

Public Testimony and Comments Regarding the 2016 Proposed Wellmark, Inc. Rate Increase Report

For Consideration by Commissioner Nick Gerhart, Insurance Division of Iowa

Prepared by Angel N. Robinson, Consumer Advocate, Iowa Insurance Division

July 24, 2015

I. Background

Iowa Code §505.19 sets forth procedures for health insurance rate increase requests exceeding the average annual health spending growth rate published by the Centers of Medicare and Medicaid Services (CMS). The procedures include a requirement that the Consumer Advocate solicit public comments on the proposed rate increase, provide the comments received by the public on the internet, and to present the public testimony and comments received to the Commissioner of Insurance for consideration before a decision is made on the proposed rate increase. The current average annual health spending growth rate is 6%.

The Consumer Advocate Bureau was notified in May of 2015 that the collective companies for Wellmark, Inc. were seeking proposed average rate increases of over 6%. Wellmark, Inc. has requested an average rate increase of 26% for its 30,052 ACA compliant plans. An average rate increase of 21% has been requested for Wellmark, Inc.'s 108,043 grandfathered and transitional covered plans. The proposed rate increase would become effective beginning in January of 2016 if approved. As the amount proposed exceeded the most current average annual health spending growth rate, the Consumer Advocate solicited comments regarding the proposed increase.

II. Public Comments

The Consumer Advocate has received 24 comments and concerns directly from policyholders or members of the public. The notable trends are as follows:

- 100% - Disagree with the Proposed Rate Increase
- 92% - Believe the Rate Increases are Uncontrolled
- 95% - Are Weary of Wellmark's Annual Rate Increases
- 95% - Shared That the Increased Premium Would Not Be Affordable

Generally the comments from Wellmark were very concentrated and consistent. All of the commenters disagreed with the proposed rate increase. In addition to heartfelt stories, many of the commenters noted that with the perpetual rate increases were constantly approved even if the premiums become unaffordable for policyholders. Commenters shared their high premium amounts and noted the step increase that would be suffered for rate increases over 20%. Lastly, some commenters noted that the rate increase amounts should not be as high as Wellmark was not a participating insurance company in the Health Insurance Marketplace and therefore should not be affected by the changes of the Affordable Care Act.

III. Summary

The comments received and posted by today's date have been included in this testimony report as required by the Iowa Code section 505.19(3). However, comments may continue to be received until

the Commissioner makes the final decision on the proposed rate increase. Any additional comments received prior to the Commissioner's decision, but after the presentation of the consumer testimony, will be recorded on the public rate hearing site.

Attachment A: Wellmark, Inc. Proposed Rate Increase Comments

1. *Michael E. Clem II Says:*
[May 12, 2015 at 4:28 PM](#) | [Reply](#)

As a concerned policyholder, I would like to respectfully offer my opinion on the recent media report of a proposed rate increase of an additional 28% requested by Wellmark Blue Cross of Iowa effective next year-2016. I am referring to the plans that are subject to the Affordable Care Act provisions. There was an approved increase last year of 11-14% on these plans. I think that an increase of an additional 28% is excessive and unfair.

The law mandates everyone to have health insurance coverage (with the ACA provisions). There are 80,000 policies that have been “grandfathered in” and exempt from ACA provisions. It doesn’t seem right that these policies are exempt. I read that these policies will be subject to a separate rate request to be filed June 8 of this year. I hope that any rate increase approved will be fair and appropriate for all policies/policyholders. I appreciate your attention in this matter.

Sincerely,

Michael E Clem II
Maquoketa, Iowa

2.  *Christine Hausner Says:*
[May 20, 2015 at 8:05 AM](#) | [Reply](#)

I’m one of the few people that Obamacare has actually helped as I’m self-employed; however, sooner or later, I’m going to have to find a new career because I CAN’T AFFORD EIGHT THOUSAND DOLLARS A YEAR IN AN INSURANCE PREMIUM ALONE (not including deductible, coinsurance, prescriptions). This has got to stop. You MAKE us have health insurance but who can afford it? You want to raise me over \$100 a month...over \$1200 a year not including my already regular increase for age. Something in this country has got to change. You cannot make people do something and then make it so ghastly expensive that they cannot! I cannot even imagine what my premium is going to be when I’m close to retirement. That’s so sad that people WANT to get OLDER so that they can get on MEDICARE. I don’t blame people for paying the penalty for health insurance when they do their taxes and then stiffing the hospitals and making the tax payers pay for it. It’s CHEAPER! Nothing I say will EVER make a difference. You will do WHATEVER YOU WANT because YOU CAN. I’ve written before to oppose rate increases and then I get stiffed anyway. I was so happy going to Wellmark from Coopportunity because I got better coverage and it was less expensive so now you’re going to blame it all on us for having to switch over. It’ll never end. I have two options for healthcare, Wellmark and Coventry, THAT’S IT. So, I’m stuck and that’s exactly why Wellmark and the insurance commission will do whatever they want. I just really would like to know how much the people in charge make. Not like they would ever give up a bonus to keep people from paying out the ass for health insurance!

3.  Julie Coleman Says:
[May 20, 2015 at 1:22 PM](#) | [Reply](#)

They shouldn't vote to increase the rates because the insurance rate is already really expensive. Enough raise is enough!

4.  Joseph Navin Says:
[May 20, 2015 at 2:14 PM](#) | [Reply](#)

They bumped it up 50% and now they want 26% more, are they crazy? That's a 75% increase, maybe they should pay more attention to the hospitals instead of charging all of us poor saps. You can't get any decent rates, Obamacare doesn't work. You aren't going to be able to afford insurance, how can people who don't make good money afford it? People go to the hospital and can't pay for the care that they receive and they just leave and rack up the bills. They make it unaffordable. I make 50K each year and 12K of it goes to insurance, That's just way too much.

5.  Shawn Johnson Says:
[May 20, 2015 at 3:55 PM](#) | [Reply](#)

I work in the health care field, and where I work health insurance is \$700, and my husbands is \$210, How can anyone afford and survive with that hefty cost? That's more than our student loans and house payment combined.

6.  Lori Reeves Says:
[May 21, 2015 at 9:03 AM](#) | [Reply](#)

I received a letter indicating Wellmark was requesting a 28% in its base premium rates. I just had an increase in my Wellmark premium last year with my monthly insurance premium going from \$706 to \$849. I pay for my family's insurance out of pocket. I make too much for any government subsidy toward the premium yet I can barely afford the premium now that it went up this year. I cannot imagine how we will afford it if it goes up again. We have the least expensive plan that has drug coverage that covers insulin as I am diabetic so I cannot afford to go to a less expensive plan and pay outright for insulin at \$300 a vial when I use several vials in a month.

I understand they feel this is necessary to cover increased costs of policy holders but why should they make a nice profit when I can't even pay my premium. They should bare some of the burden of increased health costs not just me. My insurance cost is almost twice my mortgage, I cannot afford for it to continue to go up every year. Cost of living increases are nowhere near 28% so how are we expected to continue to pay these huge increases. I know I will be receiving only a 3% raise in my wages come fall- not 28%.

Walk into Wellmark corporate offices, look at the cost of the building and how much was spent on decorations and then walk into my house and see how little I have and then tell me if its fair that we continue to bare all the cost increase.



7. *Laura Miller Says:*

[May 21, 2015 at 9:09 AM](#) | [Reply](#)

We are already paying \$600 a month and we rarely go to the doctor. We are a small time farmer and my husband trucks on the side. With an increase it will be over \$800 and that would mean we would have to give up groceries. We have enough that we don't have any subsidies either. Everything goes up except for your paycheck, and all they do is keep squeezing and there just isn't any room for insurance anymore.



8. *Barb Raska Says:*

[May 21, 2015 at 10:40 AM](#) | [Reply](#)

I am a 59 year old female that has been laid off since November. I collect unemployment and it take 2 unemployment checks to pay my premium. My husband is on medicare and he has cancer. I have bills that need to be paid that I can't pay. No one will hire me regardless of my associates degree because I am 59 and close to filing for social security. I have sent out a lot of applications and haven't received a phone call. I have maxed out my credit cards just to pay for groceries. They need to look at rural town america and with corn prices the way they are right now, we are gonna see a lot of corn farmers go broke. they need to come to small towns, (the people running for president). WE are struggling here and they don't see it. I have been with Wellmark and if they increase it, I won't be able to sustain it.



