENCE NUMBER 24103250000100:

COMPLETED INQUIRY? SO THIS IS YOUR ANSWER TO MY QUESTIONS: NO ANSWER?

TIMESTAMP 11-24-10 09:10:12 E235

Response WE HAVE RECEIVED YOUR INQUIRY AND REFERRED IT TO THE APPROPRIATE AREA FOR FURTHER RESEARCH. YOU WILL RECEIVE A FOLLOW-UP EMAIL WHEN THE REVIEW IS COMPLETE. LISA L. TIMESTAMP 11-24-10 09:10:12 I UNDERSTAND YOU'RE CONCERNED ABOUT EXECUTIVE COMPENSATION. WHAT YOU SHOULD KNOW IS THAT WELLMARK OFFERS COMPETITIVE SALARIES, BENEFITS AND INCENTIVES TO ATTRACT AND RETAIN HIGH-QUALITY EMPLOYEES AT ALL LEVELS OF THE COMPANY. WE STRIVE TO ENSURE THAT THE TOTAL COMPENSATION PACKAGE TO ALL EMPLOYEES (INCLUDING EXECUTIVES) IS AT THE 50TH PERCENTILE OR AVERAGE (MIDPOINT) OF THE MARKET. THAT MEANS WE TRY TO AVOID THE EXTREMES ON EITHER END OF THE PAY SCALE, INSTEAD AIMING FOR AN AMOUNT NEAR THE MIDDLE OF AN EMPLOYEE'S PEER GROUP OF PEOPLE WHO DO SIMILAR JOBS. WELLMARK'S ADMINISTRATIVE COSTS, INCLUDING SALARIES, ARE AMONG THE LOWEST IN THE INDUSTRY. TIMESTAMP 11-30-10 12:41:33 E235

Status Completed Inquiry

Inquiry Replied To 24103250000100

Replies To This Inquiry

Pamela Says:

December 7, 2010 at 1:50 PM

To Iowa Insurance Division Consumer Advocate:

I am writing to express my utter dismay regarding the proposed premium increase outlined in a letter dated November 2010 from Wellmark Blue Cross Blue Shield.

The proposed increase is \$80.40 more per month than what I am currently paying. When I first took out this policy in 2004, the premium was \$445.30; the proposed premium for 2011 is \$836.10! An increase of this magnitude is simply not acceptable.

I implore you to act on behalf of consumers like me who cannot absorb an increase of this size.

Sincerely,

Pamela

Anonymous Says:

December 8, 2010 at 10:42 AM

I'm concerned because we only have so much money. The type of coverage we have does not cover all benefits and he does not use it. We can not afford this.

Ed and Marita Says:

December 8, 2010 at 11:19 AM

We are writing in regard to the recent notice of proposed premium increase which we received from Wellmark Blue Cross and Blue Shield of Iowa, which is our healthcare provider.

At the public hearing on January 6, 2011, we would like to request that on our behalf you would encourage the Iowa Insurance Commission to deny the increase proposal.

Last May 2010 overall rates were increased on an average of 18%. Our premium rate was increased by 22% (they say the large percent increase was because of the particular "risk pool" that we are in). My husband and I are in our mid to late 50's. We are in excellent health (never having filed a claim). We currently have the lowest cost high-deductible health plan offered. So there is nothing that we can do to change our policy to reduce our premium costs. They are as low as they can be.

Our premium rate has almost doubled in the past 5 years. We paid \$282.70 a month in 2006. With the new proposed increase on April 2011 our total monthly premium will be \$526.70. That is an incredible \$6,320.40 a year. Our yearly income is now under \$40,000 and I fear that at this rate we will be unable to meet our premium costs in the next 5 years! We have another 8 to 10 years before we are eligible for Medicare (if those requirements don't change).

Please help us and thousands of other middle-aged – low income Iowans by encouraging the commission to deny the rate increase.

Ed & Marita Says:

January 12, 2011 at 2:07 PM

[Fax sent to the Insurance Commissioner, attachment is the correspondence/comment received above.]

Attached you will find a copy of the letter I sent to the Iowa Insurance Consumer Advocate about the proposed Wellmark rate increase.

Please read it and the many others he received and the comments e-mailed to his website before making a final decision on the rate increase.

I have read that you will base your decision on the actuaries' reports. Please, I urge you to take our positions into consideration, as well, when making that decision.

Thank you.

I do realize a rate increase will be inevitable, but I do hope the percentage rate will be much lower.

Ezekel Says:

December 8, 2010 at 11:36 AM

I'm finding it hard to remain with BC/BS because rates keep going up every year for my 2 year old son. I really disapprove of this. Its really hard becuae it keeps going up over 10% every year. Its as if we are being forced out to drop our insurance. I totally disagree. I need other options for health insurance. What am I going to do.

Jessica Says:

December 8, 2010 at 11:40 AM

I am deeply concerned about the Blue Cross Blue Shield rate increase indicated on my premium notice. There was a large increase last year and I now pay \$492.70 a month. This new rate increase shows my new rate would be \$111.30 more each month. That is up to \$604 per month. This is certainly way more than the 10.8% proposed! It is 22.6%!!

I am actually enraged by the experiences I have had with this company in the past two years. Here are some of the details:

1. I spent months trying to get help with my progesterone hormones payments. It is a long story that I will not go into, but I will state that I tried for months to get help with this issue. The bottom line to the months of phone calls and appeals is that until the last person, the people I talked to were not able to tell me why I was not getting help. It turns out, in the end, that I was supposed to submit 30 days at a time for payment. My pharmacy had been giving me paperwork that stated I was getting 60 days amounts at a time so I was refused payments. I suggest that if all of the people I had called and the people who got my appeals had been aware of this, a lot of time and energy on my part and the insurance company's part would have been saved.

I have taught adults and developed curriculum for over 30 years. I truly believe the insurance company needs to better train their people.

So, I suggest

* The people may need more training.

* Also, since I need hormones and they are not addicting it would save the insurance company time and money if I only send in paperwork every 2 months (or more) instead of the required every month.

2. I live in a small town in rural Iowa. I have tried very hard to find medical help locally. When I didn't find the help I desperately needed I found the help I need out of Iowa City, an hour away. The doctor came highly recommended and was very helpful. I have had to pay a very large portion of my bills as I was denied help from the insurance company. Many of the tests I had that helped me were not paid by the insurance company. They paid for the tests that didn't show anything! The process I

went through was exceedingly stressful and enormously time consuming during a time that I had to continue working feeling sick most of the time and spending my day off dealing with the paperwork from the insurance company. It seems to me if I am paying almost \$500 a month that I should be getting a lot more help than I am getting.

The good news is I am feeling better now but have paid more than my \$1200 deductible for the past 2 years. So this means I have paid out over \$5900 each year for my monthly charge for insurance and then over \$1200 more a year in medical expenses plus hours of calling and writing the insurance company asking for help. The insurance company helped pay for all of the doctors that didn't help me, but I have had to pay hundreds of dollars for the doctor visits and the tests she did on me that actually helped me. The insurance company refused to pay hundreds of dollars of the doctor visits and tests she had me take. There is something wrong with this picture!

I think the insurance company should lower my rates or help me more. So instead I am getting an enormous increase in my monthly rate! Why is this? So I can continue to pay them for a little bit of help with my bills and then continue spending lots of out of pocket and lots of time and energy dealing with the paperwork and forms?

I cannot help but feel the increase is in response to my continuing requests for reasonable help. Does this mean the squeaky wheel gets the bigger increase?

Again, I may have been a squeaky wheel, but I certainly didn't get much help! I am thoroughly disgusted with this system and the insurance company.

I certainly believe the 22.6% rate increase is totally inappropriate!!!!!!

Murry Says:

December 8, 2010 at 2:02 PM

I wanted to voice my concerns over my daughter's policy. My daughter is receiving an increase of over 127% to over \$600/month. Its robbery. Wellmark should not be allowed to do this.

Sona Says:

December 9, 2010 at 11:46 AM

The increase is ridiculous. We are retired. We can not afford this increase. We only have \$300 a month for the rest of our bills once we pay our premium.

Carol Says:

December 9, 2010 at 1:15 PM

It has already been increased last year and now its happening again. I don't understand why they are doing this.

Ed Says:

December 9, 2010 at 2:01 PM

This is ridiculous. The insurance is not even good. I have a high deductible for my family, in addition to the premiums. It is a complete joke and they should not be able to do whatever they want. My insurance is going to be more then my house payment. These people are affecting the middle class. Once the middle class is eliminated with the all there will be is the rich people and the poor and uninsured. I would love the opportunity to ask how well off the insurance company is right now. I'm sure this rate increase will happen, because insurance companies are big business always gets what they want. We will have to loose our home to be able to pay for our insurance.

Mark Says:

December 9, 2010 at 2:20 PM

I have received notice that Wellmark has asked the Iowa Insurance Division for a premium increase. I have been a policy holder with the Wellmark organization since I retired.

I began paying premiums to Wellmark in July 2005. I was then and am now enrolled in Wellmark's HSA plan. I have a \$5100.00 deductible. My premiums started out at \$352.40 per month. In the five years since July 2005 my premiums have increased by approximately 66%. This year Wellmark is asking for another 10% + increase.

I was in the private business sector and never knew of any business that averaged a 10% + increase every year. In fact we have been in a recession since 2008.

As a retired private business owner I'm caught in a catch 22 here. I'm 58, responsible, been proactive with my health care. Haven't abused my insurance company. In fact pretty much all my health care thus far has been paid for out of my families pocket.

I have tried to be responsible for my families health care with a high deductible and policing ourselves on abuse of our policy, and it looks as though there is no one out there that cares.

Wellmark is just going to price us out of health insurance. How's that going to help with our health insurance crisis? My family has been fortunate enough to have been able to provide for ourselves, thus far. But as some point we will not be able to afford it.

We could certainly use your help with some restraint on Wellmark.

Terri Says:

December 9, 2010 at 2:22 PM

I have received notice that my monthly health insurance premium from Wellmark will be increasing for a second time in two years. I have a privately owned policy as the health insurance through my work is over \$400 per month and I can't afford it.

In two years time my premium has increased from \$138 to \$175. I have not had any health concerns (I have a yearly physical and am fairly healthy 48 year old) and I have not filed many claims. I just don't understand how Wellmark can increase the rates every year and expect people to be able to afford private health insurance.

This is why we have so many unprotected people in this country. Rates keep increasing on everything, health insurance, utilities, groceries, gas and yet our paychecks really don't seem to be keeping pace.

If this keeps up, I will no longer be able to afford health insurance...which will be in violation of President Obama's law. I don't know what else to do.

I feel this latest increase should not be approved. Or at least, the amount of increase should be reduced.

Kathleen Says:

December 9, 2010 at 2:24 PM

I received my new rate increase notice from Wellmark BCBS. My rate went up 22% (even though it made mention that they requested one of 10.8%)!! This on top of the rate increase of 22% that I

received last year (which Chet Culver indicated was under review but was allowed to go into effect anyway). My new monthly premium will now be \$576.50. This is outrageous and I don't know how this can be allowed to happen. I was hopeful that last years huge increase would be refused but evidently you caved in. Now it seems they will be allowed to do it again. Please do something about this. I'm not against paying my fair share for health insurance but this isn't a fair share.

Carol Says:

December 9, 2010 at 2:25 PM

I recently received notice of the proposed rate increase to Wellmark Blue Cross & Blue Shield of Iowa and am very upset by this proposal. Last year my rates were increased by \$42.00 a month which equals \$504.00 a year. Now I am faced with yet another increase of \$30.60 which equals \$367.29 a year. This is an \$871.20 increase in only two years. I would also like to add that BCBS will not cover my back for any reason because of a one time occurrence of a sciatic nerve problem four years ago. I have requested that BCBS remove this exception from my policy and they have refused.

My husband and I are retired and on a fixed income. These kinds of rate increases are incredibly unfair. We seem to be paying much more for far less coverage. I am respectfully asking that the Commissioner NOT ALLOW this rate increase. I am asking for your help in holding down medical costs (which includes insurance premiums).

Mike Says:

December 9, 2010 at 3:48 PM

I'm self-employed and my wife and I are healthy. It is not affordable. I am contemplating dropping my insurance.

Jim M Says:

December 9, 2010 at 4:45 PM

My wife and I are very disappointed that BC/BS wants another rate increase. After doubling our deductible last spring because of the large increase we are now being let know that they need another 10.8 percent. We strongly urge you to decline this increase request as with it having health insurance may not be an option.

Keith Says:

December 10, 2010 at 10:59 AM

I don't understand why, I, as an individual policy holder, always has my rates going up. Its never someone at a large company. If feel like the little guy is never listen too and is constantly being picked upon. Why are they always raising individual insurance rates. I never make any claims. Eventually, I will have to take my chances and go without insurance.

Carolyn and John Says:

December 10, 2010 at 3:42 PM

We keep being told to save for our retirement and not depend on Social Security alone. I am now just barely able to put money into a retirement fund. And I know alot of others who are totally unable to put money aside. With this proposed price increase for my husband's health insurance I will be forced to reduce that savings even further. In fact his increase is proposed at \$67.00 per month. If his insurance rate keeps increasing at least \$50 each year until he retires, his entire proposed social security check will likely be used for a health insurance supplement to Medicare. What is he to live on if there is no retirement savings to draw from? Why can't the insurance company's executives see that they need to drastically tighten their belts before the entire middle class of retirees end up on Medicaid? Thank you for your time.

Jana Says:

December 10, 2010 at 3:44 PM

I understand BCBS is requesting another large increase in rates – the second one in one year.

Please do not allow the increase, as BCBS wastes money constantly. As an example, I get a wasted page of blank paper with EVERY bill. Imagine what could be saved by eliminating this page. Perhaps BCBS should tighten their belt instead of passing the costs of their wasteful habits onto us.

Andy and Kim Says:

December 10, 2010 at 5:48 PM

I think its ridiculous. I only have my wife and kids on the policy and now our rates are going to double. I'm getting tired of this. I'm self employed and we are healthy. We have high deductibles. Why should I have my insurance doubled. I can't even afford to put myself on the policy. The prices just keep going up and up and up. The dental insurance costs almost the same amount every year, but BC/BS keeps increasing the rates constantly.

I can't raise my rates because then I would have no work.

Sarah Says:

December 12, 2010 at 12:52 PM

When I first heard about the 10.8% increase by BCBS this year I thought OK that is not terribly bad because last year our increase was 23%. But when I received the notice in the mail it was a 34% increase. What happened to the 10.8 % increase? When I called in they said it was probably due to the age of my children. I have a 20 and a 12 year boy. I will pay \$220.00 a month for a 1500.00 deductible and no prescription coverage. So I a pretty much just paying for coverage if something major would happen to my boys. BCBS said that I really can't switch them to another policy because they don't offer children only policies anymore.

So I have no choice but to pay whatever increase BCBS demands. My husband's employer dropped his coverage from BCBS this year due to the empolyers premiums increasing out of control. My employer offers insurance but the premiums would be higher and the deductible is 6000.00 dollars.

Is there and end in sight BCBS? Or will you keep raising rates until everyone in bankrupt?

Julie Says:

December 13, 2010 at 12:47 PM

I understand that medical costs are increasing and still increasing, but to pass high rate increases this year and next year, it is not affordable. It is ludicrous. You continue to pay these premiums and you can't change insurance. We have increased deductibles and we can't change pools. It is not affordable. Such a high increase is not justified. If medical costs are too high, look into bringing those into control.

That new building is a sore spot with consumers. I can't afford a gym membership and there was no need for your employees to get a new gym in their building.

I hope the consumers are heard and that this rate increase does not go through or is lowered drastically.

Mike Says:

December 13, 2010 at 12:49 PM

I'm writing to express great frustration in Wellmark's announcement of yet another large premium

increase for my family's health insurance. Earlier this year, they hit me with a 19.7% rate increase and they have now told me that I will be having a 12% increase next year. I'm a self-employed individual with a family of four. My business has been impacted by the economy like many other businesses and my hourly rate has had to drop in order to stay competitive in this tough economy. I believe that Wellmark's actions are unethical. I know that they continue to say that their new \$250 million headquarters has nothing to do with it and the same is said about their CEO's high salary. They say that their \$250 million building cost less than their previous building. That is the equivalent of the following example...

Let's say I'm driving a Ferarri and then I trade it in for a top-of-the-line Mercedes that cost less than the Ferarri. Then I raise my hourly rate and tell my customers that I can't get by without raising my rate. We both know that I could have saved much more money than buying a top-of-the-line Mercedes. This would be showing poor ethics on my part. There is no difference between this example and Wellmark's situation.

I'm an educated person and I know lots of individuals like myself that believe Wellmark is operating with poor ethics by continuing to hit the same customers with these kinds of rate increases year after year. I would hope that our insurance commissioner, consumer advocate, and politicians would stand up to Wellmark and say "enough is enough".

I would greatly welcome hearing back from you.

Thank you for listening.

Kris Says:

December 13, 2010 at 12:50 PM

To Whom It May Concern:

My husband is self-employed and I work for a small business that does not carry health insurance and therefore we have Wellmark BC/BS which we pay our premiums out of our own pocket. We are currently paying \$1,371.20 per month (\$16,454.40/year) for a family plan which we have the highest deductible possible so it is not even an option for us to increase our deducible to try and lower our premium. We cannot even go to the next tier because then we lose our prescription card. Now Wellmark BC/BC sends me a notice that states the "proposed" monthly increase will be \$148.10 making our premium \$1,519.30 per month (\$18,231.60/year). These yearly amounts are easily what some people earn in a year with their jobs. How is one supposedly able to continue to keep insurance with these types of increases? Is Wellmark BC/BS trying to force everyone to cancel their insurance because it is unaffordable so nobody has insurance any longer? We have had Wellmark BC/BS for approximately 14 years and the premiums have continually increased every year. It also states in the notice of premium increase in bold and underlined letters "This may not be your final rate." So now I sit and worry are they going to increase it higher than the \$148.10 per month. I can guarantee they sure won't lower the increase.

I find it really hard to believe that our premiums are also not going up because of the new Wellmark BC/BS building which cost \$190 million. Whenever you call and inquire about the increase in premiums all I ever hear or read about is that the medical care costs are increasing and technology is advancing which is more expensive. I believe the doctors, hospitals, etc. charge what they do is because the insurance company is going to "write-off" what they want and therefore the doctors increase their office visits so that they still get paid.