9. *Elissa Bundy Says:*

[May 21, 2015 at 1:13 PM](#) | [Reply](#)

What is the new cost going up to? We already pay \$450 a month and no one said anything to me about a rate increase.



o *Elissa Bundy Says:*

[May 21, 2015 at 3:35 PM](#) | [Reply](#)

If our rates do rise will leave Wellmark and try to find a different insurance provider. It isn't worth it to have to pay such a high premium.



10. *Wayne Smith Says:*

[May 21, 2015 at 1:25 PM](#) | [Reply](#)

I've played this game with them every year. It rises up every single year. How do they expect people to make it? It's just a joke to have all these meeting. Maybe everyone will drop this insurance and all the hospitals and doctors will go broke too. There are all different forms of stealing, this is just their form of legal stealing. The head guys of this country shouldn't be making 3 or 4 million dollars a year and we can't survive. Last year I spent \$1200 on health care and now it's climbing to \$800 a month. These companies can't keep doing this either. They better get their thinking caps on or we are going to be in the greatest depression this company has ever seen.

11.  *Lynn Schroth* Says:
[May 21, 2015 at 1:32 PM](#) | [Reply](#)

They raised it \$100 last year and now I'm paying \$800 a month for a single person (myself) coverage. It's a \$3000 deductible for goodness sake. This is ridiculous

12.  *Steve & Ann Stark* Says:
[May 21, 2015 at 2:04 PM](#) | [Reply](#)

I am responding to the notice of Wellmark's proposed 26.5% premium increase on each me and my wife Ann's policies we received today. That is a totally unreasonable request! That doesn't even need any consideration. They have got to have miscalculated something. We compared these policies to the gov't cafeteria plans available and felt they were each similar, and we chose Wellmark because I felt they had better contracts with providers to help keep our costs down on initial high deductible portion of our plans. That tells me that each company's plans were rating our age group similarly, and the odds they both totally missed it should be slim and none. So any increase more than cost of living increases is not warranted. This 26.5 % is totally taking advantage of the public!!!!

13.  *Brian Hoxmeier* Says:
[May 21, 2015 at 2:44 PM](#) | [Reply](#)

I am opposed to anything that increases my premium by that much. I have a baby on the way and I just bought a house. We are a young working family and I don't wan the federal government raising my premium every year.

14.  *Nate Flenker* Says:
[May 22, 2015 at 8:26 AM](#) | [Reply](#)

We already can't afford it the way it is, and I don't know how they expect us to continue to afford it if they raise the price. With the amount I'm paying now, we could afford a Lamborghini. I know I'm not the only one who feels this way.

15.  *Cynthia Witt* Says:
[May 22, 2015 at 9:18 AM](#) | [Reply](#)

I received a Notice of Proposed Base Premium Rate Increase and Public Hearing in the mail today. EVERY YEAR Insurance companies raise their rates and cover less and increase deductibles that need to be met. I work for an employer that does not cover ANY insurance so my monthly premium is all out of pocket which is less in my bank. Yes I could look for another job that would cover the bulk of my health insurance but, I'm finding more and more, employers are covering less and less as well. Plus, I LIKE where I am currently working.

There were two procedures I passed on doing this year, because I knew it would all have to go toward my deductible. One was a sleep study as I have been on sleep meds since probably 2001. I'd like to not have to take them, but I do in fact have trouble sleeping. The other procedure was to correct a deviated septum as well as a CT of my sinuses to see if I did in fact have a sinus infection. I passed on all of it, because I do NOT have the resources to pay that \$3000.00 deductible. As well as pay all of my other bills, and take care of my son's health needs as well.

I will tell you that my son was born in 2000 via C-Section after hours of labor. After that we were in the hospital for 4 days – both of us for recovery. I received our bill from that 4 day stay and labor and delivery, C-Section, etc. We ended up paying \$500.00 I think – actually I think it was less. THAT was when insurance companies were HELPFUL, and COVERED you for things you needed. Now, insurance companies just want your money to line their pockets and run up the costs on what the Doctors should charge, medications, and it becomes a vicious circle. I will not even go back to see my ENT or my Sleep Specialist because I don't want to pay the \$70.00 co-pay.

So, this is my very long way of saying NO I do not want to see Wellmark, Blue Cross and Blue Shield of Iowa raise their premiums unless they decrease deductibles or co-pays. They keep taking money out of our pockets and expect us to stay healthy? That's bullshit.

I'm 47 years old, female, non-smoker – not overweight, biker and in good health, but I have to pay for all the schmucks that by bad luck have poor health or did NOT take care of themselves. NO. I won't do that.

This whole insurance bureaucracy needs to be looked at and revamped because it's ridiculous.

That is what I have to say as I am not able to attend any of the public hearings/forums to voice my opinion as I WORK for a living and am a single mom.

Thank you so much for taking the time to read this and passing it along to those who asked for my input.

16.  *Anonymous* Says:
[May 22, 2015 at 9:33 AM](#) | [Reply](#)

i find it odd that in 2015 they increase it then in 2016 they can increase it to 2016. How can they justify raising these costs for people who don't have jobs that can cover the premium in the first place. I think that 26.5% is excessive and I wonder how much the people who work for Wellmark are anticipating. We own a small farm and we haven't increased our living expenses by 26.5% by any stretch of the imaginations. They must have someone at Wellmark by the neck telling them that if they don't increase then they will lay off a bunch of people. They took away my prescription medicine, so I bought the over the counter stuff and they sent me a letter and took that away too. When will this end? there are just hundreds of examples in which these big names go too far and hurt the public.

17.  *Debbie Schmidt* Says:
[May 22, 2015 at 9:49 AM](#) | [Reply](#)

I am writing to tell you that I am OPPOSED to the proposed rate increase by Wellmark.

There is no affordable healthcare in Iowa. Under the Healthcare.gov, there is no provider of service in Henry County and many other counties in the state. Therefore, Coventry is not an option.

I pay \$478.00 a month for a catastrophic policy with a \$5000 deductible and I am on a fixed income.

A rate increase would only put an additional hardship on myself and others struggling to maintain minimal coverage.

Thank you for considering this input.

18.  *Michael Egbert* Says:
[May 22, 2015 at 10:30 AM](#) | [Reply](#)

I already pay a hefty premium each month for my wife's medical health insurance (\$700+) which reduces our monthly retirement benefits considerably. I was told to expect rate increases yearly but nothing of this shocking magnitude. My meager cost of living increase in Social Security benefit pales in comparison to this proposed rate hike. How are we to survive if this huge increase occurs? We would be forced to make a choice between health care coverage or food and shelter. This increase request is absurd, much too high. Put us down as against it – something considerably closer to COLA would be easier to swallow and absorb.

19.  *Scott Tunnickliff* Says:
[May 22, 2015 at 2:09 PM](#) | [Reply](#)

I very much appreciate the opportunity to provide comment on the proposed 28.7% increase proposed by the indigent folk at Wellmark. I am glad to provide it via email, as doing so in

public might cause me to have a stroke, which would call for care that would cause Wellmark to need another colossal rate increase. I certainly wouldn't want to inconvenience them.

It is difficult for me to determine which is the more galling, the amount of sheer nerve possessed by anyone to seek an increase so out of line with inflation rates and growth of customer income and cost of service, or their attempting to justify it by tacitly vilifying the Affordable Care Act and its impact on their business, which has been to provide more paying customers and fewer emergency treatments.

Wellmark Health Plan of Iowa is the primary market for most of Iowa, particularly since their was no public option extended with the passage of the affordable care act. With its passage, only three providers were presented to potential customers, one of them having gone broke, and the other not serving large portions of Iowa. This lack of competition is aggravated by the fact that, as Iowans age and the population remains flat, it is unlikely they will see other providers coming in to present anything like real competition.

Leave aside the fact that the options provided as a result of the Affordable Care Act allowed for a nominal increase in premiums with a considerable increase in my deductible, and that premiums now cost nearly 20% of our family's income. Asking for a 28.7% in premiums is unconscionable. What is hard pressed to avoid the conclusion that the primary reason for seeking the increase is because it can.

Perhaps their thinking is that such a proposal would be beaten down to a mere 14% or 15% due to public outcry, of fear of competition, whereupon the consumer can brief a sigh of relief and imagine that justice is served. But this consumer does not believe such would constitute justice. Even a reduction of this proposal to half the percentage would still constitute profiteering on a consumer without options.

these views are reflected by the individual and are not those of the organization for whom he works (who also does not pay his premium).

20.  *Loren Menke* Says:
[May 22, 2015 at 2:16 PM](#) | [Reply](#)

I am self-employed. My family had been getting health insurance through my wife's work. I was in need of more help with my job so last year my wife made the switch and came to work with me. This switch meant we would need insurance. In October we enroll with Wellmark for Health, Dental & Vision Insurance starting November 1st. My total payment for a HSA high deductible plan for a 4 person family with no health issues at all is \$870.53 per month. On December 17th I get a letter in the mail saying that my insurance is going up to \$987.12 starting Jan 1st and that I have until December 15th to enroll for new coverage (already tight budget just blown to pieces). Now yesterday in the mail I get notice that Wellmark wants a 26.5% increase! I've been with this company for a little over half a year and this is how they treat the customer. I wonder how my customers would react if I treated them this way! Oh I know how they would react I wouldn't have any customers. This is what I think of the proposed rate increase, I think

it's a complete joke! Guaranteed I will look at every last option before I continue with health insurance through this company.

21.  *Arnold Maynes* Says:
[May 26, 2015 at 10:47 AM](#) | [Reply](#)

Really isn't it time for you people to start telling them to tighten their belts and suck it up . I have had a double digit raise the last four years and they are asking again . Do you not know the word no!

They build new building and claim its not form raises but really they have been over charging us already or they wouldn't have had the money .

22.  *Dale Young* Says:
[May 26, 2015 at 12:37 PM](#) | [Reply](#)

Being one of the current 1.8 million customers of Wellmark, I have the following concerns. In receipt of a letter from Wellmark on 5/20/15 regarding the companies proposed 28.7% rate increase for 2016. According to that letter 22.5% of that increase is a result of three items: 1. Underlying cost & use of health services new technologies & drugs 2. Government Risk Sharing Programs 3. Risk Adjustment Programs. I would like Wellmark to spell out the specific percentage of increase of each of these categories since the total involves the bulk of the increase. The Government Fees section is noted as 1.3% of the total and the Administrative Expenses is 4.9% as outlined in the letter.

It is my understanding out of 1.8 million Iowa customers only 30 thousand, or about 2% of Wellmark customers received this letter. Wellmark has admitted in a recent news article that out of this 30 thousand customers 135 in some manner abused the company by mothers giving birth or a number of hip replacement surgeries were done with the customer then dropping their insurance plan. I am one of those remaining 29,865 customers who didn't, according to Wellmark, abuse their policy. As a matter of fact being 56 years of age and a non alcohol or tobacco user in good health, I along with 29,864 other customers are now expected to cover the .0045 % of the 30 thousand customers who supposedly misused their policy. In the bigger picture, this amounts to only .000075 % of their customers who may have misused their policy. And according to Wellmark this constitutes a 28.7 % increase on 2% of their policy holders, with a number of them who like me, may have never even had a claim. Are you kidding me ?

23.  *Spring Hinman* Says:
[May 27, 2015 at 8:55 AM](#) | [Reply](#)

26.5% is ridiculous. My insurance just for me is going to be over \$500. Their excuses are crap, if they want to increase, 26.5% is not reasonable. They are going to increase it every year without fail, and I don't receive a 26% increase in my paycheck so I don't understand how they can require us to pay for such an expensive insurance.

24.  *Travis Sullivan Says:*
[May 27, 2015 at 9:35 AM](#) | [Reply](#)

It looks like its going to increase our rate another \$100 and we can barely afford what we have now. Why would they raise the rate another 26.5% when they just raised it last year? We can't afford what we already have, how do they expect us to afford an additional \$100 a month?

25.  *Shawn Bartosh Says:*
[May 27, 2015 at 10:23 AM](#) | [Reply](#)

To whom it may concern,

I am a single person paying for health insurance through Blue Cross Blue Shield of Iowa out of my own pocket without the aid of government subsidies. I do not appreciate that they propose to increase the base premium price by over 25% to cover their expenses. The only way I would agree with such a change is if the government subsidy was increased by the same percentage and the highest annual income to receive a subsidy was also increased by the same percentage. Instead of increasing premiums, all health insurance companies including Blue Cross Blue Shield should work with hospitals, pharmaceutical companies, and other suppliers for health related costs to decrease the fees on their end. I have a background in ordering supplies and billing clients in a high tier small animal hospital, so have a good idea of what medical supplies and many common pharmaceutical agents costs that a normal person would not know. Prices for human medical treatments are typically 10-20% more than it is for the same treatment for a dog or cat. One difference between the two medical practices is pet care is market driven, while human medicine is not.

Another issue in regards to health treatment costs is the variance across the United States and even within states. Medical costs should be averaged out, so the same price is paid across the United States.

I disagree with the proposed base premium cost and wish Blue Cross Blue Shield would work with suppliers to reduce medical costs instead.

Thank you

26.  *Mark Myers Says:*
[May 27, 2015 at 1:19 PM](#) | [Reply](#)

I am commenting on the proposed rate changes being suggested from Wellmark.

I have no proof that Wellmark cost of coverage has not increased, in fact, it most likely has. However, a rate increase of 22.5% is a pretty ridiculously high annual increase. I have never been associated with any business or vendor that had a rate increase that even remotely comes close to a that level. That increase for me personally equates to \$762 per year, and I have a high deductible coverage.

I would venture a guess that Wellmark is aware that level of increase is not achievable and is proposing a ridiculously high level knowing they are willing to settle for something much lower. Why not be honest with their customer base to begin with?

Administrative Expenses: Wellmark is proposing a 4.9% increase. For me personally that equates to an additional \$166 per year. There is no possible way it is costing them an added \$166 to handle my account. If their expenses have increased to that level, then I would suggest that Wellmark share some of the burden and look to become better, more efficient, administrators.

In total, the proposed increase of 28.7% increase for me personally equates to \$972 per year. There is absolutely no way an annual rate increase of that magnitude can be justified.

I would suggest Wellmark look at becoming a little more efficient on their end rather than penalizing the consumer for their short comings.

27.  *April Myers* Says:
[May 29, 2015 at 2:07 PM](#) | [Reply](#)

Dear Consumer Advocate Division,

I am writing due to a letter I received in the mail from Wellmark Blue Cross and Blue Shield indicating my insurance rate will increase in 2016.

Because the insurance company did not plan for the affordable care act provisions, now I feel that I am being punished. As a healthy individual that keeps up with my yearly exams, but hardly visits the doctor, I don't understand why my rate should increase to pay for poor planning and budgeting on Wellmark's part. I hardly have any claims, I am healthy, do not smoke, do not use tobacco and drugs, am active and exercise 5-7 days per week, and take care of myself.

My individual health care plan two years ago was \$132/month. Plus dental, around \$150/month. This is ridiculous — I am already paying over \$260/month and with a 28% increase, will be paying over \$300 a month.

I am an independent contractor. My husband works for a small company that does not cover spousal insurance. I feel as though I was responsible in picking a more affordable plan for me (and actually paying for my own healthcare coverage), and using the doctors that Wellmark says I need to use in order to take advantage of the Blue Rewards program. Additionally, I chose a plan with a lower deductible in case something catastrophic were to happen, that my husband and I wouldn't be blasted with medical bills we cannot pay.

I am extremely upset by the AMOUNT of this rate increase. I could see something small, like 2-3% given inflation, etc. but 28%? That is outrageous. I will plan on changing insurance companies if this indeed does go through.