The Des Moines Register reported on October 10, 2010 that, "Wellmark Blue Cross and Blue Shield's

\$190 million new headquarters features a basketball court, a fitness center – complete with steam rooms and saunas – a cafeteria serving healthful foods and a walking track that’s as long as a city block.....We’re doing everything we can to get all our employees to exercise, work out and eat well, said John Forsyth.” Why doesn’t Wellmark BC/BS open up their new fitness center that is for their employees to all of us who pay these premiums so that we can stay healthy?

Something needs to be done about the yearly increases and these unreasonable monthly premiums. Why can’t a “reasonable” cap be put on the premiums so that insurance can be affordable? If Wellmark BC/BS cannot make the premiums affordable what do they really expect people to do?

Wellmark BC/BS should really put the shoes on the other foot and see what we have to do in order to afford the health insurance premium for our family. I certainly doubt Wellmark’s CEO or employees pay the types of premiums the rest of us pay.

The Iowa Insurance Division needs to DENY Wellmark’s request.

Randall Says:

December 13, 2010 at 6:09 PM

I can’t afford it. I’m applying for a different pool, but I have had a back injury and I’m not sure if I will be able to afford it. If I’m not accepted in the new pool, I’m going to have to go without insurance. Within 12 months, I will have an increase of over \$200. I have been with Wellmark for 10 years and I have never ever filed a single claim against them. I have paid \$70,000 in health insurance to Wellmark.

Marian Says:

December 14, 2010 at 10:26 AM

My daughter’s premiums went from \$163.90 to \$608. Thankfully I can put it on my employer’s plan but this is outrageous!

Ervin Says:

December 14, 2010 at 10:29 AM

My premiums went up 19% last year and this year they want to increase it another 15%. The Iowa Insurance Division does NOT have to approve this rate increase.

Vern Says:

December 14, 2010 at 10:32 AM

I’m very upset that the increase of 11.30 % actually works out to a 40% increase because my premium was \$989.90 and will be going up to \$1368 by next year for two people, both on social security. How can we pay for this?

Cathy Says:

December 14, 2010 at 10:35 AM

I was forced to retire before age 65 due to a layoff. With my husband having a lot of health problems, we can’t afford the increase that’s going to happen next year. Please reverse the Blue Cross decision.

Diana Says:

December 14, 2010 at 10:36 AM

I’m concerned that my premium is going up by \$51 per month. Please use this information at the hearing.

Ted Says:

[December 14, 2010 at 10:39 AM](#)

The premiums on my wife's policy went from \$773.40 to \$857.00 a month and we only make \$1300 per month. How can we afford this and still afford to live?

Jim Says:

[December 14, 2010 at 10:40 AM](#)

I'm not happy with the 11% increase. I need to switch insurance.

Vern Says:

[December 14, 2010 at 10:42 AM](#)

This increase is way too high- was \$475.30, then jumped to \$650.30 as of April 2011. I'm getting to the point of not being able to afford this!

Anonymous Says:

[December 14, 2010 at 10:43 AM](#)

I'm tired of rates being jacked up. I'm self employed, and \$70 more per month is a hefty increase for our budget.

James Says:

[December 14, 2010 at 10:44 AM](#)

Last spring I had a major premium increase and was told I wouldn't have another rate increase due to me going into a new age bracket. If the increase goes through it will be more than double what I'm currently paying!

Tamara Says:

[December 14, 2010 at 10:49 AM](#)

I'm worried I'll have to cancel my insurance due to 3 premium increases, \$194, \$230.15, and now \$255.55- all in one year and 4 months!

Robert Says:

[December 14, 2010 at 10:56 AM](#)

My increase of 27% is a huge amount. I'm going from \$475.36 to \$650.30. I went from a 25% increase this year to a 27% increase next year.

Doug Says:

[December 14, 2010 at 10:57 AM](#)

My premium is currently \$556 a month and it will be \$72 more per month in April. That is more than a 10% increase. In the last two years it's gone up more than \$170 a month.

Christine Says:

[December 14, 2010 at 11:10 AM](#)

I am writing in response to the proposed 10.80% premium increase from Wellmark. I adamantly oppose this proposed increase!

I am a self insured, small business owner, who also happens to be a health care provider. I have the opportunity on a daily basis to see how these astronomical insurance premiums are affecting good, hard working people. It is not unusual on a daily basis to have people not receive care that they truly need NOW because they can't afford it. So much of their budgets are going toward health care insurance premiums they can afford little else.

Not only can people not afford the rising premiums, Wellmark continues to pay the providers less. A

At the same time, Wellmark continues to cut the number of services that are allowed to the patient. This just adds to the out-of-pocket costs for the patients/insured.

After receiving this notification from Wellmark, I also received another brochure that explained why they are proposing the increase. The 3 reasons being:

1. More medical expenses – especially for chronic disease such as diabetes and obesity.
2. New technology that costs more
3. Higher drug costs

Instead of continuing to raise premiums, I wonder what Wellmark is doing to help their clients in these areas? As a chiropractor, I see people on a daily basis that are able to eliminate or reduce the amount of prescription medication they take as a result of chiropractic care. But Wellmark continues to reduce the number of chiropractic visits that it will pay for. If more people were able to reduce the amount of prescription medication they were taking, they would potentially be able to reduce prescription drug costs.

In closing, I adamantly oppose this proposed increase and believe that Wellmark should not be allowed to execute this increase.

John Masulonis Says:

December 14, 2010 at 1:47 PM

We are finding the same trend in reduced allowed Chiropractic visits by insurers. In addition, MDs are allowed to refuse to see Medicare patients while D. C.s do not have this choice. The Obamacare nightmare has just barely begun to surface.

Mendy McAdams Says:

December 14, 2010 at 2:49 PM

I am hoping someone will listen to the hundreds of posts here. These are the people you are hurting. The people who are responsible, employed and productive members of our society. We go to work every day. We pay our bills. We take care of our children and unfortunately we get sick.

I have a disease that already allows the insurance company to take advantage of me. BEcause my medication is a “specialty”, I get a special, higher rate. I have been run around with Welmark so many times that if Blue Cross and Blue Shield were not such a monopoly, I would do else where. And there is the problem! You have no real choice and the government continues to allow rate increase after rate increase. For what? Corporate bonuses? I think not.

Now is addition to rate increases, policies cover less and less, deductibles become more and more and doctors continue to get kick backs. If they prescribe the right drugs, the drug makers give them extra money. Must be nice! I think there should be NO rate increase. Furthermore, they should be required to allow other companies to offer insurance to keep them in check. It is not hard to continue to be successful when there is no other insurers. Look at car insurance, they have to be competitive or consumers will not buy their product.

PLEASE tell them no! Tell them to shape up or ship out! We deserve better and we deserve more. In case you haven't noticed, the “regular folks” are still hurting and the recession is still in full force for most people.

Anonymous Says:

December 14, 2010 at 3:03 PM

My increase is going to be \$190.50/month. I am self-employed so this is not affordable.

Marjena Sloan Says:

[December 14, 2010 at 3:13 PM](#)

Please do not let BC/BS have this increase. I am a polio survivor and while not as bad as many preventive care is what keeps me upright, working and paying taxes. It is almost to the point though of trying to decide between having health insurance or paying to keep a roof over my head but there again if I can not work because of medical problems there goes the roof, too.

Anonymous Says:

[December 14, 2010 at 4:41 PM](#)

I've tried to change our insurance, but we were told that Wellmark would not cover anything. My husband and I are stuck at Wellmark and with our current policy that is over \$1000/month. I know the insurance companies believe they have to make money and that the costs of insurance is going up, but- do they have to make as much as they do in salaries and do they have to spend as much as they did on their new building? I do not want this rate increase to go through.

Tina Says:

[December 15, 2010 at 8:12 AM](#)

As a small business owner in a small community, I am deeply concerned about my insurance increase and proposed increase since April 2010. With the dip in the economy in the last couple of years we have adjusted as much as we possibly can, just to be able to keep our business flowing (cutting all unnecessary expenses/salaries etc). If this new proposed increase takes place I will be paying \$79.20 per month more than 2 years ago, that may not seem like a lot but being in my position as a small business owner, this increase seems terribly high and concerns me. I would really ask that reconsider another premium increase and look at other possible ways to adjust for the projected expense increase that you have listed (I believe that there are other lucrative options, as the others who have posted here have suggested). If this increase goes through I know of others that will be lowering their coverage or dropping it altogether. Please consider your other options.

John Anderson Says:

[December 15, 2010 at 8:46 AM](#)

I received another notice our increase last year was over 50% it went from 1200 a month to 1800 a month and now they want more I also live in Arizona now and they collect premiums over state lines but will not allow us to adjust our plan someone needs to take these people on I also understand they have a nice new building that we are paying for. This is nothing but greed and stealing I wish I lived closer I would love to come to this meeting this is no differant that a public utility and should be regulated as such.

Mike Says:

[December 15, 2010 at 10:48 AM](#)

I'm writing to express great frustration in Wellmark's announcement of yet another large premium increase for my family's health insurance. Earlier this year, they hit me with a 19.7% rate increase and they have now told me that I will be having a 12% increase next year. I'm a self-employed individual with a family of four. My business has been impacted by the economy like many other businesses and my hourly rate has had to drop in order to stay competitive in this tough economy. I believe that Wellmark's actions are unethical. I know that they continue to say that their new \$250 million headquarters has nothing to do with it and the same is said about their CEO's high salary. They say that their \$250 million building cost less than their previous building. That is the equivalent of the following example...

Let's say I'm driving a Ferarri and then I trade it in for a top-of-the-line Mercedes that cost less than

the Ferarri. Then I raise my hourly rate and tell my customers that I can't get by without raising my rate. We both know that I could have saved much more money than buying a top-of-the-line Mercedes. This would be showing poor ethics on my part. There is no difference between this example and Wellmark's situation.

I'm an educated person and I know lots of individuals like myself that believe Wellmark is operating with poor ethics by continuing to hit the same customers with these kinds of rate increases year after year. I would hope that our insurance commissioner, consumer advocate, and politicians would stand up to Wellmark and say "enough is enough".

Anonymous Says:

December 15, 2010 at 11:07 AM

This year Wellmark got away with a rate increase already this year. When will this end?

Phillis Says:

December 15, 2010 at 11:23 AM

The rates were already increased this year. I realize that health care costs have already increased, but these are bad economic times. I have a hard time understanding why an insurance company like this can raise their rate so high. The new rates will make my premiums almost \$600 a month.

I have have a high deductible (paid out of my pocket) as well as a high premium. I want to voice my opinion that this is way too high. I have three years to medicare and I'm hoping I have enough money to make it to medicare.

Even if the company needed an increase, even a 1-2/% increase would have been more reasonable since we just had a large rate increase. I am totally against this raise.

Richard Says:

December 15, 2010 at 5:49 PM

I own Wellmark of Iowa, or at least my share of it. Wellmark is a mutual company and it is run for my benefit, not for the benefit of investors, or politicians, or the media. For ME.

When the Iowa Insurance Division holds public hearings you are wasting MY money. Which part of this is difficult for you to understand? I own the company. I buy the insurance, from my company. If I want to raise the price I charge myself, it is irrelevant to people who don't buy insurance from the company and therefore don't own the company.

The very idea there may be a 'consumer advocate' from the Insurance Division who can better represent ME against MY company is nonsense. I don't need someone to represent me against myself.

Perhaps other health insurance companies, investor owned, are taking advantage of their customers. MY company is not.

Melody Says:

December 15, 2010 at 5:50 PM

At this time of economic downturn, I don't think it is appropriate for Wellmark to raise their premium rates of health insurance at all. The 11% rate increase that they have proposed is also a burden to those clients, like myself, who are struggling to keep up with their current premiums.

My personal plan is just under \$300 per month and they are proposing to raise it to over \$330 per month. My only option under their new rate will be to go to a higher deductible or a lesser plan. My

deductible is already very high, and I will not look forward to its increase either.

Another suggestion for the insurance commission is for ALL insurance policies to cover the basics. My current plan(Wellmark's best plan) does not pay for a simple flu vaccination. They continually send literature stressing the importance of getting a flu shot, but they do not pay for vaccinations if you are over the age of 8.

I've read all of their literature, but have a hard time believing that the increase in my premium is not due to their new "green" building in Des Moines. I understand that there will probably be a rise in medical claims expenses, but not necessarily the 10.8% that Wellmark is counting on.

Please do NOT allow this rate increase that Wellmark is proposing.

Please do not contact me or ask me to appear before the insurance commission. Just take my letter at face value and share it with the entire commission. Thank you.

Henry Says:

December 16, 2010 at 8:49 AM

I will not be able to afford my insurance anymore if Wellmark's rate increase is approved. I get \$872/month social security – that's my income and pay \$842/quarter to them now and am at the highest deductible limit. I can't get Medicare for another two years.

This increase, and the last one, were just pure windfall profit gouging by Wellmark. It has to be stopped.

By the way, the only use I make of my insurance is regular doctor check-ups and medications he prescribes. No major medical claims in my life!

Henry Says:

December 16, 2010 at 9:00 AM

Sorry for the misspellings in my posting, but I hurried to get things off my mind and onto the page. As an afterthought, we insurance owners are being treated by Wellmark exactly the same as by our government – we (Wellmark) want more money to spend on things you the insured don't need or want, so just send more (just like the gov't and taxes and Obamacare and all the other debt-creating programs for special interests.

Lonny Bartels Says:

December 16, 2010 at 10:48 AM

This fall my wife had knee replacement surgery valued by Mercy Hospital at \$32000. By the time Medicare and Wellmark got through with the billing, we did not pay a dime. In this day and age the three necessities of life are 1) food 2) shelter and 3) adequate health insurance, Let's face it, we are all just one medical event away from bankruptcy. When I thanked the people at Wellmark for their excellent and accurate service on our behalf, they told me, "That's why we exist." God Bless em.

Willi Says:

December 16, 2010 at 12:14 PM

We currently pay \$1,090.00 per month for our family health insurance. I'm not sure about you, but I can't afford any increase in premiums from Wellmark Blue Cross and Blue Shield. We also have a \$3,000.00 deductible to meet on top of that. We are in one of the "old" plans and can't get into another group without amendments. It seems as though our health insurance would prefer we die rather than help take care of us.

I did travel by the new Blue Cross building in Des Moines the other night and I have a suggestion. If you turn off all the lights on the building at night, we could reduce our electricity bill. I know who pays for that building and its expenses.

We should start looking into executive bonuses and wages like other companies have had to do over

the last few years.

I thought our national goal was to make sure everyone has health insurance. With the increases occurring, we will be doing the exact opposite. People will no longer be able to afford their health insurance and will drop it because we will have to choose between food, heat and home or health care. Lower/middle class families have only so much money — it can't all go to health insurance premiums.

I have family members born with congenital medical issues. We do use our medical insurance and try to use it very wisely! I don't feel we misuse our insurance. Just because we are not lucky enough to be "healthy", does not mean we should be singled out for insurance premium increases either!!!!!!!

Carolyn Johnston Says:

December 16, 2010 at 1:44 PM

I'm more than a little disgusted with Wellmark Blue Cross and Blue Shield of Iowa and their rate hikes. My monthly premium will increase from \$660.10 @ month to \$734.90 beginning April 1, 2011. I am not a person who has great illnesses nor do I abuse my health care insurance providers services. Since I'm 63 yrs. old, I really feel they are trying to get the most they can from me before I'm eligible to apply for and be on Medicare. Thank Goodness my spouse is on medicare, we could not afford anything more. I pray that some good will come from these posts. Thank You

Anonymous Says:

December 16, 2010 at 2:41 PM

I have been with Wellmark for decades and I'm disappointed in another rate increase. My premiums have constantly gone up over the past 4 years. My family is trying to be responsible policy holders and I have a tight budget as I am self employed. I understand that health care costs have risen, but the prices are unaffordable. Is this company really doing all it can to cut costs?

Beth Says:

December 16, 2010 at 2:46 PM

I see in the Des Moines Register there is a hearing for health insurance customers. Is that supposed to make us feel better? I can't imagine it is because you don't understand what we are upset about. It says in the article that our premiums continue to increase, and increase at a much higher rate than our income. That makes customers mad.

Other things that make customer mad are not having any other companies that can sell us the same type of insurance. We don't understand why health insurance cannot be sold across state lines.

We also don't understand how our insurance payments did not pay for that beautiful new building. Is Wellmark in another line of business that is making money? Is business called investing? Didn't they get the money from premiums to invest?

We also don't understand why Wellmark appears to have so much money? They wanted to give the University of Iowa a million dollars as a donation. We see their logo on all kinds of events in Des Moines which they have paid to be a sponsor. Really I don't want my premiums to go to charity events.

I also had a friend mine who is a health care provider tell me she got a very nice check from Wellmark. They gave it to her because that thought she held down cost for her diabetic patients. Like she said that is her job. Plus I don't like my insurance company giving bonus pay to the doctors.

I won't be attending your hearing. If you haven't figured it out yet there is not much hope a hearing is going to help.

marla Says:

December 16, 2010 at 2:47 PM

Wellmark Blue Cross contacted again that they want to raise my rates. When I retired 4 years ago and purchased their insurance my rate was around \$180/month. Today they want me to pay \$441/month. This is beyond robbery. I have cost this company nothing in those four years yet my rates have skyrocketed. I am totally furious and ask that you look hard and deep at this ridiculous cost rise. Thank you very much.

Todd Says:

December 16, 2010 at 2:58 PM

To Whom It May Concern:

I have four family plans with BC/BS and they want to increase my wife and mine 15%. Our children's are to increase 10.8%. Between the four plans I AM ALREADY PAYING \$1,246.60/MONTH!! With the increase THEY WANT ME TO PAY \$1,447.40/MONTH. My wife lost her job and I am self-employed grossing \$2,400.00/month. We are already struggling and will definitely sink to non-existence with this increase!!!!

This is what BC/BS is trying to do. They are trying to get my family off their books. MAKE IT SO UNREALISTIC AND THEIR CUSTOMERS WILL HAVE NO ALTERNATIVE BUT TO LOSE HEALTH INSURANCE!

Please do not allow this to happen.