28.  *Jack Burkhalter* Says:
[June 1, 2015 at 12:24 PM](#) | [Reply](#)

if you hear that anything is going up 26.5% that's pretty scary. I'm retired and I wish my income was going up 26.5%. I read the letter and they are forcing people to pay for this insurance that no

one can afford one way or another. I used to work for Wellmark and I did notice an increase about 13% a year. I decided to try Coventry and that went well, I was on Medicaid with them before I switched back to Wellmark, our premium when down significantly to \$2500 but then rose back up to \$5500 after being back with them for several years. The government stuck their nose in here and whether or not we like it, it is still going to raise and our deductible will rise also. They shouldn't even raise it 26.5%, and if they do they should raise our wages too! I don't want to go out and get another job since I taught school for 33 years. I know that Wellmark didn't go into the marketplace, and they were bragging that they weren't going to raise they rates, but here they go again! They built that brand new facility, and i questioned whether or not they need to do that and he assured me that that would be cheaper than any other place would be more expensive. They even have a really nice gym, and I understand that they are trying to keep their employees healthy, but why must we pay for it? Maybe it's time for the insurance companies to cut the salaries of the top echelon people. To cut it in half would still be a hefty salary. I think if we refuse the increase, then Wellmark will have to something to get us out of this mess in the first place. I don't mind helping people who can't afford their own way, but boy there are a lot of people who seem healthy that are still asking us to pay for their food and health care. Doctors charge quite a bit anymore, and maybe they need an insurance break too. I think the insurance commission needs to say no to the insurance companies and tell them to solve their own problems. And maybe charge their employees a hefty gym membership. I hope you don't raise it.

29.  *Anita & T.Jay Larsen Says:*
[June 8, 2015 at 4:26 PM](#) | [Reply](#)

We are writing regarding the proposed rate increase for Wellmark. We DO NOT support this increase, and we respectfully ask you to deny this request.

Rates already increase every year, and we feel a 26.5% increase in one year is simply unacceptable.

We are two healthy middle income adults who both pay our own full healthcare premiums out of our own pockets. Healthcare coverage is already our HIGHEST annual expense. We pay more for health insurance than we do for our home mortgage. It's more than our car payments. It's more than all of our utilities plus our annual groceries combined. If anyone really wants to make an argument for "affordable" healthcare, it should NOT be the most significant expense a household has to pay.

As 30-something healthy young adults, we rarely even visit the doctor for anything other than our annual physical exams. Our insurance premiums do not equal the benefit we receive from having insurance. We don't have an option of going to a plan where we don't have to "share the risk" but our premiums certainly shouldn't go up 26% to bear the risk for others.

Running businesses ourselves, we would completely expect to lose all of our clients if our rates increased 26.5% in one shot. Not only is it unfair, but it's simply not good business sense. I don't have access to Wellmark's fiscal reports, but I'm guessing nobody is in danger of going broke....Whose pockets are we padding and why? We like our Wellmark coverage, but we will be searching elsewhere if this rate increase goes though? Yep.

We respectfully ask you to be on the side of the small businessperson and deny this request.

30.  *Margaret A. Klee* Says:
[June 9, 2015 at 3:17 PM](#) | [Reply](#)

The Des Moines Register reported Wellmark requested no premium increase in 2016 for pre-2013 enrolled individuals, but requested a post-2013 individual enrollee premium increase of 28%. This appears to be “risk manipulation” by Wellmark to rid its risk pool of expensive/high-risk policy holders. The Affordable Care Act (ACA) prohibits insurers from denying insurance to those with pre-existing conditions, and can’t change higher rates based on health status or gender. This seems to be an obvious attempt by Wellmark to side-step the issue of basing their rates on health status by calling it “newer policies” (i.e. those insured after ACA went into effect), and therefore a violation of the Affordable Care Act.

The ACA requires each insurer to have a single pricing pool for all individual and small group insureds. It does not specify any exception based on pre/post ACA purchase dates. Please require all insurers to follow the ACA law of a single pricing pool for all individual and small group insureds. Only allow pricing adjustments based on contractual benefit differences.

Additionally, Wellmark is not participating in the ACA Marketplace although they have over 70% of the Iowa individual market, and the best access to physicians in their program. People want to be able to access a wide variety of physicians in their local area. Wellmark policy holders do not receive any Federal subsidies, however, if they buy a Wellmark policy to get access to those physicians. To receive subsidies the insurer (Wellmark) must offer their policies in the Marketplace. Wellmark’s non-participation in the Marketplace is not good for the Iowa economy, because it leaves on the table millions of dollars in federal subsidies that could be spent in the state. (The average premium subsidy per eligible Iowan is \$3,120 per year. Given 225,000 subsidy eligible people in Iowa, that potential annual value of the subsidies to Iowans is \$702M per year. During the 2014-2015 enrollment period Iowans claimed \$120M of the subsidies leaving \$528M unclaimed in the 2015 coverage year.) Again by avoiding the Marketplace Wellmark avoids accepting customers with higher risk and manipulates the risk pool. This is not in the best interest of Iowa or Iowans.

Also, Wellmark was allowed to hold \$1.3B in reserves by the Insurance Commission (2011 report) partially on the grounds that the company would be selling policies through the health exchange created under the 2010 ACA and they needed a buffer. These reserves should be used to absorb any needed increased to cover new policy holders resulting from the ACA. At that time Wellmark said they would be in the Marketplace in 2015 . This again appears to be duplicity on Wellmark’s part to try to project they are not a bad actor in Iowa’s insurance scene. They continually try to justify their actions to improperly reduce Wellmark’s risk pool while benefiting as the single largest healthcare insurer in the state. Please don’t let their bad behavior be rewarded/

I do applaud the Insurance Commission for successfully encouraging two new insurers to participate in Iowa’s individual insurance market and our exchange.

31.  *Nicole Keller* Says:
[June 9, 2015 at 3:36 PM](#) | [Reply](#)

The Des Moines Register recently reported Wellmark's pre-2013 enrolled individual insureds will not experience a premium increase in 2016, but its post-2013 individual enrollees' premiums will increase by 28%. Wellmark's pricing practice is a blatant strategy to rid its risk pool of high risk insureds. Its risk manipulation is contrary to the intent of the Affordable Care Act.

The ACA requires each insurer to have a single pricing pool for all individual and small group insureds. It does not specify any exception based on pre/post ACA purchase dates. Please require all insurers to follow the ACA law of a single pricing pool for all individual and small group insureds. Only allow pricing adjustments based on contractual benefit differences.

This approach will trigger a chain of good results for Iowans. There will be no more motivation for Iowa insurers to withhold individual products from Iowa's ACA exchange. Their presence on the exchange will attract more quality competitors into Iowa. 225,000 low income working Iowans will have access to \$702M per year in premium subsidies. The end prize in the chain is Iowa will get a shot of \$1.2B in added economic activity every year.

Besides being a major benefit to all Iowans, I fear not enforcing single pool pricing invites a class action lawsuit against the Stat of Iowa. The financial loss to Iowans is an immense carrot, and it would be east to identify and recruit injured parties. I am not threatening one. But it is a factor that should be considered in your decision.

Lastly, I want to thank you for successfully encouraging two new insurers to participate in Iowa's individual insurance market and our exchange. Well done!

32.  *Michael Gilger* Says:
[June 11, 2015 at 11:26 AM](#) | [Reply](#)

Aren't they wealthy enough yet? How many of them need a new Mercedes? My copay is like \$5000, and my insurance payments are \$806 a month. Now Obama gets his campaign money from insurance companies, with his new insurance for everyone plan. We need to let the politicians know, that if they want to be re-elected that they are going to have to do something about this. They can at least try to help before the insurance companies screw us over.