Thank you

Robert Says:

December 16, 2010 at 4:05 PM

December 16, 2010

Dear Sirs:

I have received a notice that my Wellmark insurance premiums will increase from my present rate of \$360/month to \$440/month on April 1, 2011. This increase will be 22% not the 10% they are advertising to the public. This comes after a rate increase from \$296/month to \$360/month last May, 2010. In a year the total increase from May, 2010 to April, 2011 will be 49% (\$296 to \$440). I can not believe this is a justified rate increase. Wellmark says the amount of increase is based on your age, geographic area and plan benefit design. Well, my geographic area and plan benefit design haven't changed but I am obviously one year older. So, in a one year's time period if you got one year older your rate increase will be 22% instead of 10%? Hmm.....maybe Wellmark can get into the loan shark business as well. For the record I am 58 years old, physically active, a non smoker and in good health. Over the years I have paid thousands of dollars more in health insurance premiums than I have had in claims. Please vigorously investigate and deny this outrageous rate increase request.

Sincerely

Robert

Suzan Says:

December 16, 2010 at 4:18 PM

I am a 61 year old single person who is self-employed. I am currently paying \$9572.40/year for health insurance through Wellmark Blue Cross/Blue Shield. Last May, Wellmark raised my monthly rate to its current level of almost \$800/month. I have recently received notice that these premiums will be

raised another 11%, in order to compensate for “the increased cost of health care”. I am under the belief that this increase will be borne by individual policyholders, rather than group policyholders, and believe this is due to Wellmark’s desire to not lose group business to their competition. When I was divorced after 30 years of marriage, in 2001, Wellmark essentially had no competition for my individual business. My previous carriers (obtained via group coverage through my former husband’s employer) were Aetna and United Health Care. At the time, they did not sell individual policies. In order to “wear out” any “riders” that came with the Blue Cross coverage, while still maintaining full coverage, I paid Wellmark for two years of unused coverage ON TOP OF my COBRA benefits, paid to United Health Care.

At age 61, I believe I cannot find full coverage with any other company.

I am, essentially, held hostage as Wellmark raises their rates repeatedly, and as the Iowa Insurance Division allows them to do so.

I estimate that I have paid almost \$100,000 in deductibles and premiums since 2001, the vast majority to Wellmark. Even without additional premium increases, I will pay them another \$40,000 before I qualify for Medicare.

This is an enormous transfer of wealth from my household to Wellmark.

It is a transfer of wealth that is not the result of taxation or profligate spending or overuse of the health care system or neglect of my person in favor of high spending elsewhere. Maintaining health insurance is, after all, the “responsible” thing to do.

I believe this situation is a direct result of the near monopoly enjoyed for years by Wellmark. If all insurance companies wanting to offer group health care insurance in Iowa had also been required to offer individual coverage, there would have been competition from Aetna, United Healthcare, and other providers. Such a requirement was always within the power of the Iowa Insurance Division.

I am asking for relief from these ever-increasing premiums, the ransom I am being forced to pay for individual health care. When executives from Wellmark have taken pay cuts; when Wellmark ceases to pour money into enormous capital projects such as their new office in DM; when record-breaking profits begin to falter and reverse; when the burden of premium increases to meet “costs” are spread among all policyholders, and not just individual insureds; and when an atmosphere of reasonable competition exists in this market, then and only then should Wellmark be allowed to again increase premiums.

Tom and Mary Jo Corcoran Says:

December 16, 2010 at 6:02 PM

We received our rate increase last month. This is ridiculous! Both of us are on a fixed income from the state of Iowa, and do not receive social security yet. With this rate increase, it will be taking over \$110/month MORE out of our monthly premium. The total will be well over \$900 a month! After the last rate increase in the summer, plus the automatic increase of over age 60, this is insane.

Amanda Says:

December 17, 2010 at 9:28 AM

My rate has already been increased this year, and I already have a hard time paying it. BCBS already makes enough money off of us. Bonuses they have gotten are insane. They have employees whose job it is to figure out how they can get out of paying for peoples’ health care, and they get bonuses for it. Do not allow insurance companies to become even more Ridiculous! Deny the rate increase.

Kathleen Says:December 17, 2010 at 10:24 AM

Dear Insurance Commissioner:

I am writing to comment on the premium increase that Wellmark Blue Cross Blue Shield of Iowa is proposing April 1, 2011, concerning myself and two daughters in college. If the Iowa Insurance Commissioner has any say I do not think there should be any increases at all. I cannot keep paying increases like this every year. I will soon have to drop their coverage.

The insurance company says I can raise my yearly deductible but I am currently at \$1,500.00 for individual and \$5,000.00 for family. If one or all family members were to become sick by the time I pay my monthly premium and yearly deductible, I would be in serious financial trouble. We hardly go to the doctor so the policy is rarely used. I feel as if I am throwing money out the window.

I could be using the money to buy things that we are now doing without. Just think of the excess money people would have to spend and this could possibly get the economy moving again. The insurance companies will not spend their profits like the consumer will, unless you take into consideration the beautiful new building Blue Cross is constructing in Des Moines, which looks a little extravagant to me. I do not expect health insurance to be free of cost but this is growing out of hand. I hope President Obama's insurance plans help us out down the road someday but in the mean time I hope the Iowa Insurance Commissioner does not allow any increases this year.

Listed below are a few of the years I found records for our monthly increases.

Monthly Premium Increase New Monthly Premium

2006 \$300.00 \$23.00 \$323.00

2007 323.00 -7.00 316.00

2008 316.00 31.60 347.60

2009 347.60 76.50 424.10

2010 424.10 45.80 469.90

2011 469.90 (proposed) could be less could be greater but they always seem to get the greater.

Thank you for your time,

Kathleen

Douglas Says:December 17, 2010 at 10:58 AM

I am 60 years old. I'm living on a fixed income. My increase will be 50% due to my age. I don't use this insurance, but I have to have it. I'm on social security and paying over \$600 a month for health insurance is very difficult. I can't make it to the public hearings, so I wanted to add my comments.

Patty Says:December 17, 2010 at 10:59 AM

Consumer Advocate:

I am writing for your help in requesting that the Iowa Insurance Commissioner denies the proposed increase in the health insurance premium rate.

I feel that the proposed monthly change in premium with my Wellmark BlueCross BlueShield plan is excessive. Just one year ago my premiums were increased. I had to change my Plan Description and deductible so that my health care insurance was affordable. I receive no cost of living increase to cover this increase in health insurance premiums and my retirement income remains the same.

At the public hearing on January 6, 2011, I ask you to address the Iowa Insurance Commissioner to

not allow an increase in our monthly health insurance premiums.

Thank you.
Patty

Glenda Says:

December 17, 2010 at 11:47 AM

I don't know what can be done, but I'm being faced with deciding to feed and heat my home or have insurance. The increase this year was very hard and if this increase goes through I will not be able to keep my insurance. I received a 20% increase last year and the proposed increase will be for 17%. My income is not going up and I am left with difficult choices. I hope there will be enough people saying something to stop this.

Is ridiculous that they get to build new buildings and their policy holders are being left with a choice of life or death.

Codi Says:

December 17, 2010 at 1:32 PM

I want you or whom ever to know this is an outrage that you want to increase premiums again. I want to know HOW people at BC/BS expect people to live and maintain their finances when BS/BS raises the premiums every 6 mos- 1 year. I am esitimated to pay \$300 dollars a month for ONE person. ONE FREAKING PERSON? That is half of my paycheck each month. So how am I supposed to continue to pay rent? Put food on the table? Pay other bills? Keep insurance on my car? Please, do tell me?

Of corse people at BC/BS have no problem either because of pay or lower rates.

I am seeking other health insurance through the state because I feel this increase is absurd, a waste of my hard earned money.

Trying to keep something that is BARELY helping me is not worth it. I have one life and I want to enjoy it. With these premiums, I can't because I can't afford too.

I truely believe this is a fraud.

Codi

Anonymous Says:

December 17, 2010 at 1:42 PM

I have a complaint against Wellmark. My rates keep going up. My rates have almost doubled and in the last four years I have had over 200% increase.

I feel like Wellmark is picking on the consumers that buy their own insurance. I think Wellmark needs to start from the top with the hospitals to keep costs. I also think they could cost expenses with all the events the sponsor and all the advertising they do. The new building, according to the paper, says the new building is very fancy — the money for that has to come from consumers originally. There has to be a way to cut costs and save money for the consumers. I am happy with my insurance, except for the rate increases. It would be different if my pay increased more. I don't know what the answer is, but I thought I would put my complaint in (even if the paper says it won't help).

claire@hdklawfirm.com Says:

December 17, 2010 at 4:33 PM

ENOUGH IS ENOUGH! The Iowa Insurance Accountability Plan is a start at making Blue Cross

more accountable to the public – but the safe guards in the Plan may not be sufficient to halt unwarranted rate increases. In recent years, Blue Cross Blue Shield plans have continued to raise rates, despite massive surpluses that regulators have deemed to be well above the amounts needed for solvency protection. (See Consumer’s Union report – How Much Is Too Much?) Before Wellmark Blue Cross Blue Shield of Iowa is permitted to impose an additional 11% rate increase on individual policyholders, on top of the 18% increase imposed just last year, the Iowa Insurance Commissioner should set rigorous standards for appropriate surpluses. Accumulated surpluses should be carefully analyzed as part of any proposed rate increase.

In addition, Blue Cross should be required to state publically their projections for future rate increases, including clear criteria for the projections, and the information should be disclosed to the public in a manner that is readily accessible and easy to understand. When the corporate coffers continued to be padded well beyond what is needed to cover expected claims, consumers suffer and CEO’s just get richer. ENOUGH IS ENOUGH! – J. Jacoby

Anonymous Says:

December 17, 2010 at 5:34 PM

We are farmers. After the huge increase last spring and we are facing another one, we are looking at paying over \$13,000 for health insurance. It would be different if we were eligible for a group plan, but because we farm, we can’t. It makes us consider if we need to just take our chances for health. We would like retire someday, but when we face these types of increases, it ridiculous. I can see small increase of 2-3% but these large increases makes things difficult. Is there ever going to be an end to it?

Sue B. Says:

December 19, 2010 at 8:25 PM

My situation is a little different than all these other people, but think you should hear about it. I was covered under my husband’s work policy for many years. When he had to take early retirement (before Medicare) we remained with his group but paid our own premiums. When he went on Medicare, I stayed with the group again paying my own premiums. I was notified this fall that I could no longer be covered by the group because I had gone beyond the 36 month coverage period. I asked them to reconsider because I was just one year away from medicare, but they refused. So then I applied for individual coverage through Wellmark BC/BS and was denied because of pre-existing conditions. We were probably covered by Wellmark for nearly 40 years, but all of a sudden I was a “nobody” to them – just like they’d never heard of me before. So the only thing left for me to do was get coverage through the HipIowa plan and pay \$650/month with a \$2,500 deductible. And I’ve already received notice that my premium is going up another \$25/month in January! But the best is that Wellmark is already soliciting my business for Medicare supplement coverage when I turn 65 in November. They don’t want me now but they want my business again in a few months. I see their fancy new building and read of the high salaries their top people earn and realize they don’t care about the rest of us.....they just want it all for themselves. I am just so thankful that my husband gets both social security and IPERS each month, because I wouldn’t be able to survive on just my social security each month. Please don’t let Wellmark get away with this increase.

Randy Barta Says:

December 20, 2010 at 10:10 AM

Ever since I have had Wellmark insurance coverage they have had a rate increase every year. That is 8 increases in 8 years, and the last one was at least 20% in April of this year.

I think it is time for someone to put a stop to this never ending increase in rates.

Every spring I no longer contemplate about doing my taxes, instead I have to try and decide how high a deductible I can stand so as to lower my premium.

With all these rate increases, it is making me think harder about dropping Health Insurance all together.

Please look out for the hard working people of Iowa and tell them NO to an increase.

Thank you.

Rene Says:

December 20, 2010 at 5:09 PM

I actually have the HSA account and I have a 5200 deductible. I have never used the insurance, but premiums for me will be nearly \$600 a month if this increase goes through. I know costs have gone and health care has gone up, but this has gotten out of line.

Barbara Says:

December 21, 2010 at 4:36 PM

Blue Cross/Blue Shield premiums for my husband and I, both senior citizens on fixed incomes are becoming more than we can possibly afford but yet we cannot be without it with our healthcare needs. How can Wellmark build the multimillion dollar building, not out of our funds, that is a bunch of !!!! and yet raise premiums for seniors on fixed incomes to the point that we are health insurance poor. Shame on you Wellmark.

DeLana Says:

December 21, 2010 at 6:11 PM

I am writing to add my complaint about the rising costs of health insurance. I am a 60 year old divorced female with multiple sclerosis and am currently paying over \$600.00 per month. With the proposed increase, I will have to pay nearly \$700.00 per month. With a pre-existing condition, it is not feasible to switch policies, but with the rising costs, I won't be able to afford coverage.

Sincerely,

DeLana

Michael Says:

December 21, 2010 at 6:19 PM

To: Iowa Insurance Division Consumer Advocate:

In the autumn of 2009, I was contacted by Wellmark nurses. They told me I had two serious cardiac diseases. This was the first time I'd heard that I had these diseases. They suggested they leave those illnesses on my record so that I could receive the best monitoring and education from Wellmark. Later I received notice from Wellmark that my premium was to increase by 42% for 2010.

I didn't hear back from Wellmark nurses until autumn of 2010. They asked me if I had those same two illnesses. I said no. They said they would remove them from my record. Two months later I received notice of my rate increase for 2011 of 11%.

My guess is that the Wellmark nurses were gathering information to present as statistics to increase the amount of illness in us, the self-insured. This information was then presented to the independent auditors so that they could confirm that we are a very ill population and that it is justified to increase

our premiums so tremendously.

I also wonder if those of us who must carry individual policies subsidize members in group policies.

Thank you for presenting my comments,

Michael

Linda Says:

December 21, 2010 at 6:42 PM

Wellmark could have waited on the building. It does not look good. I'm retired and I'm trying to keep costs down, but I'm still paying. I'm also a nurse and I see people coming into the emergency room all the time that can't afford insurance.

Karen from Iowa Says:

December 22, 2010 at 2:40 PM

It will be just short of \$150 for the past two years. My wages and investments have not gone up that much. People can not afford it. I would really like to know if Wellmark has tried freezing wages? My wages have been frozen for 2 years. I did not say to much last year when it went up, but now its going up too much. What do they want us to do. I already have a large deductible. If this goes through I will be looking for different health insurance. I would like to know why and I'm not the only one. I want to know where this money is going. Is Wellmark doing everything they can to cut costs? Or are they just passing costs directly back to the consumers?

Karen

Dorothy Mergen Says:

December 22, 2010 at 8:16 PM

How are we to pay for all the insurance increases? We are on social security and as you know those benefits will not have increased for two years. My husband is in a Memory Care unit of the local nursing home, and that is costing us \$1500 to \$2000 per month, and now our supplemental insurance will be close to \$500 per month. Where is it going to end or when is it going to end.

Charles Says:

December 23, 2010 at 9:34 AM

Please considered this note and the attachment as my "vote" against an increase presently being sought by, Wellmark Blue Cross and Blue Shield.

The attached outlines why I feel that such and an incese is not justified at this particular time.

Wellmark

Blue Cross & Blue Shield

636 Grand Ave., Station 39

Des Moines, IA 50309

re: planned rate hike for 2011

This is by no means a letter extolling my appreciation of this rate hike.

I also know it will make no difference if I write this letter or not, however I have chosen to make myself known to a provider that does not know me, even though I have been doing business with this entity for the past forty-five years.

To write the obvious...we are in a recession, or serious downturn, and more like a good old-fashioned panic. Panic, that is what our now obscene moment in economy was called up until after the 1929 Panic. But by any other name it still remains hard times.

To make matters worse I'm on a fixed income. Add to that, we are without a retirement, thanks to others with a very voracious appetite for money. I am aware I'm not alone. Millions are in the same desperate situation, but that does not relieve the pain. Misery, and least mine, takes no solace in others misery.

Needless to say our income will not go up. A sacrifice I would freely make in these times. However, everything else is going up – electricity, food, and fuel to mention the more weighty ones, and of course insurance. Somewhere along the line the fatted lamb will produce no more. We are coming to that finite moment when incomes will be stripped and insurances of any sought a luxury only the few may afford.

The bottom line, which appears what all “doing business” is interested in, for me is...thank you for taking the time to read this missive. I would have made them 96, but alas I have no cathedral door to tack them up on.

Daisy Says:

December 23, 2010 at 9:41 AM

I have been a policy holder with Wellmark Blue Cross for several years.

We have always been pleased with the way Doctors and hospitals have accepted their coverage. They have always been prompt in their payment to them.

I am afraid many of their policyholders will have to drop health insurance altogether if the premiums are increased again. They raised the premiums 18% this last spring. It created a hardship for many people on a fixed income.

I realize they are in business to make a profit but this 11% raise after an 18% one just a few months ago is crippling.

People do not believe that the increases in premiums were not affected by the building of the huge new complex.

This is just not the way business operates in our experience.

Please take this into consideration.

Eldon Says:

December 23, 2010 at 9:46 AM

My wife is on Wellmark Blue Cross Blue Shield Insurance & cannot change insurance company because of her health. This has got to come to an end of the raise on insurance.

We are on a fixed income. Her health insurance is running about \$1000 dollars a year more than mine with the same coverage.

I think it is time that someone has got to put a stop to the increase in premiums. We didn't get a raise in our social security for the last 2 years. The president said there was no raise in the cost of living. So why does the insurance premium keep raising.

They put up a \$250 million dollar building maybe they should have help. Save some money to pay for health insurance.

Thank you for looking in for this.

Craig Says:

December 23, 2010 at 2:32 PM

I am a business owner and head of household for a family of six. I have watched my health insurance premiums rise steadily for the last 16 years that we have had Wellmark Blue Cross and Blue Shield insurance. Recently I received my annual letter informing me my rates would increase yet again. Last year we increased our deductible as high as we could to avoid a premium increase. This time my policy is to go from \$1272.80 to an incredible \$1,519.30 a month. That is an increase of over 19% in one year for less coverage than 1 year ago.

That is also a total of \$18,231.60 a year for health insurance out of a total average taxable household income of \$50,000. This leaves about \$90.00 a day for two adults, two fulltime college students, and two grade school children. The only options we seems to have are to reapply for MUCH less coverage and be at their mercy for preexisting conditions or go without health insurance as much of the country seems to be doing.

As the owner of a auto body repair shop I am in a unique position with insurance companies. If I notified the automotive insurance companies I repair vehicles with, I was not making as much money as I required, do you think they would give me a 19% increase in my product? To make it easier for them to decide, I would also enclose the information I was moving into a NEW facility but that it was not costing them anything and would even save them money. In my mind that is what Wellmark is trying to do to its policy holders.

In this day and age of layoffs, cut-backs, unemployment, and having to run a LEAN business this increase is truly uncalled for. When was the last time you were informed of any working persons or family's income to increase 20% annually because of a raise?

Sharon Says:

December 23, 2010 at 2:40 PM

I am a widow living on Widows Social Security and cannot work because I have five deteriorating and bulging disks in the lower back. I do not agree with the raise that Blue Cross is intending to do in April I am already paying \$387.30 and I have to pay the \$5,000.00 deductible every year, which puts me in a lot of debt every year and can't even get all the \$5,000.00 paid before the new year comes around and have to start all over with another \$5,000.00 and go further in debt and now Blue Cross wants to raise my insurance to \$428.70 a month. If they are going to raise their prices they need to lower the deductible by \$1,000 for the raise you put into affect in May of 2010 and another \$1,000.00 for the new raise they are proposing. I do not think it is fair for you to raise the rates twice in one year.

I know that a lot of customers canceled their policies after the last raise and I am sure there will be a lot more cancel if you raise it again.

Why don't you propose to cut all your employees including all board members income by the 10% – 18% each month and see what kind of a response you get from them then you wouldn't have to increase your customers rates. I don't think your employees would like their income cut like that, so what do you think it does to people who are on Social Security it cuts into their income when they are already struggling to make ends meet, and Social Security did not give a cost of living raise in 2010 and we are not going to get a cost of living raise in 2011, because they say the cost of living hasn't raised. I think you need to talk to Social Security and get them to give us a cost of living raise.

Please consider all the facts and of the people you are financially hurting before you go ahead with this proposed raise.

Sheri Larsen Says:

December 23, 2010 at 2:43 PM

Regarding Proposed Premium Rates;

I would like to have on my insurance policy the option; If after the age of seventy, I contract failure of the kidneys, pancreas, liver, heart or other major organ, or contract cancer in any major organ that I will not, repeat NOT seek treatment to prolong my life.

Also; my family budget is at the bare essentials, it has no more wiggle room, no shifting of priorities. Someone else has to give, my guess would be the hospital, doctor, pharmacy charges. I am not on a fixed income, but I don't see any increase in pay coming. A second job would be an option.

Marcia Says:

December 27, 2010 at 10:30 AM

I am a reasonably healthy 62 year old female. I have high blood pressure which is being controlled with medication. My current policy with Wellmark excludes coverage for high blood pressure.

Effective August 1, 2006, I purchased an Alliance Select Enhanced policy and the monthly premium of \$350.80. Following is a history of the changes in premium from the date of original purchase to date, including the proposed increase to be effective April 1, 2011.

Date Premium Increase % Increase

April 1, 2007 \$370.40 \$19.60 5.58

April 1, 2008 \$398.60 \$28.20 7.61

April 1, 2009 \$488.30 \$89.70 22.5

April 1, 2010 \$595.80 \$107.50 22.0

April 1, 2011 \$660.10 \$64.30 10.7 (Proposed)

This represents a 69.8% increase in premium for the four and a half year period from August 1, 2007 through April 1, 2010. If the proposed rate increase were approved, the increase will be 88.1%. My coverage has not changed in this same period of time.

The Bureau of Labor Statistics Consumer Price Index for Urban Wage Earners and Clerical Workers indicates that the total CPI for the period 8-1-2006 through 4-1-2010 was 7.40%. The CPI for the Medical Care component for the same period was 15.6%.

The percent of increase in premium for the same period was 69.8%. What accounts for the difference

of 54.2%? Are we in fact 54% sicker than we were in 2006? I find that hard to believe.

I do not know how much longer I can continue to afford these annual increases in premium. I have tried repeatedly to get into a different insurance pool, but Wellmark continues to deny me coverage in another pool. I have also tried to change to a different company but because of the fact that Wellmark has denied my application to change pools, coverage by another carrier has also been denied. I feel that I have no choice but to accept these increases which border on being usurious.

The history of Wellmark's rate increases compared to the CPI index for all medical care suggests that past increases far exceeded actual cost. I recommend that this increase be denied and that Wellmark take a long hard look at their operating expenses.

Sincerely

Marcia

Cathy Says:

December 27, 2010 at 10:32 AM

Enough! How are the middle class people suppose to afford ANOTHER premium rate increase?

I am a single working woman. Between my rent and health insurance, utilities, I barely have enough to live on.

No wonder people CANNOT afford health insurance. Find another way.

Cathy

Harlan & Audrey Says:

December 27, 2010 at 11:24 AM

Letter to:

Mr Keith Heckel
Wellmark B/C & B/S of Iowa
1331 Grand Ave
PO Box 9232
Des Moines, IA 50306-9232

Ref. Member # ***** Audrey W*****

Ref. Member # ***** Harlan W*****

Dear Mr Heckel,

I did an analysis of our accounts for 2010 yr.

Claims paid for Audrey for 2010 were \$913.53

Claims paid for Harlan for 2010 yr were \$926.97

Premiums paid for Audrey 2010 yr were \$2,150.40

Less claims paid 913.53

Profit or gain \$1,236.87

Premiums paid for Harlan 2010 yr were \$2,254.80

Less claims paid 926.97
Profit or gain \$1,327.83

It doesn't appear that your 8.6% increase for Audrey W***** & your 8.7% increase for Harlan W***** Is in order.

I'm not sure how you arrive at your increase figures, but would hope you would adjust the increase amounts downward to be more reasonable & inline with the figures I've submitted to you for review.

Thank you for reviewing my figures. Please advise your decision on this matter ASAP.

Jenell Says:

December 28, 2010 at 2:27 PM

I received notice that our insurance premium is being increased AGAIN. This is the third time in three years that we have had an increase. our premium started at \$640 per month in 2007. This is during a time when the federal and state governments are making every attempt to lower health insurance costs. We have limited resources and this increase will likely put us in financial hardship. Please take this into consideration and deny Blue Cross/Blue Shield's request for rate increases. Thank you.

Scott Says:

December 28, 2010 at 2:30 PM

It seems once again we must absorb a premium increase from Wellmark BC/BS of Iowa. This has been a frustrating trend over the last ten years, and seems now to be an expected annual event. I understand how it all works, and know that new health care laws can have an effect, and peoples habits do make a difference. I submit to you though, that simply raising our premiums to cover the "costs" is harmful to families, and to the healthcare system as a whole. It takes the burden off the insurance companies, and healthcare providers to control costs and excess, and to work together to provide our healthcare as efficiently as possible.

I urge you to deny this request for a premium increase at this time. I think Wellmark could do more to control costs, (both health and administrative) and is certainly in a position to influence all the other parts of the healthcare system (from doctors to hospitals to pharmacies) to do the same.

I think if you look at the number of increases, and percentage rise over the last few years of premiums, you will find that "increased healthcare costs" do not support those increases.

Do not let the consumer once again be the only responsible party, make Wellmark work harder to help us with our healthcare and our budget.

Steve Says:

December 29, 2010 at 5:59 PM

I think the rate increase is too aggressive. Paying \$4,700 a quarter in insurance is not affordable. Its too big of a jump at once. I don't know how they expect people to afford this. I have my own health insurance as I am self-employed and I have pre-existing conditions that keep me from moving to a different pool or company.

Deb Says:

December 29, 2010 at 6:16 PM

We are small business owners. Its just me and my husband. At first our rates were reasonable. But, in the last few years, our rates have continued to increase at an unreasonable rate. We are not sure what

we can do. Our health insurance is no longer affordable.

Mrs. Russell Says:

December 29, 2010 at 6:26 PM

We received our rate increase from Wellmark, they say they are asking for a 10.8% increase, we started our coverage with them 05-01-1997, at that time our premium was \$329.10. By 2007 our mo.premium was 1409. this is an increase of \$1079.90 /mo.in10 yrs.In 2008 we raised our deductible from \$250. each to \$600. each in hopes of controlling our insurance costs, in 2009 our ins. premium was \$1638.00 per month. Now they are telling us that we are going from \$1638. to \$2227.30 per month. That is a \$589.30 per month increase. How do they think this is 10.8%? We understand we have to have health care ins. But we are self employed, and only make about \$70,000 per year, between our health ins. our workman's comp. our business ins. our car ins. and homeowners ins. we are in the hole at the end of every yr. We can't raise our labor rate enough to make up the difference and still manage to keep our customers. This is highway robbery. When will this stop? I don't think people that get ins. from their employer know how good they have it.My husband has had 8 retinal surgeries in a little over 2yrs. He still has at least one more surgery down the road, it costs appox. \$14,000. every time he goes to the surgery. I would hate to think that he went through all this pain & suffering and we would have to drop our ins. because we can't afford to keep it, with the end result being blindness in that eye. Please vote down this increase, WE CAN'T AFFORD IT!!

Thank-you

Mrs. Edward Russell

c/o Certified Fleet Service

1707 Broadway

Red Oak, IA 51566

Barbara Klubal Says:

December 29, 2010 at 8:12 PM

My family has been insured by Wellmark for many years, mostly in group policies until my husband was laid off approximately one year ago. We maintained our policy via COBRA for 9 months, and in September began to purchase our insurance individually, directly through Wellmark. Within two months of purchasing the new policy we were informed that our premiums would be going up in April by about 17.5%.

I spent a good portion of yesterday morning on the phone with Wellmark in an attempt to get my 25-year-old son added to our policy. My husband had printed out the application form from the Wellmark website based on information given to him by a Wellmark employee. When I called with some questions about the form, I was told that I was not using the correct form.

The employee directed me to a different form on their website. I asked her if she was sure that this was the correct form, and she assured me that it was.

In filling out the 2nd form, I had additional questions, so I called Wellmark again, and the employee told me that this second form was not the correct form. I explained that another employee had just assured me that it was the correct form, but this employee said that that employee had given me incorrect information. She directed me to a third form, but then put me on hold to check with her supervisor, only to return saying that I could use the second form after all.

The first employee told me that the cost to cover my son would be approximately \$250.00 per month and that the coverage would continue through July, the anniversary of the policy. I told her that the anniversary of the policy was September, not July, and she told me that for this particular policy the anniversary date was July and it didn't really have anything to do with when the policy was actually

initiated. This made no sense to me, but I took her word for it.

The second employee told me that the premium to cover my son would be \$150.00. When I told her that the previous employee had quoted me \$250.00 she put me on hold and returned to say that the reason I was quoted \$250.00 was because that department's information indicated that my son is a female.

I told her that my son is indeed a male, and would she please update their records. She told me that she could not update the records because that information was in a different department, and not only that, I might have to send them a birth certificate or a driver's license to prove that my son is a male!!!! When I questioned this person about the length of coverage for my son, she said that coverage would end at the policy's anniversary date in September. I explained that another employee had told me that the policy anniversary date was July, and she said that that was not correct, the policy anniversary date is September.

Folks, this is outrageous, and this is not the first time I have been given contradicting information by difference Wellmark employees. If you are wondering where your hard-earned premium dollars are going, it is to this bureaucratic nightmare. The right hand doesn't know what the left hand is doing over there. Plenty of money for a new headquarters, but nothing for employee training. If Wellmark cannot tell me a simple thing like the length of or cost of a policy, how can we have ANY confidence that our explanation of benefits are correct?

The company has a virtual monopoly in Iowa. Our lives are in their hands.
How much longer will this go on?

I urge those of you who can to attend the hearing on January 6.

Barb

Laura K Says:

December 29, 2010 at 8:33 PM

I too have been marked for the 10.8% increase, on top of two years of hefty double digit increases totaling about 40%. The only break I had was when Culver forced them to back down...and they just waited a quarter and raised it again. BC/BS seems to run a monopoly in this state, and there's no indication of oversight or limits to prevent them from gouging us worse every year.

This year I've started my own business, because I see a strong need for my professional skills on the state level. But I have to wonder if it will be able to continue, when I'm dropping 30-40% of my current projected net on insurance. I'm being hamstrung by these extortionate rates, which cost me more annually than comprehensive car insurance, home owners', gas, electric, phone, cell, and property taxes put together. By the time I'm done paying the rest of the bills, plus gas and food, and of course the unexpected repairs, what's left?

The money Wellmark is stealing from my pocket is money I might be spending at the local stores and restaurants, encouraging Iowa businesses. Instead, every time I'm thinking of dropping \$15 on a meal, I stop to think about the \$15 I already spent that day on insurance. And I go home to heat up something cheap. What will it be like after the next hike?

I honestly think about emigrating to a country with socialized healthcare. Yeah, I've heard the healthcare isn't on par with what the US can offer, although given the delays I've had to be seen for ten minutes, it's hard to imagine. But, regardless, I can't keep bleeding financially just in case

something happens to my health. Just looking at my bill is giving me ulcers and hypertension.

Sorry to double-post, but having reviewed more of the comments, and the transcript of the last meeting, I'm really struck by some of the points and comments made. For starters, I thought I was the only one desperate for a state or federal non-profit option that would fairly spread costs across individuals without filling the pockets of overpaid execs. I would absolutely love to see Iowa lead the way on establishing a state plan. Even if my premiums didn't drop (although I imagine they would), at least I could believe that I wasn't being gouged.

Also interesting to me were Dr. Addy's comments on end-of-life care. I watched a few older relatives be subjected to invasive, painful, extreme measures to keep them alive, in order to suffer more, glaze over in front of the TV, eat through a drip tube, and die slowly. They wouldn't have wanted that, and neither do I. Even though I'm barely middle-aged, I can see the point of offering end-of-life planning to everyone. No, these are not death panels. They're a sensible means of determining if an individual wants to endure for the sake of enduring, or if, past a certain point, they want to be allowed to slip away quietly. I personally believe I have the right to a peaceful, uncontested death, especially if I'm dying anyway and nothing, or only extraordinary interventions, could change it. Or, you know, to escape from relentless insurance gouging.

I know we can do remarkable things these days, and some people will want to cling to every last second, but I don't. That money could be better spent on education to improve the lives of a hundred kids. Or to reduce my insurance premiums, so that at the end of my life, I don't feel like I have to hang on in a hospital just to finally get my money's worth.

Denise Moots Says:

December 30, 2010 at 1:03 PM

I have a notice that my health insurance is raising. This is my second year of having insurance with you, each year it has gone up. I am a single parent working 2 jobs to make ends meet. If this goes up I am going to have to drop health insurance I can not keep paying this. I need to have health insurance but I just can not pay for it any more if it goes up or I will have to try to take out another plan. Just wanted to let you know my feelings on this. Thanks Denise Moots

Shirley Says:

December 30, 2010 at 2:27 PM

Dear Sir, I'm not very happy with my Premium rates going up and up very year. I'm a very healthy person I go to the Dr. mainly for my yearly check up. 10% rates increase is a little much!!!!!!!!!!!!!!!!!!!!!!

Thanks,
Shirley

Larry Says:

December 30, 2010 at 3:36 PM

my comment on this rate increase for me at least is that it is grossly high at the 48.8% increase. Please use this as my complaint concerning this.

Thank You,
Larry Peterson

Sandra Says:

December 30, 2010 at 3:36 PM

I'm retired for the past 3 year. In the past three years, I have had an increase every year. When you get the notice of the increase, my increase was more then the stated amount. I only go to the doctor once every year for a mammogram and to have my blood pressure checked. I also go to the chiropractor once a month. On top of my premium, I have to pay a co-pay. I have to have a knee replaced and I can't afford it. I have a \$5000 deductible. I have only had \$900 in claims in the past year, but I have paid more than that in premium. I understand I'm part of a pool, but I think its unfair. My retirement income is not raising. I don't know how they expect people like me to keep on. I have had increases of a \$140 in the last three years.

Robert Says:

December 30, 2010 at 3:45 PM

Every year they keep raising their rates. I'm retired after working on the railroad and we have not had pay increases. Why do they keep raising rates each year. My increases are always more than what are stated. Last year I had to up my deductible so I can keep my insurance. I'm 59 and disabled. I'm going to have to decide if I'm going to have to drop my insurance. Its not affordable for people with a fixed income.

Richard Long Says:

December 31, 2010 at 3:03 AM

Dear Sir: Please say No to another insurance increase my pay check just wont handle another one after the 18 % they took last year, I have a grandson with health problems that we take care of and are paying enough now, If health care cost keep going up we will really be in a bind and I dont know what to cut next, please help us little guys out and refuse this increase.

Thank you for all your help PLEASE.....

Jim Septer Says:

January 1, 2011 at 1:07 PM

I'm sorry to be one of the sick ones causing rate increases, but as you'll see in the following, I really don't believe it has much of an affect on how Wellmark operates. I'm probably Wellmark's worst nightmare, however, because I've tried to track every dollar they've paid out, and they don't make it easy.

First, how much is this year's rate increase? One place says it's an average of 11%. Another says it's a base increase of 11%. There is a difference! If it's a base increase, I assume everybody is paying at least 11% more. If it's an average, somebody is paying less than 11%. I question this because I'd like to know how my pool of policy holders got hit with a 52% increase. That raises the question – who is in my pool of policy holders? Am I lumped together with other 60-year-old single white males, or do they combine all of us cancer survivors in a pool of uninsurable people that have no choice but to pay whatever we're billed?

For the record, if this latest increase is allowed and my math is correct, my premiums will have increased 190% since I got my policy in 2005. My first year, I paid \$2910.90. In 2011 they expect me to pay \$8424. I pay quarterly, and sent them a check in April 2005 for \$706.80. Next April I need to come up with \$2106.

The standard excuse for raising rates is the increase in the cost of medical services. I don't see it. The billed cost of procedures has definitely gone up, but that has nothing to do with what Wellmark

pays. I've got three examples I've tracked over my five years of dealing with cancer.

Procedure Date Billed Paid Date Billed Paid Provider inc. Wellmark inc.