33.  *Daniel Lax* Says:
[June 11, 2015 at 12:16 PM](#) | [Reply](#)

The people I work with are 60 years and older and we are ready to retire, but we can't retire because we cant afford it. What we want is for our local hospitals to establish Direct Connect Healthcare. It will be cheaper and easier on all of us, the hospitals are really hurting for money, and if we can't establish that we'll drop Blue Cross Blue Shield. Just like cable TV is obsolete, our money is obsolete and the hospitals don't get the money we pay, we think it goes toward the

funding of the insurance company's commercials. We want the state to allow us to open an individual account in the hospitals. We've talked to the state's congressman, and they aren't going to do anything for us, and we aren't going to waste any more time. The biggest comment of all is to get the hospitals to take our Direct Connect Plan. This will be a lot cheaper than paying \$600-\$800 a month. They take my whole pension, and there is no way we can continue to afford it.

34.  *Candace Obrecht* Says:
[June 11, 2015 at 1:58 PM](#) | [Reply](#)

I will, more than likely, be dropping my insurance with Wellmark Blue Cross/Blue Shield if rates continually increase. I have a high deductible coverage, I'm a non-smoker and rarely go to the doctor.

35.  *Debra Hammer* Says:
[June 11, 2015 at 4:12 PM](#) | [Reply](#)

I don't agree with it at all, I am self insured. I pay all of my bills and I don't want anyone paying for me. I think it is extremely unfair, I don't even go to the doctor.

36.  *Joseph Goodman* Says:
[June 12, 2015 at 8:21 AM](#) | [Reply](#)

I am self employed and my wife will retire in almost two years, and that's an extra \$200 a month that I've got to come up with. We can't afford that, and where do I, or can I go from here?

37.  *Steve Fortune* Says:
[June 12, 2015 at 10:59 AM](#) | [Reply](#)

I am truly against the increase. We are retired and on a fixed income and i don;t think we can increase insurance with the high cost. I don't think they need all that money and we don't even use it all that often. I don't understand what they will gain from increasing our rates.

38.  *Britani Drexler* Says:
[June 12, 2015 at 11:18 AM](#) | [Reply](#)

Two weeks ago we received a letter from the Iowa Insurance Division claiming that Wellmark Blue Cross and Blue Shield would have to increase their base rate 26.5%. Wellmark Blue Cross and Blue Shield stated in their letter that they have paid out too many claims in 2014. If they raise the insurance the proposed increase will not only create an imbalance but it will also generate hardships on many of their insured. Our family, personally, is one of the few that has

three members that have Crohn's Disease and yet we choose to continue to work and not be on any state assistance.

My daughter has her Master's Degree in teaching and has been a part of two different situations, in which the schools integrated the preschool program into the school districts; the Head Start was forced to shut the centers that my daughter worked for. This has caused her to look for another job. She presently works at a reading job and makes 900 dollars a month with no insurance benefits. My daughter has student loan payments but cannot pay any other bills that she incurs. She presently has to live at home and pays what she can towards her gas for the car, student loans, and her insurance. As her parents, we have to the rest of her monthly policy, which costs \$342.66. If the increase is increased to the magnitude it described in the letter, it will cause us to look hard at state health insurance. The only problem with switching her to state insurance is that we cannot switch her to the state insurance because her Crohn's Disease is too difficult of a case to handle and she needs specialized care from her doctors. Furthermore, most of her medicines are not covered on state insurance. Have you thought if we put all our money toward insurance cost of the base increase, we will have to cut out something else such as food, housing, utilities, and durable goods? What do you expect the other insured to do if the base rate is increased?

There are so many medical things that are not covered by insurance that we have to pay for. We would think that you would be working to get individuals on private insurance rather than state insurance. So many doctors will not take state insurance because of the lack of payment paid to them. If you raise the price like you want, are you expecting us, as parents, to choose which family member gets their medicine?

Last year the cost of living in the economy was 1%. Why should Wellmark Blue Cross and Blue Shield be able to raise their prices by 26.5%? Perhaps they should cut back some of their employees or do more with less like many business have had to cut back in these troubled economic times. My wife has worked in the medical field for 25 years. She realizes what doctors get paid and what the write-off is. Doctors have to see an awful lot of patients to make up the over-head. I went 10 years with-out a cost of living raise maybe Wellmark Blue Cross and Blue Shield should look within.

Yesterday, we received another Letter from Wellmark Blue Cross and Blue Shield explaining to us how the insurance company works and why they need this increase. To this letter, we would say my daughter was not insured in 2014 by that policy last year, so we should not be affected by the massive increase next year that they are referring to.

Thank you so much for adding our letter to the comments for the increase of our insurance for Wellmark Blue Cross and Blue Shield.

39.  *Mary Christoph* Says:
[June 15, 2015 at 8:06 AM](#) | [Reply](#)

I received the notice in the mail about Blue Cross asking for a 21.7 base increase in premiums. I feel this is excessive. Since I retired as a Registered nurse my premiums have gone up excessively already because of the affordable health care act. (they made me be covered for

child birth and birth control at age 62) With the premium being so high I have a high deductible. I have only had my mammograms and well care visit once a year covered. I have to pay for any other services until I reach my deductible so I don't go to Doctor. If my premiums get much higher I may need to reconsider my health insurance coverage until I reach 65.

I am not sure how they can justify an 21.7 % increase. My social security has not gone up that much. I know the cost of health care has increased due to the affordable health care act but this is above what I think is affordable.

Please consider denying this increase



40. *Linda Eichenberger* Says:

[June 15, 2015 at 8:16 AM](#) | [Reply](#)

In my opinion, this a very large increase to premiums that are already sky high. Right now we ourselves are operating at a \$3500 per person deductible just to be able to have some kind of coverage! There are others I know that are struggling even more. There has to be a better way for insurance companies to help consumers keep decent coverage than double digit increases ever year or two!! I think there needs to be an investigation into exactly where all this money is going. Are executives or agents lining their pockets & living high life. There has to be a stop to it somewhere! Beginning to feel like highway robbery:-((. Hope someone actually reads this!



41. *George Gibbs* Says:

[June 15, 2015 at 8:20 AM](#) | [Reply](#)

My rate have already gone up, and because of the rate increases, I've been forced to go to a high deductible. My healthcare that I've been doing with my doctor has been quite diminished, and if it goes up again, I don't know what I'm going to do. They are going to price me right out of going to the doctor. Our doctor only provides the bare minimum care anymore, and I won't even be able to afford that here soon.



42. *Sharon Iverson* Says:

[June 15, 2015 at 9:10 AM](#) | [Reply](#)

I am against the increase. I live on a fixed income with a disabled adult child. 20% increase in incomes, is something I can't do. I don't get a 20% increase in income, and I will never be able to afford it at this rate. I've been paying for health insurance all my life, and to get to this point its as if all for nothing.



43. *Bill Bartels* Says:

[June 15, 2015 at 9:18 AM](#) | [Reply](#)

How much more can we stand? Another rate increase? When will it end?

Today we received the notice of another proposed increase....

We are basically healthy people, we seldom go to the Doctor except for our annual physicals. Each visit seems to be a constant struggle after we receive the bill due to mis-coded information and wrong amounts paid or denied. We have had to make many phone calls to receive what is supposed to be “included” in our policy coverage. It is a battle to receive the benefits we should receive.

We all hear about the gross misuse of the health care system, the constant abuse of our Doctors time, and the unnecessary trips. For those of us that are trying to make do with what we have, this is upsetting.

Another increase is just another slap in the face.

There needs to be tighter control of those abusing the health care system and penalize them, not the ones who are in control.

I strongly oppose the rate increase! My wife and I will continue to fight for what is “ours” under the terms of our coverage, even though we should not have to!

44.  *Ross Cox* Says:
[June 15, 2015 at 9:23 AM](#) | [Reply](#)

Wellmark is proposing a 21.7% increase in rates, This borders on criminal as inflation is near zero. Their profits need to be examined. They are either totally incompetent in running their business or believe they can blame all this on the fiasco known as obamacare.. Please do not allow this increase. Thank you for your time and consideration.

45.  *William Dean* Says:
[June 15, 2015 at 9:44 AM](#) | [Reply](#)

The change in my policy is going to be just about \$50. I am a single person, with a fixed income, and I am retired. I am already paying \$340. If this increase goes through this is going to put me up around \$400 a month. When I started with it it was already at close to \$300 a month. It seems like an awful lot for what I actually get out of my policy. If the cost continues to go up, I will have to go somewhere else for insurance. I mean I like the insurance, but I just can't continue to afford it.

46.  *Carla Oleson* Says:
[June 15, 2015 at 10:10 AM](#) | [Reply](#)

In some sense we are forced to have this. My husband is actually a public school teacher, so his insurance is paid for. Myself and my seven children are not covered under that policy, so we pay Wellmark out of pocket. We pay \$12,000 a year. What will a 26.5% do to that? We are concerned that we can't afford that, and no I don't think that we can. I took on another job just to

help cover these costs. I just wanted to put that out there, regardless of if it helps. How much more can we possibly take?

47.  *Jon M* Says:
[June 15, 2015 at 10:42 AM](#) | [Reply](#)

I wish to comment on the proposed rate increase from Wellmark. I absolutely can't believe how many times they can do this to the average person! I'm self employed and it seems those of us that can pay keep getting stuck with the bill! Someone need to wake up and get to the real root of the problem before everyone goes broke paying for this AFFORDABLE CARE! That alone is hogwash in my book! Thank you

48.  *Angela Fox* Says:
[June 15, 2015 at 11:10 AM](#) | [Reply](#)

Ever since I retired, I had to get my own insurance, and I chose Wellmark for their quality they provide. Ever since it has gone up and its hard to afford for those on a fixed income. I am totally against it and I don't think its the right thing to do.

49.  *Kevin Martin* Says:
[June 15, 2015 at 11:12 AM](#) | [Reply](#)

I need my insurance because I have a heart valve problem and if they keep jumping the rates, I won't be able to afford it. I would have to drop my insurance to pay for the rest of the bills. I hope that they decide not to increase it. I realize that this probably has to do with Obamacare, but why do they have to increase it so heavily?

50.  *Janet Steinhoff* Says:
[June 15, 2015 at 11:21 AM](#) | [Reply](#)

I oppose the increase in the base premium rate, I think that it is high enough.

51.  *Kevin Hunt* Says:
[June 15, 2015 at 12:00 PM](#) | [Reply](#)

They raise it every year, plus they want to raise it again? I've had this insurance for 3 years now, and I haven't been to the doctor once. This year it was \$2250, and if I don't use it I still get charged. And next year it will be around \$3000 if they raise it. I just don't understand why I have to pay for something that I don't use.

52.  *Jill Toft* Says:
[June 15, 2015 at 12:19 PM](#) | [Reply](#)

My husband and I received notice of a possible rate increase in our Wellmark Blue Cross and Blue Shield health insurance. We would like to provide our comments regarding this matter.

Our question for you: how do you expect people to pay for a health insurance increase? I work as Tourism Director for Clay County, and barely make \$26,000 per year. My health insurance costs almost \$5,000 per year! That is 19% of my salary! Again, I ask: how do you expect people to afford this? We need health insurance because doctor fees are high. We need the coverage for medicine, prescriptions, and more. My health insurance doesn't even provide maternity coverage. When that gets added, it will cost us more per month! But if we don't have the coverage, the hospital bill will be outrageous! We feel like we are in a catch 22.

Why do medical costs keep rising?

We applied for "Obamacare" and found those prices wouldn't save us money. We feel we are stuck! And we get screwed either way!

Thank you for your time. We hope you'll consider the "little man" when making this decision. Normal people can't afford healthcare as it is. If you raise the price, what do you think is going to happen?

53.  *Sheila Shultz* Says:
[June 15, 2015 at 12:22 PM](#) | [Reply](#)

This is to voice my opinion AGAINST a rate increase by Wellmark for the 2016 calendar year. Thank you.

54.  *Peg Brumbaugh* Says:
[June 15, 2015 at 12:28 PM](#) | [Reply](#)

As a BCBS policy holder, I am not in favor of a rate increase. The economic hardships Iowans and Americans face trying to keep affordable health insurance is overwhelming. Every year a policy increase goes into effect, our wages remain stagnant, and cost of living increases across the board. No relief is in sight. As a public servant, school teacher, and tax payer for 45 plus years I am disappointed in our system of health care and a government that allows its'people to continue to struggle and worry.

55.  *Rhonda Olson* Says:
[June 15, 2015 at 12:54 PM](#) | [Reply](#)

First of all...ANOTHER Rate Increase! Seriously.

I am not even sure why I am taking the time to respond to this because it is going to do NOTHING to reduce or control the cost of the continued increases. At most it might make me feel better to just vent but as in the prior years, NOTHING will be done to support and protect

us, the insured, from these ridiculous increases! I seriously wonder how these insurance companies expect the working class to afford to live or even worse...survive! It is to the point where one can either chose to put food on the table for their families OR have health coverage. Tough decision....lol!

Every year these high costs are blamed solely on the use by the insured. I look at the EOB's and shake my head seeing the charges being charged by doctors. Medicines have sky rocketed right along with doctor charges.

We pay and pay and pay....yet when we are in the need of medical help, we are supposed to heal on our own in order to control costs. We have coverage WHY???

My family insurance rates for the year are higher than many families earn in a calendar year. We pay this out of OUR OWN pockets. Not everyone has a cushy job that pays the health coverage. And even those that do have employers helping them out have to struggle as these costs are passed on.

Seriously...ENOUGH IS ENOUGH!!!



56. *Rex J. Campbell* Says:
[June 15, 2015 at 1:15 PM](#) | [Reply](#)

In regards to the public hearing scheduled July 25, 2015 for the proposed base public premium rate increase my answer is no. I live in one of the poorest counties in Iowa. I work as a laborer at low payment rate of years of service with no income raise in over five years from my employers. Economy continues to raise that just keeping basic needs covered is a hardship. I pay my health insurance out of pocket as my employer can't afford group insurance and the government says I have to have health insurance. It is my opinion if the government wants to involve themselves in TELLING the PEOPLE of this nation what they can and cannot do with their hard earn money then they should help the insurance company to defer these increases and not pass the cost unto the customer.

There has to be better alternatives than increase rates and pass that increase unto the public consumer. I would like to see what alternatives the insurance company has tried and propose to try to help keep and reduce cost of health care insurance. All I ever receive is notice of increases where it will be to the point I won't be able to afford decent health care insurance. We are a nation of intelligent and creative people, let's see it in action.



57. *Kurt D. Van Valkenburg* Says:
[June 15, 2015 at 1:26 PM](#) | [Reply](#)

In receipt of "Public Hearing Notice" (Iowa Insurance Commissioner) scheduled for July 25th, 2015 from Wellmark BC/BS of Iowa, I plan to attend this hearing.

Reading the "notice", my attention is directed to a couple of statements in the notice.

1. "The Iowa Insurance Commissioner will deny, approve, or negotiate a lower rate increase. If approved or a lower rate increase is negotiated, the increase would be effective for the period

from Jan. 1, 2016 to Dec. 31, 2016”.

I am not clear whether any comments I am prepared to offer (at the hearing) will have any effective bearing on the decision-making process the Commissioner exercises. The obvious purpose for public comment is to shed light on specific matters with respect to premium rate increases proposed by the insurance company. How does the Commissioner intend to reconcile public comment with the intent of the meeting? On the one hand, my comments are slanted to seek relief from the burden of premium rate increases and the economic burden on our household expenses and the ability to “keep up”.

On the other hand, the notice further states:

2. “The purpose will be to learn if Wellmark followed accepted industry standards to calculate the proposed increase.”

Since Wellmark is a respected and credible company with vast experience in their line of business, of course they follow accepted industry standards, or it is highly likely they did. Here is where I get confused. How does the Commissioner intend to reconcile my comments and goals, which is to provide information based on my personal experience with his or her purpose (to ensure the 2016 proposed rate increase followed accepted industry standards)?

Does providing this “public hearing” forum merely accommodate official protocol? If so, the probable outcome seems likely. That is, the Commissioner will find that Wellmark followed accepted industry standards and that either the full proposed premium rate increase will be accepted or some percentage of it (because health insurance premiums go up every year, health care provider fees, charges, go up every year, and costs go up every year).