X-ray 8/05 \$145.50 \$40.00 7/10 \$239.00 \$41.00 64.3% 2.5%

CT scan 6/05 \$1,086.00 \$422.00 10/10 \$2,138.00 \$333.90 96.9% -20.9%

MRI 7/07 \$4,581.00 \$1,622.00 8/09 \$5,568.00 \$1,431.00 21.5% -11.8%

And, the co-pay is based on the amount that is billed. My first procedure this year was two* CT scans. They billed Wellmark \$4024. Wellmark took a \$3040 discount and I paid \$984. Wellmark paid nothing. (*I can't afford the MRIs on my brain that my surgeon wants, so my oncologist is now doing CTs on my head as well as my chest.) If anything could be inferred from all this, I'd not be surprised to find Wellmark in collusion with the hospitals to artificially inflate the prices. With no recurrence of cancer, 2010 was my cheapest year, to date. In summary; Wellmark was billed \$10836 – they took \$7395 in discounts leaving \$3441 to be paid. Of this, Wellmark paid \$1554 and I paid \$1887 (plus their premiums of \$5544). Net result – they made \$3990 off of me, and I'm sick. I can't imagine what they're making off of healthy people.

The amounts I show them paying excludes drugs. Drug companies are a whole different story for another time. Anyway, my prescription cost is \$4960 per month. My co-pay is about \$1700, which I can't afford to pay. I'm in one of the drug assistance charity plans that picks up some of the co-pay, but when it looked like they were paying more than my annual allotment, I did some research and found out that Wellmark also doesn't pay the billed price for drugs. In my case, they take about a \$582 discount each time. The bottom line is that I only take my pills three days a week because I can't afford the cost, even with the assistance plan.

Wellmark tells us it is a mutual company. Therefore, by definition, it is owned by us and is to be operated for our benefit. I, for one, want to vote for the directors that are running my company. If we have income, other than the premiums we owners pay, I want to know where it's coming from. If there is no other income, I want to know how \$250 million is being spent on a new building without affecting our premiums, and without the permission of the company owners.

I have a final question. Is everybody's statement designed so that you end up mailing your check back to yourself if you inadvertently put the remittance advise in backwards? I'm just curious if it's normal, or just done on policy holders they want a chance to cancel.

Steven Johnson Says:

January 1, 2011 at 4:44 PM

Yet another rate increase, when will it ever stop? I do not have insurance through my employer. I am single, 63, in good health and rarely use my insurance. I would like to submit the following information concerning my rate increases since 2007 and have the notice of premium increases from Wellmark for each year as proof.

Feb. 2008 Notice – Current monthly premium \$337.10 Monthly Change \$158.50 New monthly premium \$495.90 Equals a 47% increase.

I then increased my deductible to \$3000.00 in order to keep my monthly premium at \$343.90

Feb. 2009 Notice – Current monthly premium \$343.90 Monthly Change \$34.80 New monthly premium \$378.20 Equals a 10% increase.

Feb. 2010 Notice – Current monthly premium \$378.20 Monthly Change \$83.30 New monthly

premium \$461.50 Equals a 22% increase.

Nov. 2010 Notice – Current monthly premium \$461.50 Monthly Change \$49.80 New monthly premium \$511.30 Equals a 11% increase.

So they still got it!

Unfortunately, my income doesn't increase proportionately. Something needs to change. Perhaps the CEO's income or streamlining the administrative services. Trying to figure out the numerous and duplicated billings is a nightmare.

Thanks for considering my two cents worth.

Steve Johnson

Marlys Adkins Says:

January 2, 2011 at 5:36 PM

My husband and I are self-employed which means we have to take care of getting our own health insurance. Last January we paid \$654.00 a month for health insurance, then BCBS said they were going to raise rates, so once again we had to raise our deductible in order to afford health care. So we raised the deductible from 3500.00 each to 4500.00 each and it still raised our month premium to 711.00 a month. AND, we are healthy for being 60 and 62 years of age. NO major health problems. We feel we are being penalized for being healthy and have to help those who are not. Ever since we turned 50 we have had yearly rate hikes and are getting very tired of it. I realize the price of health care is going up, but there must be some way to take of this besides yearly price hikes. DO NOT LET THIS HAPPEN AGAIN.

Jiri Says:

January 3, 2011 at 4:51 PM

January 2, 2011

Iowa Insurance Division Consumer Advocate
Iowa Insurance Division
330 Maple Street
Des Moines, IA 50309

Dear Consumer Advocate:

This letter is in response to the proposed increase in health insurance premiums by Wellmark Blue Cross/Blue Shield of Iowa. The proposed premium increase of 10.80% is not acceptable for the following reasons:

1. The stated reason for the majority of the increase is "the projected increase in medical claims expenses for the next year due to increased use of health care services, cost of those services and costs related to the introduction of new health care treatments and procedures." As a retired health care professional, I know this not true. Last year you approved an 18% increase in insurance premiums. Health care costs have not risen by 18% this year so there is no need to raise the premiums further. The real truth is probably the cost of their new facilities. Wellmark's capital improvements should not be absorbed by the consumers, especially in this financial climate. Instead, Wellmark needs to become more efficient in handling claims. Asking for a 28% increase in premiums within a two year period shows poor management. Ask Wellmark to reduce management costs

instead.

2. Wellmark will not provide the percentage of the actual increase in premiums. They state "the final rate you receive may be different than that listed due to changes in these factors while the rate is pending approval." How do we know that Wellmark will not increase premiums to 15% or more? Any properly run business would have accurate knowledge of costs and income. Again, I believe Wellmark is being mismanaged.

3. Wellmark has three riders on my policy covering my entire digestive system, all joints and back. I believe that only about 55% of my body is covered. From this, you would expect that I am extremely unhealthy. The opposite is true. I know that the only control I have with my own health care costs is to have good health practices. I also expect my health insurance provider to acknowledge those practices and provide total coverage. Since that will probably not happen, I do expect that my premium will not increase.

Thank you for advocating for health insurance consumers.

Best regards,

Jiri Tvrdik, BSN,MBA

Iolar Says:

January 3, 2011 at 7:52 PM

BCBS will continue to have increases every year.

Iowans can't afford them.

There was no money to help our kids through college it went for insurance premiums, so now we are in debt farther because we helped them with Parents Plus Loans, thank you BCBS for putting us \$50,000 more in the hole. That \$10,000 a year we gave BCBS would have went quite a ways for college tuition.

The only way this is going to stop is to stop the exorbitant hospital and doctor charges. You hear it all the time, several hundred dollars for an aspirin and so on. Many of the charges are beyond ridiculous. Do something about the malpractice lawsuits, etc, etc, etc.

If you really want to correct these premium costs you have to fix the problem first.

Guess I can only hope to live to retirement and get Medicare.....I can't wait!!!!

Why is it our fault that we don't work for an employer that provides insurance benefits. We're just lucky to have a job, let alone a pay increase. Please help.....thank you.

Melissa Says:

January 4, 2011 at 1:35 AM

TO: Iowa Insurance Division Consumer Advocate

I would like to protest the proposed rate increase in my insurance premium with Wellmark Blue Cross/Blue Shield, as notified in November, 2010.

Last year I was one of 80,000 Iowans to have my insurance premium increased by 20%. This year I am one of 46,000 and my premium will increase by 18%. I am feeling very targeted.

At age 62, in perfect health, having never smoked, do not drink, weight in line with my doctor's approval, I have never not had insurance. Now, I am faced with the decision – do I drop my insurance and have no coverage at all or buy insurance at this higher premium and not use it for fear my rate will go up every year.

It is obvious that BC/BS is trying to deter me from coverage with them, making my premium so high as to be impossible to pay. If my rate goes up this additional 18%, I will be using 60% of my Social Security for health insurance.

Melissa Brown
1-3-2011

Darryl and Sonya Gilbert Says:

January 4, 2011 at 11:04 AM

I am writing to you to protest the increase on me and my husband's policy increases due in April. We simply can't afford more increases. We already pay almost \$950 per month, and then the increase is suppose to go up by 15%? Since we are on a limited budget on Social Security and the amount we get each month, we don't have lots to live on. We would like to attend the hearing on Jan. 6th, but with gas prices and the cost of getting to Des. Moines, we just can't afford to go. I would surely want you to represent my plea on Jan. 6th and take into consideration what we are up against. We just can't afford any increases that Blue Cross/Blue Shield wants to impose on us.

Thank you.

Darryl and Sonya Gilbert

Pamela Waters Says:

January 4, 2011 at 11:06 AM

To Whom It May Concern:

I lost my job in August 2007 and was forced to obtain my own health insurance. After 4 months, I had not yet found other employment and I could no longer afford my Cobra premium. I obtained health insurance coverage with Wellmark effective 1/1/08. My premium increased 19.9% effective 4/1/10. Now my proposed premium increase is 12.2% effective 4/1/11. I still have not found permanent, full-time employment and this proposed increase is unfathomable. I am trying to be a responsible citizen by maintaining health insurance but these constant double-digit rate increases are making this impossible. I can't afford to be without insurance but it is becoming more difficult to afford even the lowest level of coverage. How can Wellmark justify back to back, double digit premium increases?

It is difficult to drive by Wellmark's new multi-million dollar headquarters in downtown Des Moines and read about multi-million dollar salaries and bonuses paid to executives and not wonder how much of the rate increase is used for these purposes.

Sincerely;

Pamela S. Waters

Curt Smith Says:

January 4, 2011 at 11:07 AM

Iowa Insurance Division,

Please accept this email as a formal complaint towards the Wellmark BCBS proposed rate increase that is to take effect April 1, 2011.

My family and I have been Wellmark BCBS customers for years and have never filled a complaint but these yearly increases on a whim have to stop. We pay nearly \$8,000.00 out of pocket for our insurance and our deductible is around \$8,250.00. We are growing weary continually paying for something we very seldom use. With our high deductible, realistically, the only thing we get from Wellmark is a very small network savings on our out of pocket medical expenses. Honestly, in most cases, if we'd just pay cash onsite our savings would be greater than what we get from running the invoice through Welmark but the office call (for example) wouldn't be credited to our deductible.

I have nothing against a company making an honest profit but there is no reason that rates need to be hiked again. It's not our fault Wellmark spent \$250 million on a new corporate headquarters, or pay (what many feel) are over compensated company executives. I think it's high time Wellmark recruit some Wal-Mart executives to show them how to curb expenses and drive down costs.

It's time for competition and if that competition comes from across our state lines then so be it.

Respectfully Submitted,

Curt Smith

Warren & Janice Arends Says:

January 4, 2011 at 11:08 AM

I am greatly concern about the proposed 10%+ rate increase that Wellmark is asking for. We do not have employers that we can purchase our health insurance through. My husband is self employed and I am employed by a small business, (3 employees) that has no health care coverage. If the proposed increase occurs, our insurance would be \$1005.85 per month. With gross wages of \$2450.00 per month, we do not see how it would be feasible to carry any health insurance. We currently pay \$831.55 per month and we are barely managing.

My husband is currently happy to be working most days and we hope his income will remain stable for the next year. My employer has informed us not to expect any increase in wages for the next year. I only wish the rest of the costs of utilities and groceries and insurance would not increase also. But that does not seem to be a practical wish at this time.

I would strongly urge the Insurance Commissioner to veto all rate increases proposed by Wellmark at the current time.

Warren & Janice Arends

Rock Rapids, IA 51246

David Rust Says:

January 4, 2011 at 11:16 AM

Wellmark holds an annual meeting for individual mutual policyholders. I attended that meeting on May 7, 2010. I was the only policyholder present. I urge all individual policyholders to attend these meetings. The next annual meeting should be at about the same time in 2010. Watch for information from Wellmark regarding the time and place for this meeting.

Joy Smith and David Rust Says:

January 5, 2011 at 5:23 PM

We are very disturbed about Wellmark's proposed rate increase. We have experienced regular sharp premium increases since we began purchasing individual health insurance from Wellmark since 1998. Last years 25% increase was the most extreme. Our annual combined premiums went from \$10,498 to \$13,089. Now Wellmark is asking for an additional 11% increase in 2011, escalating our combined premiums to \$14,550. That is difficult to accept, especially as our health is very good for our age and we are assiduous in attending to preventive care, avoiding unnecessary medical tests, unnecessary medications, and unnecessary medical appointments.

This forum for public comment and a public hearing regarding Wellmark's projected 2011 rate increase is a result of legislation motivated in part by public concern about the size of last year's rate increase. We appreciate the opportunity for public comment but are concerned that it is simply a way to placate consumers whose pocketbooks are stretched to the limit and who have no real alternatives.

Individual mutual policyholders have no power in the current system. We cannot bargain as a group. Wellmark writes most of the health insurance in Iowa. There is no competitive health insurance marketplace. In addition, individual policyholders are further atomized into smaller groups to determine individual premiums.

We are concerned that Wellmark is deliberately pricing individuals out of the marketplace. Last year the individual policyholders affected by the 25% rate increase numbered 80,000, according to news reports. News reports this year state that number as 51,500. Why is that number reduced? Are there now more people in Iowa who are unable to afford health insurance as a result of these increases?

Wellmark says the 11% premium increase for 2011 is based in part on the "projected increase in medical claims expenses for the next year." Are substantial premium increases being requested as an additional plus for Wellmark's bottom line before all Federal health care reforms take effect in 2014? How does the context of health care reform affect decisions about premium rate setting?

Wellmark states they are committed to "improving the quality and reducing the cost of health care," in part "by working with providers to find new and better ways to pay them for quality vs. quantity of services." Does this mean Wellmark intends to reimburse for outcomes rather than procedures? We would celebrate such a change.

We will be looking for evidence that requests for premium increases are subjected to the strictest scrutiny, ensuring us that Wellmark is using our premium dollars in the most effective and efficient way while keeping administrative costs and benefits as low as possible. We wonder if perhaps the best way to insure that Wellmark works to reduce costs is to deny the premium increase request.

Joy smith and David Rust Iowa City, Iowa

Teri Says:

January 4, 2011 at 1:09 PM

Since Feb 2008 my rates have gone up 54%. The proposed increase for Apr 2011 will bring it to a 70% increase. That is for catastrophic insurance only, since I have a high deductible and they excluded coverage for the minor things I actually have. They excluded osteopenia which costs me \$200 every other year for a bone density scan and about \$12 per month in medication. They really saved a lot of money there, didn't they! In exchange for a lot of bad will. I guess I'll have to drop Wellmark now and if anything major happens then state medicaid can pay for everything. They have a monopoly and need to be kicked out of Iowa, and certainly shouldn't get any Iowa tax breaks for their business.

Last year our county government had an 11% increase while mine was 22%, and reading these responses others were even larger. Larger groups have some clout to protest but individuals don't. We really need an insurance exchange so we can arrange group rates and not be targeted so easily.

Melissa Pritchard Says:

January 4, 2011 at 3:33 PM

My name is Melissa Pritchard. My husband and I own our own business and of course have to pay out of pocket for our insurance. We have one child on our insurance plan.

I am a little disturbed by the insurance increase to our family due to a couple of items.

First, we are a very healthy family. We have changed our plan to a no deductible premium because we do not go to the doctor other than for check ups. We recently deleted a child from our plan thinking our rate would go down. Please feel free to review our medical history and records. Premium increases should be determined by the use of insurance.

This is frustrating!

Thank you, Melissa Pritchard

Martha Norbeck Says:

January 4, 2011 at 6:07 PM

Ms. Robinson,

I am writing in regards to the hearing to discuss Wellmark's insurance rate increase on individual policy holders. I find this proposed increase problematic for two key reasons.

First, if they are truly experiencing an increase in healthcare costs, then why are only individual policy holders being affected? This appears to place an unfair burden on these consumers.

Second, increasing rates on individual policy holders is more likely to lead to additional policy cancellations. If I worked for a company who provided insurance, I would keep my policy, well or unwell. However, as a healthy, forty year old, self employed individual, I am considering canceling my policy. Last year's 18 percent increase was hard enough to absorb. Another 11 percent may prove too difficult to budget for. Consequently, as more healthy individuals cancel their policies, Wellmark's costs will increase, necessitating even further increases. This reinforces why the 2014 provisions of the Health Care bill can't come soon enough.

I propose that the increase be applied to all policies, group and individual. Or to deny their request, which I hope will compel them to innovate and become more efficient.

Thank you for your time.

Sincerely,

Martha Norbeck, President

Catherine E Says:

January 4, 2011 at 10:35 PM

All insurance companies are raising their premiums; are they also under scrutiny?

A few years ago my employer changed from Wellmark to another insurance company that still advertises how great they are and how much cheaper they are. Well, by May of our year with that company, I had not received payment on any claims and that was the norm for all employees. The following January 1st, we returned to Wellmark and our claims returned to the efficient, effective pay style of Wellmark.

Needing medical services can be a stress in itself – we don't need insurance companies that tell you "we haven't received your claim". I had some I submitted as many as three times. With that insurance company's delayed payment, I was forced to make payments to my providers to maintain my credit.

My question – Are you monitoring all insurance companies for rate increases or just Wellmark? Why? Are you monitoring service and payment handling by the insurance companies?

In this day of "no service", Wellmark is an efficient, conscientious payor. Wellmark is my insurance company – by choice.

Sheila Says:

January 5, 2011 at 8:31 AM

I am writing about Wellmark Blue Cross & Blue Shield of Iowa.

I change from Blue Cross & Blue SHield Insurance Because Insurance Company was already taking half my Social Security CK and was planning to raise insurance premium again.

Now Wellmark Blue Cross & Blue Shield now planning on raising premium.

I live in Webster City and plan raising elec bill, which mean they raise sewer & water bill.

Government said they cannot raise SSC; because the cost living hasn't gone up.

Yet I see the cost of gas has gone up.

I hate to see my heating bill, even when keeping at low heat I feel like I freeze.

So I would apprentice that my insurance premium don't go up. Send I still pay on medical bill that was cover.

P.S. Can't get help since I still make just above low income and single & no kid under eighteen. I really this doing any good. You let them do it!?!