The forum, the purpose, and the advocacy of all of us who are impacted by the costs of health insurance has never posed a more serious threat to personal household economic well being. The same goes for corporate and institutional benefit packages and programs.

Rather than follow the same old protocol and function, now seems to be a good time for the Commissioner to take on a much bigger role and expand it’s mission to that of true advocacy.

Without further reach, it seems any effort I make to offer helpful comment and the Commissioners effort to fulfill his/her duties and responsibilities will be nothing more than status quo. With all due respect, I seriously doubt that is where either (any) of us wants to be. I support Commission efforts to dig deeper and provide me with some more in depth background and to reach outside the normal historical lines of functionality so that any thing I offer will have positive impact.

Please advise.



58. *Deb Rusche* Says:

[June 15, 2015 at 1:44 PM](#) | [Reply](#)

Please dont allow a price increase. Our insurance goes up every year and it is getting too out of control. With the big 18.9 percent increase would be over \$2098 increase in our policy for one year. And that is without the age cost increase you add each year besides. And people wonder why some cant afford health insurance... Maybe they could afford it when they first took it out but the increases make it impossible to continue to afford the premiums.

This is for two adults....

2010 \$6172
2011 \$7210
2012 \$8043
2013 \$9285
2014 \$10162
2015 \$11101

2016 \$13099 ???

Come on 2 people with a \$1500 deductible

59.  *Jay & Robin LaVelle* Says:
[June 15, 2015 at 1:51 PM](#) | [Reply](#)

We were told when the Affordable Care Act would be put in place it would stabilize or even decrease health insurance premiums. The government plans are set up so if you qualify for a subsidy it only gets the premium down to approximately what the open market is. This is at least the second if not third time Wellmark has sought a rate increase since Obamacare. It takes 3 weekly paychecks for a middle class person such as me to pay the premium. Where does it end? You can stop these wild increases. I have written Democrat and Republican alike with these concerns and have never received a response. The middle class is slowly sinking into poverty.

60.  *Steve O'Tool* Says:
[June 15, 2015 at 2:55 PM](#) | [Reply](#)

To Whom it may concern ;

I am writing this to express my concern that Wellmark is going to increase my insurance yet once again !! My insurance has had a steady increase twice a year for the past several years ! Obamacare has made me pay nearly double from what I used to pay, and my benefits have decreased ! I raised my deductible to be able to keep my insurance, but the steady increase in premiums is making that more and more difficult ! I am a healthy person and rarely go to the doctor, only for routine physicals annually ! If Wellmark is allowed to keep raising my premiums I may be forced to drop my insurance with them, and maybe all together ! I have never lived off of government subsidies and don't intend to ! So when it comes to the point that I can no longer afford Wellmarks increases (which is now) I will become one of the uninsured that plagues the healthcare system ! It's up to you to reign in this out of control insurance cost ! I pay my own insurance and everything else that I have, and the time has come that I can no longer afford such highway robbery !! If Wellmark is allowed to raise its rates yet again, I will be one of the uninsured that us taxpayers are taking care of ! A 21.7% increase is ridiculous in this economy !!

61.  *Matt Donovan* Says:
[June 15, 2015 at 3:17 PM](#) | [Reply](#)

I don;t have an increase that I want. I don't have a job so I have individual insurance. I don't have an income, but I still get these increases. My health hasn't changed, and I rarely go to the doctor but i still get increases! That's enough, I'm going to get an increase by \$3100. I am very healthy and I am a health nut, I deserve a rebate for not having to use my health insurance. Our health care will soon be the demise of the United States. Look at Canada! I wouldn't be in this mess if I was in Canada. I am about to get on my bike and go ride for 10 miles! I am healthy and I don't deserve this increase.

62.  *Kathleen Gerard* Says:
[June 15, 2015 at 3:32 PM](#) | [Reply](#)

Of course people aren't going to be happy about it. I am a single woman, I am almost 62 years old. If this goes through I am going to be paying a ton more out of pocket. This is supposed to be affordable for people. I already have a large payment of \$2500. Where does this stop? I don't get raises where I work and I don't get a salary or a pay increase. Even if someone was married, its still hard, if you don't have it with your employer then you have to pay for it on your own. This is like a house payment! This probably won't do any good, but I just need to voice my opinion and this is outrageous. I am extremely healthy and I work my butt off to stay healthy, and I what do we get for staying healthy? Nothing.

63.  *Denis Roy* Says:
[June 15, 2015 at 3:41 PM](#) | [Reply](#)

It's hard to believe that Wellmark is asking for an 18.9 % increase. What ever happen to negotiating discounted rates with providers? What about Wellness programs that are supposed to be so effective at controlling cost and utilization? Since Wellmark is supposedly a Mutual Company, owned by its members, I as an owner want to know what are they doing to hold down rates vs just passing on increases to me, an owner? As for administrative costs, let's stop investing in Blue Zones and other fake wellness programs as clearly these multi-million dollar investments aren't doing much to slow down trend! Then we can ask the question of why Wellmark owns two planes for executive use since 80% of their business is in Iowa. Last I checked Iowa isn't all that big and Wellmark has an office in South Dakota to handle their business there. This "just keep raising rates" insanity has got to stop so I ask you to put a stop to this increase.

64.  *donald arnold jr* Says:
[June 15, 2015 at 3:53 PM](#) | [Reply](#)

I retired about three years ago, and my wife and I started off paying \$414 a month, and a couple letters saying that we weren't going to part of Obamacare. And now I am up to \$550 a month. Its kind of a kick in the rear-end when you're promised one rate and now there are saying that they are going to increase those original promised rates. I've only got one more year until I'm on medicare, but my wife still has 4 years. I just wish there was someway that it was easier to understand and afford.

65.  *Donald Arnold Jr.* Says:
[June 15, 2015 at 3:54 PM](#) | [Reply](#)

I retired about three years ago, and my wife and I started off paying \$414 a month, and a couple letters saying that we weren't going to part of Obamacare. And now I am up to \$550 a month. Its kind of a kick in the rear-end when you're promised one rate and now there are saying that they are going to increase those original promised rates. I've only got one more year until I'm on medicare, but my wife still has 4 years. I just wish there was someway that it was easier to understand and afford.

66.  *Linda Schmidt* Says:
[June 15, 2015 at 4:04 PM](#) | [Reply](#)

Once again, Wellmark is proposing an unconscionable rate increase. I am 60 years old, was forced into early retirement, and half my pension goes to pay for my Wellmark individual plan premium...a grandfathered plan. The letter I received says they are requesting a 21.7% increase in premium. I have not been to a doctor in 5 years, stay healthy and exercise regularly. In the meantime, Wellmark has built a fancy new facility in Des Moines, while I live very frugally and rely on the assistance of friends and family to survive. It's time the medical and insurance industry figured out ways to do more with less and actually help others, rather than ballooning costs and passing them on to those of us who can't afford it any more. It's high time that benefits are increased and premiums are decreased instead....so that health care becomes truly affordable in this country.

67.  *Richard Gross* Says:
[June 16, 2015 at 7:37 AM](#) | [Reply](#)

I strongly object to the proposed Wellmark premium rate increase for 2016. The new rate of 21.7% is exorbitant. My first premium for my policy paid in 2011 was in the amount of \$306.70. If this increase is approved, my premium will be just over \$650. That is well over a 100% increase in 5 years. The new rate will consume 1/3 of my social security income. I know that the cost of medical care increases, but I seriously doubt that the cost has increased more than 100% in that same period of time.

When will it stop? I know this process is a technical requirement, but I also know the insurance commissioner basically rubber stamps any "request" made by Wellmark. So as the advocate for those of us who are forced to ante up these automatic, annual double digit increases, I ask that you vigorously represent me and the thousands of other Iowans unfairly impacted by this "process" and oppose the increase. Thank you.

68.  *Marie Viglas* Says:
[June 16, 2015 at 7:41 AM](#) | [Reply](#)

Dear Sir/Madam,

I am writing to express my dissatisfaction and concern on hearing of the proposed premium rate hikes. As a consumer who rarely uses medical care, I am appalled at the proposed rate increases. My rates have already been increased due to no fault of my own and I would be extremely unhappy to see the proposed rates approved.