RS from Cedar Falls Says:

January 5, 2011 at 8:36 AM

Please do not let Blue Cross raise their rates again. I have had a 90% rate increase in the last 6 years. I have always had to buy my own insurance. In 2004 I was paying \$221.50 a month with 2400.00 deductible & drug coverage. They have raised rates so much. Last year's increase raised my premium to 505.00 a month. I couldn't afford that so I had to change my deductible to 3500.00 and no drug coverage at all in order to get my cost down to 379.10 a month. Now they want to raise it to 420.00 I can't afford this raise. This insurance policy is only for a disaster. I still can't afford to go to a doctor. I have no eye coverage or dental coverage either. I'm not getting a raise in social security.

On top of all this, I tried to do the right thing & bought nursing home coverage 6 year's ago with Banker's Life. Just got a notice they are raising that premium again. That is the 3rd raise in 6 years ot the tune of 83% increase. Therefore, I have to drop that coverage as I can no longer afford it either. Maybe you should check out Bankers Life Co. But it is too late for me – I guess I'll have to just have the state take care of me.

Sister Ladonna Woerdeman, OSF Says:

January 5, 2011 at 8:47 AM

I am writing you about my concern that Wellmark wants to raise insurance rates 11%. I have also written to their CEO, Mr. John D. Forsyth.

I went on Wellmark's website and note they have 25 Vice-Presidents. Why does a company need 25 Vice-Presidents? I am sure each makes more than \$100,000 in salary. I suggest corporate management be trimmed and that would save the consumer the threat of increase in insurance premiums.

Wellmark claims the consumer is not paying for their costly new building. If a company can afford a fancy new building, then they should be limited in how much profit they can make.

According to the article in the Des Moines Register on November 13, 2010, when the rate increase was announced, spokesperson Rob Schweers alluded "For example, the company said, rising rates of obesity and diabetes are leading to more need for care." I will make recommendations how an insurance company might save money in the area of diabetes.

I am a registered and licensed dietitian (RD,LD) and a Certified Diabetes Educator (CDE). Insurance does not cover pre-diabetes. We know if a person has elevated blood sugars in the pre-diabetes range, it already does damage to the cardiovascular system. Why not refer persons with pre-diabetes to a registered dietician for nutrition counseling and pay for these services? It is cost effective and RDs can help prevent the person from getting full blown type 2 diabetes by nutrition intervention. Insurance pays if a person has diabetes and has costly complications – such as a heart attack, an amputation, etc.

Co-pays for anyone with diabetes need to be waved. Patients are referred for diabetes education but have plans taken by their employer with expensive co-pays and they can't afford the co-pay, therefore they can't afford to come for diabetes education. Diabetes education is going to save money in the long wrong and prevent costly care for complications from diabetes. Diabetes is a very complex disease and does damage to all organs.

Insurance rates do not have to increase if management 1) trimmed their corporate management positions 2) pay for prevention 3) insurance staff work in a modest building rather than a costly new building 4) an insurance company is allowed to make only a bare minimum of profit and the rest goes to reduce insurance premiums.

I urge you to take a compassionate look at how ordinary Iowans are struggling to make ends meet and do not need the added financial burden of rising insurance premiums. Please do not grant Wellmark's their desire to raise insurance rates.

Claire Cumbie-Drake Says:

January 5, 2011 at 8:52 AM

I am providing this information to you on behalf of my client, Mr. Joseph Jacoby. Based on his personal experience, Mr. Jacoby is deeply concerned about the health insurance industry and delivery of health care in this country. As an individual policyholder with Wellmark Blue Cross Blue Shield of Iowa, he is particularly concerned about the current proposed rate increase.

He asked me to assist him with preparing and disseminating this information to various individuals and organizations in Iowa in the lead up to the rate increase public hearings scheduled for January 6, 2011. The Consumer's Union report is an excellent piece of research on the issue of Blue Cross Blue

Shield retained earning and rate increases, and includes specific policy recommendations regarding future rate increase.

We ask that you review this information and consider it carefully in regard to your recommendation on the current rate increase.

(Information follows)

Statement on Wellmark Blue Cross Blue Shield of Iowa Proposed Rate Increase

According to the Des Moines Register, Health Insurance Commissioner, Susan Voss, “will mainly consider actuaries’ reports when deciding whether to approve” Wellmark’s proposed 11% increase in the health insurance rates for individual policyholders. (Tony Ley’s, “Public Sounds Off Over Wellmark Rates”, Des Moines Register 19 December 2010, p. 1B). However, the Insurance Commissioner and Wellmark officials have been vague, at best, about what criteria underlying the actuarial reports would or would not justify another rate increase, on top of the 18% increase imposed on individual policyholders just last year.

In it’s recently published report, *How Much is Too Much: Have Nonprofit Blue Cross Blue Shield Plans Amassed Excess Amounts of Surplus?*, the Consumer’s Union examined the surpluses, or retained profits, accumulated by ten (10) nonprofit Blue Cross Blue Shield Plans across the country. The study found that seven (7) out of the ten (10) surveyed, held more than three times the amount of surplus that regulators considered necessary to protect the plans against insolvency and to protect the insurer’s ability to pay medical claims in the event of financial loss. In some cases, the excess was as much as seven times the regulatory minimum. All the while, the insurers continued to raise rates. (Consumers Union, *How Much is Too Much: Have Nonprofit Blue Cross Blue Shield Plans Amassed Excess Amounts of Surplus?* July 2010, http://www.prescriptionforchange.org/report-how_much_is_too_much-part_1.html).

In most states, insurers are required by regulators to hold a certain minimum level of surplus. However, according to the Consumers Union study, rarely do regulators set an upper limit on the amount of surplus an insurer can accumulate, nor do most states require regulators to even consider an insurer’s accumulated surplus level when deciding whether to approve or deny rate increases. Consumer’s Union found that target levels for surpluses appear to be developed without regard to affordability for consumers. In fact, surpluses for many plans are used not only to protect against risk, but for a number of business purposes such as technological upgrades, new product development, and business acquisition. Profit margins, fueled by increasing premiums, are expanding to the point of rendering premiums unaffordable, especially for individual policyholders.

America, unlike other wealthy countries, has not made the moral decision to provide health care for everyone, according to T.R. Reid in *The Healing of American: A Global Quest for Better, Cheaper, and Fairer Health Care*. From his first hand study of health care in France, Germany, Japan, The UK, and Canada, Mr. Reid concluded that it is in fact possible to provide quality health care to everyone, at an affordable price. However, doing so requires a fundamental shift in our thinking about health care as a profit-making venture. Mr. Reid found, with rare exception, that consumers were satisfied with their country’s system, even when it meant longer waiting periods for elective procedures. He also found that physicians were generally willing to forego the higher salaries of their U.S. counterparts and to work in more austere environs. For lower cost, the other wealthy countries ranked higher than the United States in most major health outcome indices. (T.R. Reid, *The Healing of American: A Global Quest for Better, Cheaper, and Fairer Health Care*, Penguing Press, NY, 2009,

Print).

Mr. Reid found that the ability of a country to afford health care coverage for everyone is based, also, on substantially lower administrative cost than in the United State health care industry. The multiple layers of review panels and preapprovals; the efforts to 'cherry pick' those who can be insured; and the multiple levels of co-pays, coinsurance, and deductibles in the U.S. system fuel excessive administrative costs that are all but absent in the other developed countries in his study. In addition, medical education is generally free, or very low cost. Malpractice premiums are a fraction of the cost in the United States. Risks are spread because the entire population is covered. Preventive care is encouraged.

While Wellmark cannot set broad health care policy for Iowa or the United State, the organization is a dominate player in the health care industry, almost to the point of monopoly, and has a significant impact on how and to whom health care is delivered in the state of Iowa. (The Department of Justice has recently filed an antitrust lawsuit against Blue Cross Blue Shield of Michigan, which has been compared to Wellmark Blue Cross Blue Shield of Iowa in terms of its market dominance, alleging that the insurer impedes competition by pressuring hospitals to sign contracts that require the hospital to charge smaller insurers more to provide care. See Reed Abelson, Antitrust Suit in Michigan Tests Health Law, 20 December, 2010, New York Times, p. B1 <http://www.nytimes.com/2010/12/21/health/policy/21blue.html>). Beyond protecting solvency, Wellmark's decision to raise rates is a moral decision, which has a direct impact on human suffering. Further rate increases will undoubtedly force a number of Iowans to go without insurance, having to choose between paying the higher insurance premiums or for other necessities.

Before the Insurance Commissioner approves any proposed rate increase, the increase should be scrutinized to determine if it is absolutely necessary to maintain the solvency of Wellmark. In particular, the following recommendation set out by the Consumer's Union should be considered as part of the analysis: Examine Wellmark's accumulated surpluses, and set minimum and maximum ranges for surpluses based on current risk factors. If accumulated surpluses are sufficient to absorb potential losses, rate increases should be rejected. If surpluses are in excess of maximum amounts required, any rate increase should be rejected and the excess held in a rate stabilization reserve designed to offset future rate increases or to provide refunds of premiums to policyholders.

Finally, in order for policyholders to adjust to future rate increases, Wellmark should be required NOW to answer the question: What is your business plan going forward for further rate increases in 2011 and 2012, and what are the specific criteria upon which those increases will be based?

(also submitted with comments: The Healing of America: A Global Quest For Better, Cheaper, and Fairer Health Care, by T.R. Reid)

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While Wellmark cannot set broad health care policy for Iowa or the United State, the organization is a dominate player in the health care industry, almost to the point of monopoly, and has a significant impact on how and to whom health care is delivered in the state of Iowa. (The Department of Justice has recently filed an antitrust lawsuit against Blue Cross Blue Shield of Michigan, which has been compared to Wellmark Blue Cross Blue Shield of Iowa in terms of its market dominance, alleging that the insurer impedes competition by pressuring hospitals to sign contracts that require the

hospital to charge smaller insurers more to provide care. See Reed Abelson, *Antitrust Suit in Michigan Tests Health Law*, 20 December, 2010, *New York Times*, p. B1 <http://www.nytimes.com/2010/12/21/health/policy/21blue.html>). Beyond protecting solvency, Wellmark's decision to raise rates is a moral decision, which has a direct impact on human suffering. Further rate increases will undoubtedly force a number of Iowans to go without insurance, having to choose between paying the higher insurance premiums or for other necessities.

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(also submitted with comments: *The Healing of America: A Global Quest For Better, Cheaper, and Fairer Health Care*, by T.R. Reid)

Larry Peterson Says:

January 5, 2011 at 9:36 AM

My insurance premium is increasing from \$480.20 to 714.70 a month for the next year. That is an increase of 48.8 %. I have a hard time believing that a 48% increase or even a 11% increase is needed. They do it because they can. The profit for the company does not support the argument that they have increased costs. We can all see the monument they are building to prove it.

Tim Armstrong Says:

January 5, 2011 at 10:12 AM

In regards to the proposed 10.8% rate increase, I understand the factors fueling the increase, but I believe the percentage is too high. In a time when people are trying to make ends meet, the increase seems a bit extravagant. We believe Blue Cross-Blue Shield is a very good company, and have always been pleased with the service we have received, however we think a smaller increase would be justified. The increase concerns our son Aidan's policy.

Respectfully,

Tim Armstrong

Lawrence Says:

January 5, 2011 at 2:53 PM

Comments & Suggestions to Improve Health Insurance

I worked for the State Dept. of Health for 19 years.

Much could be accomplished by educating people so they can make healthier choices! Also, the Risks & Consequences of poor choices should be emphasized!

Many companies take what I call the "Lazy" approach and just raise premiums.

Double digit premium increases play right into the hands of those pressing for Federally operated & controlled health insurance! When premiums become so expensive people can no longer afford them, it pushes policy holders into the realm of the uninsured. Double digit increases are also inflationary. How many people do you know who get double digit pay increases every year?

Some politicians say competition will lower Health Care costs. This hasn't happened with auto insurance. Double digit increases are occurring with auto insurance as well.

SUGGESTIONS

1. Encourage Insurance Co's. to publish lists of their cost increases and explain them. How much is care for illegal's and uninsured affecting costs?
2. Encourage companies to institute mandatory Nutrition Education.
3. Encourage companies to institute mandatory Healthy Cooking Education.
4. Encourage companies to institute mandatory Healthy Shopping Education.

You see people loading up on pop and many other forms of junk food at the store all the time. The consequences of these behaviors and excesses long term can be debilitating & deadly. Norm Parker is a prime example of the consequences of poor diet & lack of exercise.

Some Advantage Plans, like Humana offer classes, unfortunately they are not mandatory.

Also, most Advantage Plans also offer free memberships to fitness centers. They can be very helpful incorporating exercise into a healthy lifestyle.

5. I recommend a one month log of eating & exercise and a consultation and suggestions for improvement by an expert.

I believe these suggestions could reduce the cost of health care & improve profit ratios.

Don Says:

January 5, 2011 at 3:03 PM

I am sure you realize the proposed premium increase from Blue Cross/Blue Shield for 2011 is extreme. A 10% increase is devastating to especially the "fixed income" population and financially debilitating to all that have to pay for private insurance. I would hope that this can be reduced by different payor contract arrangements with the various hospitals and physicians as this cannot continue. By allowing these types of increases you are forcing people to choose between having insurance and not having insurance...what has been gained when the so-called free care from non-insurance patients begins to skyrocket?? There should be, in my opinion, a cap on annual raises of no more than 3% (that is approximately what the average worker receives in a cost of living raise)...to have an annual increase of more than this will result in financial ruin. I would hope that in your decision process that creativity and ingenuity play a huge role. I urge you to allow no more than a 3% increase as well as working towards different payor contract benefits (in the near future) to hold down future annual raises.

There has to be a better working relationship between insurance companies and health care providers. It seems that whenever Blue Cross/Blue Shield want an increase of whatever magnitude, they get it.....where does it stop?????

Teri Roberts Says:

January 5, 2011 at 4:04 PM

I imagine the Insurance Commissioner will comply with the “letter of the law” by having this public meeting to let people vent. But then will say the numbers provided by Wellmark are justified. But that isn’t the point. We all know that looking at the formulas & books isn’t enough from examples such as Enron, BP, Wall Street and the mortgage mess, etc. I think it is your job to look at their business a little deeper.

The Iowa Insurance Division website states, “The insurance commissioner ... has general control over all aspects of their business, from the forms they use to the rates they charge. ... The Iowa Insurance Division shall protect consumers ... by effectively and efficiently providing a fair, flexible and positive regulatory environment.”

I feel that individual policy holders are bearing the brunt of increases as opposed to the larger employment groups such as county governments or other large employers because we have no recourse. Last year my county’s insurance increased 11% but mine went up 22% and other people’s increased even more. It seems that Wellmark is treating all individual policies as though they are high-risk and and they aren’t, plus they exclude coverage whenever they can to the point the insurance is useless.

Wellmark shows on page 198 of their Application for a rate increase the “Allocation of Annual Medical Claims Incurred by Range of Annual Claims Paid.” If it is true that 91% of the covered members have claims less than \$2,500 yearly and 26% actually have NO CLAIMS, then Iowa needs to figure out how to spread out the cost of the remaining 9% without dumping it on just the individual policy holders.

Wellmark has profitted by my coverage every year, usually by about \$4,000 per year. Even the year I had surgery on an injured finger I still paid Wellmark \$1,000 more than they paid out in benefits. In the last 2 1/2 years my rates have gone up 54%. The proposed increase for Apr 2011 will bring it to a 70% increase. Is this because I injured a finger? I haven’t changed age groups or anything else. My insurance is paid until 3-31-2011 but it will probably have to be dropped because it really isn’t paying for anything.

Jackson Jarvis Says:

January 5, 2011 at 4:36 PM

Public hospitals & clinics and public insurers (like medicare or government employees have, the non existant public option, or regulated like Blue Cross & Blue Shield used to be years ago) prices increases should be limited by law to the rate of inflation.

Private hospitals & clinics and private insurers should be able to charge what the market will bear.

Each person can then decide which one to use or none at all and accept the risks and rewards of their decision and fees they paid.

Rex Blake Says:

January 5, 2011 at 8:55 PM

Each year for the past several years we have received notice of premium increases for our health policy , without any serious nor documented explanation for the increases. For an industry that manufactures nothing, nor carries any tangible inventory, the premium increases are inexplicable. One might conclude that the insurer is spending more money on human resources, yet government figures state that there is virtually no wage -price inflation anywhere in the economy. Is it not

reasonable, then, that a regulated industry should have to produce documented proof of justifiable cost increases to warrant such premium increases? If not, then is the regulation real and legitimate?

Margaret Says:

January 5, 2011 at 9:34 PM

This is in behalf of my mother. She is living on a fixed income. Last year when Blue Cross raised her premiums 18% she was concerned. Now she was hit with another big increase and fears she will be unable to afford the premiums. She needs to have something to live on. Please don't let Blue Cross do this to her. Thanks.

Peggy VanMaanen Says:

January 5, 2011 at 9:56 PM

I would strongly encourage the IA Insurance Commissioner to NOT approve Wellmark's request to raise premiums again.

I can't afford another rate increase. When they increased rates 6 months ago I had to raise my deductible in order to afford the premium, which means I'd have to borrow money to pay the deductible. I don't go to the Doctor for every small thing – only when absolutely necessary.

With stagnant wages and the price of gasoline reaching \$3/gallon, many people will end up dropping their insurance, which only hurts Wellmark. Most businesses have to keep their prices competitive to keep their customers. We need to be pushing Congress to pass a law allowing insurance to be purchased across state lines. Wellmark is putting us between a rock and a hard place. We can't afford to not have insurance, we can't afford the premiums, we can't afford to go to a doctor and pay the co-pay because of the high premiums. Someone needs to put a stop to this madness.

Jim Nelson Says:

January 6, 2011 at 12:33 AM

For my first twenty years of working for the state, I paid premiums to Wellmark with virtually no claims. My health was so good that I routinely donated my sick days to fellow employees in need.

From 2004 to 2009 my premium increased by 42% from \$488 monthly to \$695.

It was stated in the Des Moines Register that there was an 18% premium increase last spring. From 2009 to 2010 my premium increased by 50% from \$695 monthly to \$1,050.

It was stated in the Des Moines Register that there was an average of 11% premium increase planned for 2011.

From 2010 to 2011 my premium increased by 15 % from \$1,050 monthly to \$1,213.

It was stated in the Des Moines Register that Insurance Commissioner, Susan Voss and her agency planned to make a decision by late January about Wellmark's latest request for an increase. Is it legal for them to increase the premium withdrawn from my account yesterday without having been granted state approval?

When I retired, I kept Wellmark's best insurance, Program 3 Plus. It would appear that Wellmark is now targeting policy holders like myself.

Joan Thompson Says:

January 6, 2011 at 8:02 AM

I feel this increas is just way out of line. We have had enough increases to make these people rich . Our income does not increase, as you know, Obama has stopped Social Security increases the last 2

years., and yet we are expeted to pay all our bills on what we got. I'll tell you, \$722.00 a mo. don't cut it and if it goes up again, I'll have no choice but to cancell Blue Cross, it's way out of line. Of course that's what Obama wants, then we have to take HIS health insurance whether we llike it or not. He wants to control us and this is one way to help him. Please reconsider this increas for everyone's sake, not just mine. I can't afford anymore increase on anything. Electricity is another chore, all increases, where will it stop. They all get increase, why? Thank You for letting me vent.
Joan Thompson

Julie Vincent Says:

[January 6, 2011 at 9:41 AM](#)

I agree that this increase is unfair. I am not able to attend the teleconference nor travel to Des Moines today, or I would say this to you in person. I do not receive insurance benefits from my employer (am part time) and have already had one unrealistic increase in my Wellmark health insurance premiums. I have a \$2700 deductible and have rarely used my insurance. I participate in the health promotion portion to receive a physical and yearly exams and take care of myself so I stay healthy, but that is a set amount the plan offers and encourages participants to use to STAY HEALTHY and not use the rest of the insurance for disease and diability. I have my policy in case something catastrophic happens to me. I do not think it is fair for people like me to pay higher premiums because other people choose to not take care of themselves, or partake in unhealthy lifestyles and then abuse their health insurance. I think that there needs to be some personal accountability for one's own health and maybe Wellmark needs to look at a fairer way to provide health insurance to people in Iowa.

Brent Mauer Says:

[January 6, 2011 at 11:09 AM](#)

I personally feel that this rate increase needs to justified in layman's terms. I would like to see a private company come in and audit their books. Let's see how much they are bringing in and how much is going out. In regard to outgoing costs; I mean wages and bonuses and lobbying funds down to the golfing fees and all of the entertainment expenses. I have nothing against making a profit but making a killing isn't right just because "they can".

From what I've read, maybe they should cut back on some of their expenses. Hold off on building a new building or make the building more useable instead of just making a statement. I not sure if anyone has told them but the recession isn't over.

I personally am at a point where health insurance is something I don't know how much longer I can afford for me and my family. I have raised my deductibles to the point I don't feel comfortable with having deductibles that high.

I don't side with insurance companies very often, but with the Obama-Care fixed healthcare plan, I feel Obama started at the wrong end of this "run-away animal." In my opinion he needs to address a lot of other problems such as the cost involved with the pharmaceutical industry, hospitals, doctors, equipment manufacturers, and etc. These are what have driven insurance prices through the roof. The only good thing I feel that came out of the plan is that pre-existing conditions can't be excluded from getting insured.

Blue Cross/Blue Shield ... What can you seriously offer to really, truly justify this rate increase?

Margaret S. Bramman Says:

[January 6, 2011 at 1:35 PM](#)

I am commenting about the proposed rate increases as I missed the ICN public hearing today that I was invited to in Elkader IA. I feel as though we are being held hostage by high health care costs and high insurance costs. I am 65, I have medicare and I am on a fixed income. We have not received cost of living increases with Social Security income. People like us cannot afford to keep having rates increased and health care costs increasing. My husband who is a veteran was airlifted to the University of Iowa Hospital last Oct. He had not bought supplemental insurance because he received medical needs through the VA. The bill for the helicopter ride was \$14,000. This is outrageous! Also outrageous are increases of \$90 a month or more for insurance supplements for elderly folks who are on fixed incomes, and on families who are struggling to make a living. Health care cost increases must stop and no one should be forced to go without care. Insurance must be affordable for all. I will keep working toward and asking for a national health care that will work for all.

Margaret S. Bramman Says:

[January 6, 2011 at 1:42 PM](#)

Insurance and medical costs are way too high for most people. The elderly who are on fixed incomes are not able to afford these outrageous increases year after year. We have not received cost of living increases on our Social Security. Medical providers and insurance companies should work together to hold down the costs of services. Middle class families can not afford these high prices and continued increases. Please, as we must live within our means, So should medical providers and insurance company CEO's. Don't deprive us of having good medical care by continuing these increases to the point we can not pay.

Sharon Says:

[January 6, 2011 at 3:47 PM](#)

I realize this rate increase is dealing with individuals but I will throw my 2 cents worth in anyway. I am the office manager for a small business. I feel that Wellmark pretty much has a monopoly in Iowa and therefore will do whatever it wants. For the second straight year we have been presented with 20%+ rate increases. Considering that our claims experience has been good, even better this past year, I find it unacceptable. This is just unacceptable. How are we as employers and as consumers supposed to pay for this? I cannot raise my rates 20% and expect my customers to stay. My employees get a 15% CUT in pay last year and we have not yet brought them back to full pay. It is just crazy. We need a better plan. We need to be able to band together to buy insurance, we need a viable public option, in short the system is broken and needs to be fixed.

Lynelle Diers Says:

[January 6, 2011 at 3:51 PM](#)

I work for a provider for home health services for the consumers with your insurance. I object to the proposed increased rate for the consumers. BC/BS will increase rates, but decrease reimbursement to providers. I work as a county department and the consumer is paying twice for services. Services reimbursed to our agency below the cost of services is subsidized by county tax payers, so therefore the consumer is paying twice for services. BC/BS really needs to look also at the reimbursement for home health providers, because if providers are unable to break even, there will NOT be any access in Iowa for those individuals using BC/BS insurance. Home Health Agencies as of July 1, 2010 were notified of a reduction in reimbursement for services, and that doesn't include the cost to bill numerous times to be reimbursed for services provided. Consumers think the providers are being paid since they pay their premiums, but in reality providers are denied payment even with pre approvals for up to two years. Insurance Companies need to be more accountable towards their consumers.

Carol Baethke Says:

[January 7, 2011 at 5:18 PM](#)

I will make this brief. The premium rate that we are expected to pay is unbelievable. It is not affordable to us and we will be forced to do something drastic. We have carried insurance all our lives and now I don't know what will happen. We are 60, 58, and 20 years of age. Carol Baethke

Brent Mauer Says:

[January 7, 2011 at 5:20 PM](#)

I personally feel that this rate increase needs to be justified in layman's terms. I would like to see a private company come in and audit their books. Let's see how much they are bringing in and how much is going out. In regard to outgoing costs; I mean wages and bonuses and lobbying funds down to the golfing fees and all of the entertainment expenses. I have nothing against making a profit but making a killing isn't right just because "they can".

From what I've read, maybe they should cut back on some of their expenses. Hold off on building a new building or make the building more useable instead of just making a statement. I'm not sure if anyone has told them but the recession isn't over.

I personally am at a point where health insurance is something I don't know how much longer I can afford for me and my family. I have raised my deductibles to the point I don't feel comfortable with having deductibles that high.

I don't side with insurance companies very often, but with the Obama-Care fixed healthcare plan, I feel Obama started at the wrong end of this "run-away animal." In my opinion he needs to address a lot of other problems such as the cost involved with the pharmaceutical industry, hospitals, doctors, equipment manufacturers, and etc. These are what have driven insurance prices through the roof. The only good thing I feel that came out of the plan is that pre-existing conditions can't be excluded from getting insured.

Blue Cross/Blue Shield ... What can you seriously offer to really, truly justify this rate increase?

Brent Mauer
Burlington, IA

Rosalie Chapman Says:

[January 7, 2011 at 5:22 PM](#)

Please Please do not raise my rates. I'm a single person on a limited income.. I have a high deductible just so I can keep my premium lower.. I can not have a higher rate at this time.. Please reconsider this

Rosalie Chapman

Jason Squier Says:

[January 7, 2011 at 5:45 PM](#)

I find it ridiculous that you may approve of Wellmarks 11 percent increase. After an 18 percent increase last year, this is harming too many Iowans. The government can't figure out why people don't buy insurance. Well, this is why! How are we supposed to afford the rest of our bills when the insurance companies are making record profits. Please use some common sense and help IOWANS, not the insurance companies!

Bruce Kalisek Says:

[January 7, 2011 at 5:46 PM](#)

My wife (55) and I (58) have 3 children, 2 married daughters and on their own and one son in his last year in college. He is on a policy with me, and my wife is on a separate policy. Both policies are with Wellmark.

My policy went up 9% April 2009, 20% April 2010 and 15.5% April 2011. My wife's 14.25%, 17.18% and 24.57% respectively. That's 45% and 56% total respectively in just 3 years! Thousands of dollars each year. My question is: where and when does it stop.....or even slow down. It's confusing to all of the public how these costs rise those kinds of percentages every year. These % increases aren't even close to what they tell us in the press. I believe there is much more behind the scenes of all of this than what we see or are told. First of all, they basically have a monopoly in this state; and secondly, they and their competition, Coventry, basically steal away a few customers from each other every year, pound those customers with increases the next year, swapping them back and forth and control our lives. They've been around for many years, and they know exactly what they're doing! All to our expense! For their future? Their concerns are more of where they are investing their money than in the good they need to provide for the common American person. They play games with all of us with their numerous "pools," and categorizing their clients. Does discrimination possibly come into play in some situations? They need to work harder at teaching people better health, not go to the Doctor for every little ache and pain and so on. Their management is paid well. They might also want to show what they do to earn it! A luxurious new office building. To the common person, it all looks like a "big show!" Look at me! Look at us! They have lost their heart in doing what they should, and that is to better inform the public, including being point blank with all who don't take care of themselves properly and reward those that do. They need to work so that the government isn't so involved in controlling every action, every piece of paper handled and so on. That all adds cost. Rates cannot continue to do this or they won't be in business either, because the public won't be able to afford their insurance and the government will take it over. That is not what we want and not the American way!

Pam Damhorst Says:

January 7, 2011 at 5:47 PM

For Commissioner Susan Voss

Something needs to be done about Wellmark and their Senior Blue premium charges. They discriminate due to age. My husband's premiums for Senior Blue is \$165.00 a month..up about \$50 this year(increase began earlier); mine is \$134.00 and up about \$10.00 or so more. We both visit the Dr. about once a year! This should not be allowed! STOP THESE RATE INCREASES

I believe it is unfair practice to charge a larger premium based on AGE, it's discriminatory is it not? Why is this allowed to transpire? Wellmark keeps raising rates year after year even though there are no claims by the policy holders. These rate increases must stop. It's probably not just Wellmark, either. Someone needs to take charge of this problem. Thanks

Marty Turner Says:

January 7, 2011 at 5:49 PM

I wanted to get an email for Susan Voss but this will have to do. I had an out patient visit at Methodist hospital this last year for a throat scope. I paid for the first Dr. to set up the appointment, lab from him, then sent to another Dr. to do the scope, paid for her, and another lab, got a bill for her assistant and another lab because she told me she took a biopsy to have it checked. NEVER got the results just another bill. Methodist charged me to be in the hospital, then in the room, and for the

nurse to take my temp. I had bills coming in for 4 months. I pay for my own insurance, Maybe someone could investigate and figure out why the Dr.s are charging so much to send things to other Dr.s to check when they are there to do the job in the first place. I got a bill because another Dr. walked into the room where they were doing the scope and he charged me for a consultant fee. That isn't right. If there was a little more control maybe my policy wouldn't go up so much. I have had my policy for over 4 years and every year it goes up if I use it or not. That isn't fair. Something needs to be done, maybe if enough of these stories get out someone will listen.

Linda Says:

January 10, 2011 at 10:18 AM

First, thank you for helping arrange the public access sites across the state of Iowa! Several of us attended, and we thought there was good information presented. We were unable to get on when Davenport was called, but we did get good coverage from the QC Times newspaper. Your summaries of what individual policy holders are saying run true for all of our group. Individual policy holders are targeted because we are vulnerable with no bargaining power. At least, there must be a way of pooling this group together. The rate increase weariness has affected lifestyles because being on individual policies means people have lost a job; are self employed; run a small business etc.. Affordability is a serious problem that changes our way of life. If our economy is to be better, cost saving methods need to be shared by everyone including insurance companies. There needs to be more efficiency & transparency to make sure insurance company spending (new building/ more employees) is in balance so as to not cause hardships & medical bankruptcies. I went on early social security to pay my ever increasing premiums. I personally am very health conscious such as eating right & exercising to keep my cholesterol under control. At the same time, I feel punished by my insurance co. for doing the right things. Others with more privileged health plans tend to waste health care money. Please continue with your efforts to make our health care system fair for everyone.

Linda Beard
Davenport, IA

Deb McCleary Says:

January 10, 2011 at 10:19 AM

To whomever will listen:

I am writing in frustration at the Wellmark proposed rate increase for individual health insurance policies. My husband, children and I have had an individual policy with Wellmark since 1998. Last year our monthly premium increased 22% which is higher than the publicized average of 18%. Now Wellmark wants an 11% increase for those who are self-insured. We pay \$752/month which is like having a second mortgage.

I have asthma as does my 16 year old son, both our sons and I have allergies. Both of these conditions are controlled by over-the-counter medicines and allergy drops which Wellmark excludes from their coverage. Wellmark has never paid for any asthma or allergy treatments or medicines for me.

Over the past two years everyone – individuals and corporate America – have had to make sacrifices in spending. I don't see Wellmark making such sacrifices. Their new building was paid with funds outside of premiums, but the day-to-day maintenance and employee costs are paid by premiums. Medical costs probably will rise in the future. There is not one answer. Individuals, medical professionals, and insurance companies must all keep costs to a minimum. Middle class citizens are being kept from financial stability by the monopoly Wellmark holds on individual health insurance

policies. Small businesses are finding it more difficult to operate when health insurance premiums eat away at any hope of making a profit.

I don't understand the problem as well as your department does. I know that we cannot pay any more than we are already paying. I am considering dropping my health insurance policy as soon as my children are self supporting.

Deb McCleary
515-964-4932

Nicole McLuen Says:

January 10, 2011 at 10:20 AM

Complaint: I wish to weigh in on the proposed premium increase by Wellmark. I am a single person working three jobs and have been diagnosed with cancer. I simply cannot afford another rate increase. 30% rate increase in less than one year? It seems outrageous. Am I going to be forced to choose between paying my insurance premium and food? I am responsible enough to have insurance, but if Wellmark is allowed to continue to raise rates, willy nilly, I will be forced to drop my policy and become one of those sad statistics- she was sick and we could've helped her, but she didn't have insurance and now she's bankrupt or worse, dead. Please do not allow this rate hike to go through, Iowans and myself simply cannot afford it.

Dan Says:

January 10, 2011 at 10:21 AM

Ms. Voss,

Two members of my family are on individual policies from Wellmark. Each and every year we are gutted financially by them. I had to to drop Wellmark and go to HIP Iowa in 2007, as having preconditions, it was the only place I could get to insure me. Both my son and wife are still on Wellmark Individual Policies. It seems exactly true what Ms. Linda Beard of Davenport said in the paper today. We are being UNFAIRLY targeted and have been for years by Wellmark, as we do not have the large group bargaining power to fight for us. All we have is you. My family is being forced into working class, from middle class, simply on the basis of obtaining healthcare coverage to protect our lives. These attacks on the productive sector of the middle class must stop! I implore you, to TOTALLY DENY this rate increase. We are not on a sustainable path in Healthcare in Iowa OR in this nation. Please register my vocal opposition to this increase, by speaking out for those of us who have no economic voice to stop it.

Sincerely,

Dan

Daniel K. Cosman

Marilyn Says:

January 10, 2011 at 10:22 AM

PLEASE help us. Another huge hike in insurance premiums is nearly catastrophic. I honestly don't know how much more we can take before we go under. My husband lost his job two years ago. Now, at age 63, he almost certainly will not find another position in his career field. Currently, he is cleaning a few buildings for the property management company I work for. We are living on one-quarter of the income we once had. Our premiums now are a whopping \$605/mo. An additional

increase is more than we can bear. I was at the doctor's office yesterday for my annual physical and was told he had to report my BMI to my insurance company. The only reason they want it is to use it against me for either increasing my premiums or dropping me altogether. When we bought our policy after COBRA ran out, I was told I had a pre-existing condition of cataracts in my eyes and therefore they would not treat my eyes FOR ANY FUTURE CONDITION OR DISEASE! How can they get away with this? Because I have

a cataract, they can deny me treatment for a condition I MIGHT get in the future that is NOT related to a cataract. How is that a pre-existing condition? We pay huge amounts of money each month in premiums and then get nothing in return. Someone has to step up and help us. PLEASE HELP

Lynn Petersen Says:

January 10, 2011 at 10:23 AM

I have just one comment, this is my personal senerio. I lost my job almost one year ago. I am currently on extended unemployment which will run out the later part of Feb., currently one half of my weekly benifit check goes toward my monthly insurance premium. I already carry a high deductible. I'm really feeling like I will have no other options but to drop my current policy and take my chances. Not that I expect anyone to give a rats, but the insuance company never pays 100% of anything that I'm aware of. I just wanted to express my opnion. Lynn Petersen

Susan Buckman Says:

January 10, 2011 at 10:30 AM

My name is Susan K Buckman. I am currently enrolled with Wellmark of Iowa. I joined in Dec of 09 and started coverage in Jan of 10. My rate was \$311 a month, within 2 months I received notice of an increase to \$367. I only go to the doctor a couple times a year and pay for all my own meds. In Nov of 10 I received notice of an increase to \$412 beginning in April. Where will this stop and how far are you going to allow this to increase? My husband is retired and I am self-employed partime as a hairdresser. I am 62 years old and at this rate, I seriously don't know if I can afford this for 3 more years. Please respond.

Barbara Dowd Says:

January 10, 2011 at 10:32 AM

Commenting on the proposed rate increase by Wellmark Blue Cross Blue Shield-I hope you will consider only allowing their increase to 6.1%-the rate of healthcare inflation. I have been on their insurance since July 2008 and to date my policy has all ready had 2 increases not counting this proposed increase. For someone retired whose income did not increase 18% last year or the proposed 11% for this year, it is difficult. Thank you.

Charles and Donna Says:

January 10, 2011 at 10:33 AM

Complaint: We have Been following the Complaints on the web about how Wellmark BC/BS is robbing people. Yes we are some of these people.... Shame on you Wellmark. WE ARE ON RETIREMENT!!! Plus Enron also run off with our retirement money. Our Primary Medical insurance is Medicare then our company I worked for: "Black Hill Energy" (Which has Natural Gas in Iowa and South Dakota) office location Rapid City SD (Which I retired from) after 36 years)Medical was to be in our retiredment package BUT NOW They have raised our Premiums FROM \$466 per month TO \$580. This raise is done once a year by Black Hill Energy for us BUT THIS IS A 25% increase. Another \$114 per Month???? We were notified on 12/17/10 and was to be effective on 1/1/2011. Something is WRONG with this picture when medical is taking a Social Security Check. Wellmark can have a CEO with 2.5 Million Salary, \$250 Million NEW office BLDG. SHAME ON YOU

WELLMARK. We have people that are with the Insurance Division that are suppose to help protect this type of robbery. We have also contacted the South Dakota Commissioner but have had no response. Being we can not be on the steps to protect we are doing this now...Please HELP. THANK YOU for listening.

Pamela McKee Says:

January 10, 2011 at 10:39 AM

I just received another rate increase on wellmark blue cross blue shield private pay for me & my husband. We are in our mid 50's and considered lower middle class for yearly income. I feel we are being forced to drop our coverage now. We are just shy of 1,000.00 in monthly payments now. I can't justify paying so much anymore. Years have gone by & we have used the wellness benefits only. Damn expensive flu vaccines & mammo's if you ask me. They are forcing us to back out, which I realize is not a good answer for all involved, but we have to cover our cost of living, & not worry about if the insurance company can cover their cost of living. I feel they are pricing themselves out of business for all of us in the lower middle class, who are very responsible & pay our bills. We just simply can't afford to keep it, very sad world we live in Pam

Steve Trumblee Says:

January 10, 2011 at 10:40 AM

Dear Ms. Robinson,

I retired 2 years ago as a Deputy Sheriff at age 55. I was forced to keep my employer's group Health Insurance Policy (Wellmark) and pay it out of my own pocket, since I could not find a private insurance carrier that would accept us (not even Wellmark). At the time (April, '08) the premium was \$1265.88 per month for just my wife and I. We are required to buy "Family" insurance even though we have no children. I pay the same premium as a man who has 10 children.

In June of '09 the premium was raised 9.3% to \$1357.05 per month.

In June of '10 it was raised 9.16% to \$1480.97 per month.

I have been informed that this June it will again be raised, this time by 10%.

My premium will then be \$1629.00 per month, or \$19,548.00 per year.

That is more than half of my \$36,500 per year IPERS retirement income.

If someone does not come up with a solution to get these rising premiums under control, I will eventually be among the uninsured, not by choice but by necessity. I am already working part time to help pay the premium, but soon, even that will not be enough.

I think that this might be the ultimate agenda of the Washingtgon Bureaucrats; to make private heath insurance unaffordable so we are all forced into a government run system.

Thank You for your time,

Steve Trumblee

Jennelle White Says:

January 10, 2011 at 2:40 PM

I am against the raise in premium. Please vote no. I hope the Commissioner votes against it. They just revived a large raise this year. I can't afford this right now.

Richard Says:

January 10, 2011 at 4:59 PM

I'm a physician and a client. Many of us struggle to pay for individual plans. I'm praying I can still pay it because I know some people will go without. I didn't say anything last year with the 18% increase. But, now combining the two increases, its too much.

I wanted to share this information with the commissioner.

Kurt Mielke Says:

January 11, 2011 at 9:00 AM

Maybe the rate increase is a good thing...Maybe if the rates get high enough regular folks will come to see single pay-medicare type system for all as a good thing and a for profit based health care system as not so much in their interest. Maybe then when a politician starts talking "reform", the regular folks will demand honest reform that is in their interest and not so much in the interest of those whose only interest is to make money from other people's misfortune.

In short, I'm real disgusted and paying attention. Hope others are too.

Ken hesseltine Says:

January 11, 2011 at 10:20 AM

I am terribly upset with Wellmark's proposed rate increase of 10-11%. They just took a large increase last year and I don't feel this increase again this year is justified in any manner. I was infuriated at the article a while back which featured their new elaborate and unreasonable new downtown Des Moines headquarters. To have their CEO say that it was not funded by rates is stupid; what stump does he think were born under? It was stated that they used company reserves for about 1/2 of the cost; now you tell me where those reserves came from? I am not stupid. If they had not used up so much of their reserves, maybe they would not have to look at such a rate increase. Excuse me, but these people have a license to steal from the public. I am 64 yrs. old and on a fixed income; my wife and I are currently paying approx. \$960 per month for health coverage before this proposed rate increase. I am asking you to do all in your power to deny them any rate increase at all. T

hank you for listening, Ken Hesseltine

William Blair Says:

January 11, 2011 at 1:00 PM

I object to the proposed rate increase for a number of reasons. First my increase will be almost over 40% over the last two years. I have been forced to convert my policy to a catastrophic policy just to control costs. I am self-employed, so this comes at me as business. I am thinking of moving my business out of the state and this is one of the reasons why. Something has to be done to control costs. Thank you.

Lori Says:

January 11, 2011 at 2:28 PM

I am one of the many people that the outrageous Welmark rate hike is going to effect. I can no longer afford to keep my \$2500 deductible, instead I have to go to a \$5400 deductible which of course will not cover anything. If you could please advise me on how to go about finding other legit insurance companies in Iowa that are more liberal in their acceptance policies(Welmark has refused to allow me to switch to a different program that would allow me to keep the \$2500 deductible and be less expensive), I would greatly appreciate it. I have done alot of research on the web, but some of the companies that say they can operate in Iowa (firstpreferredhealthcare.com and

guaranteedhealthinsurance.com) are not on your list of licensed health insurance providers. I prefer that you contact me by email and thank you for your time and help.

Jeanne ToSusanVoss Says:

January 12, 2011 at 11:46 AM

When my Wellmark group health coverage ended, my only option was to enroll in their Blue Transitions plan as I was denied coverage under their more affordable products due to preexisting health issues. I knew this coverage would be higher than other plans but recognized it was vital I have health coverage. Starting January of 2009 my monthly Blue Transitions 2500 policy premium was \$361. Soon after the coverage became effective I was notified of an 11% increase raising my April monthly premium to \$394. Next in February of 2010 I was notified on April 1st my premium would be \$498, which is an increase of 26%. Now I see Wellmark's proposed rate increase for the Blue Transition pool in 2011 will be 15%. I have been an individual policyholder with Wellmark for less than 3 years and will see my premiums increased 52%?

As others have stated, individual health policyholders have no power in the current system. We cannot bargain as a group. There is no competitive health insurance marketplace since Wellmark writes most of the health insurance in Iowa. I am concerned that Wellmark is deliberately pricing 'undesirable' individuals out of the marketplace for their products. I have tried to apply for other Wellmark coverage, like their Alliance Select Silver with deductibles as high as \$5000 and have been denied coverage stating I am unacceptable due to Multiple Medical Conditions.

I have a concern with the future of Wellmarks Blue Transitions health coverage. Last August my insurance agent told me Wellmark had informed him he could no longer offer Blue Transitions to policyholders. I contacted Wellmark to confirm this, they said a business decision had been made to temporarily stop issuing Blue Transition policies. When I again contacted Wellmark this year, I was told as of August 6, 2010 Wellmark had permanently discontinued selling Blue Transitions. Doesn't this decision mean I and the other 2563 policyholders are now stuck in a stagnant Blue Transitions pool with no new policyholders coming into it? Wellmarks refusal to allow me to switch to a different product basically condemns me to a 'dead(end)' pool which Wellmark dabbled in for a couple years, found it to be financially unprofitable than decided to get out of the business. My concern is actuarially, what does being this type of pool likely mean for our future premiums?

Robbie Says:

January 12, 2011 at 12:08 PM

In October of 2007 my monthly premium for my Secure Blue Individual Reform Policy was reduced by law from \$483.90 to \$366.10. In April of 2009 the premium was increased to \$593.60. In November of 2010 I received a notice that in April of this year 2011, my premium would increase another \$67.30 to \$660.90 per month. After the \$175.40 increase in April of 2010 I called to find out if I could increase my deduction. I was told this was not possible.

My current coverage starts with a \$1,000 deductible, then becomes a co-pay wherein I pay 20% and Wellmark pays 80% until I have paid another \$2,000. My out-of-pocket maximum is \$3,000. Mine is an individual policy. The only insurance I have ever had has been with Wellmark. I have had different plans, but I must confess I do not have a clear understanding of the several differences. My current plan was recommended to me by the agent who use to be in Iowa City. I don't think there is an agent at the present time. As I recall my plan is one that Wellmark was required to offer by the State of Iowa. If that is true, then the Blue Cross Corporation probably assumes all so enrolled are undesirables, and given current developments at the Federal level, if the new Health Care Plan is not found in violation of our Constitution, it would be best to eliminate us. The chosen tactic obviously

seems to be to put Wellmark out of reach financially.

I have no health problems as of now, and I have no problems of either a physical or mental nature.

I want to continue to carry health insurance. I would prefer to continue with Wellmark. Actually, unless restrictions to obtaining coverage from out of state corporations are eliminated, Iowans have very few options. I do not believe an 80% increase over the past three years is warranted in terms of actual costs. I have not exceeded my deductible but once in the last several years. That exception was for a burst appendix.

I hope you will reject this latest request for another increase this year. If not, I would appreciate your recommendation as to a feasible alternative that I could investigate. Thank you for any consideration you can give to my case and to other individuals with similar experiences.

Allissa Says:

January 12, 2011 at 12:17 PM

I'm certain there have been many letters that have crossed your desk concerning the Blue Cross/Blue Shield rate increase. Unfortunately, I was not able to attend the public meetings regarding the new 10.8 percent rate hike, so I too am writing.

In 2010, my family policy needed to be changed from reasonable coverage to something I call "Major Medical." We did this in order to afford the premium and coverage from a quality name, BC/BS of Iowa.

My husband was a casualty of the recession. Due to no fault of his own, his job was transferred to the company owner's son. They can't be blamed, as they too were feeling the pinch of the economy.

Nonetheless, our monthly premium was going to increase, and our income and budget simply could not sustain the jump. We consequently chose a "Major Medical" plan. While this is a more affordable monthly premium, I now deeply worry about the chance that my family will require unexpected, serious medical attention. This plan's deductible is \$10,800 for my family. There is no maternity rider, and no possibility to consider this option, unfortunately.

I'll add here that BC/BS's rate hike has made me even more appreciate the support and importance of all types of medical practitioners and healthy lifestyle decisions. It is my choice to stay healthy, but what if I get a bum knee? What would a simple tear in the meniscus mean to me, my family?

If everyone knew the true price of medical care, instead of mistakenly believing that health care visits are only a \$15 co-pay, I would not need to write this letter. A non-well care visit (physicals/vaccinations) at my general practitioner's office is approximately \$100, my dentist \$133, a psychiatrist \$193.60.

I need BC/BS in case of a catastrophe, and that is what insurance is for. But when BC/BS coverage is unaffordable, by definition it no longer has the right to market itself as "insurance".

Thank you for your time.

Sara Trueblood Says:

January 12, 2011 at 12:59 PM

It was barely six months ago that our health insurance was raised almost \$50 a month. Now I hear that BCBS wants to raise the cost again. My husband is self-employed and is barely making ends

meet. We took an independent policy out on him for health insurance when I could no longer pay the \$1200 a month for family health coverage at my employment. My health coverage is paid by my employer and I plan to retire this spring. However, I will have to pay the premium that my agency pays for me now when I retire. It will cost be close to \$8,000 a year for 10 years. I can't believe I have worked 32 years in an agency and now will have to spend \$80,000 to get health care until I reach the age of 65. I will continue to have to work just to pay the health premiums. If the price raises every year – then what????

My husband's BCBS does not even cover the problems he had this year. There is an amendment on his policy for anything regarding joints. He had a knee injury in high school so this is a pre-existing condition???? That was 40 years ago. This past fall, he developed "pseudo gout" in both his knees and BCBS paid 0. He also is on thyroid medication and BCBS refused to pay for any tests or medication related to this condition. In addition, he had high blood pressure so BCBS added a rider onto our policy at a cost of 10% in addition to the premium.

I am just sick that insurance has gotten to this point. The most money my health insurance has ever had to spend on me was for 2 births and foot surgery in 32 years. I am pretty sure they have made money off of me and my family.

It just seems like the healthy people get punished for not using their insurance.

Thank you for your time.

Sincerely,

Sara Trueblood

Kathy Says:

January 18, 2011 at 2:16 PM

In May of 2002 my husband passed away. I was able to continue his health insurance through Cobra for a period of months. Then I had to buy my own health insurance which cost the same for me alone as we had been paying for our family of four.

Since 2002, my premiums have been raised many times, one time the premium was lowered. I have talked with my Farm Bureau agent on several occasions on what I could do to lower my premium cost and he really didn't think I could do anything that would make a substantial difference.

Please listen to the voices of the people of Iowa and do not allow Wellmark to raise our premiums again in 2011.

Jean and Bob Says:

January 18, 2011 at 2:29 PM

We have been following TV publicity concerning the public hearings about the proposed rate increase for Wellmark insurance. For several years we have been concerned —and irritated— because our insurance rates have been so high. We understand that Wellmark is a non-profit company, so it is hard for us to envision why their rates need to be so high when our insurance is only a supplement to Medicare.

Before retirement we had our Wellmark health insurance through the Department of Transportation. After retirement, we chose to continue with that company even though the rates were very high. Last year we left that Retired State of Iowa insurance group and took out Wellmark insurance with the

Farm Bureau at a somewhat lower rate. Bob pays \$215 monthly and Jean pays \$261.80 monthly.

Because we have Medicare, Wellmark actually pays a very small percentage of our medical bills. For example, a September visit to a gynecologist was approved at \$63.80. Medicare paid \$51.04 and Wellmark paid only \$12.76. For a recent mammogram, Medicare paid \$108.14 and Wellmark only paid \$27.03. For our flu vaccine and H1N1 vaccine, Medicare paid the total amount.

IN 2010, JEAN PAID \$3141.60 FOR ANNUAL PREMIUMS TO WELLMARK. YET, WELLMARK ONLY PAID OUT \$523.20 FOR THE DEDUCTIBLE, DOCTOR VISITS AND PHYSICAL THERAPY!!

It is extremely hard to understand how, as a non-profit, Wellmark can pay only about 25% of Medicare's approved amount and still find it necessary to charge such exorbitant premiums. And, now they are requesting an 11% increase!!

Are you able to explain to us why it is necessary for them to have such high premiums and pay such a small amount of each medical bill? Is this a company where the CEO's receive huge salaries and bonuses? Are we paying a larger than necessary premium into a pool to pay for those who do not yet have Medicare? Could there be a different Medicare premium rate for those who continue to be quite healthy?

Thanking you in advance for a reply to all of the above questions.

Ann Strait Says:

January 19, 2011 at 4:18 PM

I would encourage all the individuals who have posted comments to go to the following website. <http://www.iid.state.ia.us> and study the charts that list the rate increases for the past 5 years that have been Proposed and Negotiated by the Insurance Division of Iowa. Major medical premiums have increased on average as follows:

2005 – 13.01%

2006 – 14.11%

2007 – 13.60%

2008 – 13.93%

2009 – 11.46%

2010 – 6.25%

And the Wellmark BC/BS rates are even more outlandish and you should note that they only once received a reduced rate increase than was Proposed Proposed Negotiated

2005 17.51-5.0% 17.5-5.0%

2007 5.59-4.0% 5.59-4.0%

2008 7.61% 7.61%

2009 20.0% 20.0%

14.2-7.62 % 14.2-7.62%

2010 30.86-10.44% 25.0-10.44%

These are the facts that I gleaned from the Iowa Insurance Division website. I also looked up the median income for Iowa families.....

2005 43610.00

2006 44560.00 2.13%

2007 47324.00 5.84%

2008 49007.00 3.4%

2009 48065.00 -1.95%

Those incomes are a far cry from the 6 digit wages paid to the employees of BC/BS. AND The

changes from year to year can't even come close to covering the rate increases gleaned by the insurance companies. It doesn't look good as Wellmark BC/BS has not been denied once in the past five years. The rich get richer by having the poor pay their way!!

JM Becker Says:

[January 19, 2011 at 7:06 PM](#)

Hello

I am writing in regards to the request by Wellmark to increase insurance rates. News reports have reported that Wellmark is seeking the rate increase because of the high cost of healthcare, and the increase in their payments to healthcare providers. This cannot be accurate. On October 1, 2009, Wellmark instituted EAPGs for all Iowa hospitals. EAPGs is a reimbursement system designed by Wellmark to pay for outpatient services at hospitals. Since the implementation of EAPGs hospitals have seen their reimbursement by Wellmark decrease remarkably. I work at a large hospital in Iowa. Our cancer center has seen a decrease of revenue by 20%. In many cases the reimbursement does not even cover the costs of the drugs. It is placing Iowa hospitals, and Iowa patients at risk for receiving healthcare services. Hospitals cannot continue to operate in this manner. I suggest that the Wellmark rate increase be delayed until a review can be conducted to assess how the new EAPG payment system has affected hospital reimbursement. Until the system is corrected to at least budget neutral, no increase should be considered.

jeanne kuhlmann Says:

[January 29, 2011 at 8:29 PM](#)

Something has to be done about the cost of health insurance for Iowans.

Farmers are in one of the most dangerous professions, they need health insurance coverage. But due to the cost they cannot afford the coverage.

Can there possibly be a group insurance for farmers? How about levels within the group for those who have not had to use the insurance. Perhaps reward them with a lower rate. Something definitely needs to be done about the continuous rising cost.

Robbie Says:

[February 16, 2011 at 12:52 PM](#)

I can't believe my health insurance is going to be increased again. It is to the point it takes half my social security check now. What is a person suppose to live on. I have seriously considered dropping the Blue Cross Blue Shield insurance. I think there should be a way that medical insurance for us retired and living on a fixed income be grouped in a medical class of lower premiums since they are on a fixed income.

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