I already feel like I don't get much for my money.

Thanks for your attention to this matter.

69.  *Kathy Hansen* Says:
[June 16, 2015 at 7:51 AM](#) | [Reply](#)

Hi! I'm 59 years old and my husband is 61 years old. We are both healthy and on no medications and haven't used our insurance for several years. I walk 3-6 miles daily, we take care of ourselves and so why are we to pay more? I don't get it? You should reward the people who don't use their insurance, NOT punish them!

Our world is getting greedy more and more. What would Jesus do? Can you live with yourselves? Money is the root of all evil! The poor guy always takes the hit! Wake up! You will start to lose lots of customers if you go this route always! We plan to do so if this continues!

70.  *Christy Williams* Says:
[June 16, 2015 at 9:17 AM](#) | [Reply](#)

If they go ahead and bump that up that is going to be 3/4 of my paycheck. I already live paycheck to paycheck and I was just diagnosed with breast cancer. This is a big bump, and I just won't be able to afford it. I live alone and there is no one in my family who can help me out. Soon, I will have to choose between paying for food or insurance. I am sending in my comments in hopes that my voice will be heard to end or lower the proposed increase.

71.  *Wilmer Cressler* Says:
[June 16, 2015 at 10:47 AM](#) | [Reply](#)

They have hit us kinda hard with this 21,7% increase. They should have told us about this increase ahead of time. I don't mind a small increase but this is too much. They have really fancy multi-million dollar buildings, and they expect to raise our rates by 20%. I am just a single person, with a very expensive policy that I won't be able to afford if they raise it again. Giving my input might not do a mountain of good, but I just have to give my opinion.

72.  *Karen Crossland* Says:
[June 16, 2015 at 12:50 PM](#) | [Reply](#)

Well my husband and I are self employed and both 62 years old. We are paying around \$1500 a month, and I don't know if we will be able to afford an 18% increase. If we don't have health insurance, then we will be find, but if we can't afford it isn't that unfair? who can change this and what can be done? We don't want to go on government insurance, and we want to pay our own way. I'm just hoping someone is listening and can help the middle class. We have been really fortunate in the way that we haven't had any major surgeries or anything like that. I just hope this comes to an end here soon.

73.  *Jennifer Moley* Says:
[June 16, 2015 at 1:00 PM](#) | [Reply](#)

We are independent business people and we are trying to pay and it's tough trying to pay for it. The rate increase is getting to be too much. Every year they raise it and continuously gouge the little person. Instead of saying every time I get the rate increase, I get mad. We are already paying \$13,000 a year. And we are just tired of paying such a huge amount. Wellmark will make money regardless so they don't need to continuously squeeze everything we've have right out of us,

74.  *Richard Mcnaughton* Says:
[June 16, 2015 at 3:05 PM](#) | [Reply](#)

I don't believe that they need to raise the premiums whatsoever, because they lobbied to have Obamacare please us in the end. Since that is true, they don't need subsidies from the government. My 13th amendment was violated, "Taxation without representation." Who's has the right to these rights? The big company or me? I am denying any rate increase to my policy. It was promised to me that it wouldn't go up. And now I am refusing to use my insurance to pay for the medical care of illegal aliens.

75.  *Mike Jirak* Says:
[June 16, 2015 at 3:29 PM](#) | [Reply](#)

It is unacceptable to be raising costs nearly 19%!!

I have my own business as a contractor and have only 2 full time employees. I cannot raise my prices at the same rate Wellmark raises their prices.

76.  *John Bouchaute* Says:
[June 17, 2015 at 8:03 AM](#) | [Reply](#)

This letter concerns Wellmark Blue Cross Blue Shield's plan to increase their rate by 26.5%, I hope their request is NOT approved. This increase would make the premium for my wife and myself \$1384 per month. That's \$8.65 per hour.

Maybe hospitals should not be allowed to charge such high prices. Maybe drug companies shouldn't be allowed to charge high prices for medicine and supplies. Maybe wealthy people and rich corporations should pay more.

77.  *Bradley Ellison* Says:
[June 17, 2015 at 9:44 AM](#) | [Reply](#)

It seems like they are increasing our rates every year, and not in small increments either, large increments. We own a small farm and we won't be able to keep up with the raise in the increase to 18%. I just thought I would leave my opinion, even if it doesn't do any good. I just want the people at Wellmark to know that I don't support this increase, and we would struggle to afford it if they do choose to increase our rates.

78.  *Dennis Hartig* Says:
[June 17, 2015 at 10:09 AM](#) | [Reply](#)

I realize that health care cost continue to rise and expect that my costs shall rise as well. My concern is the rate in which particularly, Wellmark's rates have escalated.

I have been covered by BC&BS since 2003. In 2012 I moved back to Iowa and transferred my coverage to Wellmark. I am a 55 year old male NS in good health. In fact, the only claims paid by Wellmark in my behalf have been annual wellness exams. In the past three years my premiums for a \$5400 deductible plan have risen from \$128 to \$189 per month. With the proposed increase my monthly premium will be \$244 per month. This represents over a 90% increase in 4 years. This years proposed increase alone(if approved) will be nearly 30% in 1 year! If this trend continues my costs will be over \$12,000.00 per year by the time I turn 65.

The cost of catastrophic health coverage for my wife and myself already represents nearly 10% of our gross annual income and by 2025 it projects to be 40%. By the way, what kind of salary do the executives at Wellmark make and what percentage of their income does their health insurance cost represent? If they are asking their insureds to help cover these rising cost, could they possibly take lower salaries or at least not take increases? Is that fact even considered in this review process?

Bottom Line – Somebody need to get a rein on this thing. Maybe it is Insurance reform? Maybe it is tort reform? Maybe it is fraud enforcement? Maybe it is administrative reform? Maybe all of the above and then some?

Maybe, if you don't allow the insurance carriers the requested increases they will be forced reform themselves!

PLEASE HELP!

79.  *Evie Millbrandt* Says:
[June 17, 2015 at 10:21 AM](#) | [Reply](#)

My job increase was 1.4% and an 18,9% increase insurance hike is ridiculously high. How are we supposed to afford this 18% increase when we only got an 1.4% increase in pay? This is over the top and needs to be stopped. We are a family of four and we can't afford to live without insurance, but on the other hand we can't afford the insurance that we can't live without.

80.  *Kristi Wilson Says:*
[June 17, 2015 at 10:52 AM](#) | [Reply](#)

I hope Wellmark is not allowed to increase their rates. 21.7%!!!! Very few people get raises that can sustain the kind of increases that continue year after year. We have switched to the highest deductible in order to be able to afford the premiums at all and then just have to pray we don't get sick or hurt. So, basically, we are throwing away thousands of dollars each year, because we have coverage, but not really. If something catastrophic happens, hopefully, we would be covered. This has to stop. People can't afford it.

81.  *Tom Hanson Says:*
[June 17, 2015 at 1:33 PM](#) | [Reply](#)

This proposed rate increase is just astronomical. I am a retired man, and I request that it will be scaled back to a smaller amount. This increase hurts, and it will be hard to afford if it goes through.

82.  *Tom & Carmal Allworth Says:*
[June 17, 2015 at 1:49 PM](#) | [Reply](#)

My spouse and I strongly object, to the potential raise in our and all Medical Insurance! It is obvious to all that the cost of living is devastating Americans. Can't our insurance companies at least hold off until we have a new Government President in America. Can't we at least have a ease of adjustments on Seniors. I mean 50 and up to age 60! An ease on long time holders of Blue Cross/Blue Shield!

The constant yearly changes in pricing is unreliable for people to make decisions in their lives. One can not even afford life insurance. When you can not even count on a price freeze period! It is unbelievable that adults can not be stable in their own living environment! We as Americans are now in Food gauging price increases. It will come down to insurance or food!

I would like to see a peoples system, that stands up to the big government outreach. That is bleeding all our pockets! Please stop the constant raises we continually go thru yearly!! Medical Trends, are showing no medical cures! Why raise? Is this in regard to our computer age we live in? Or the new do it yourself visits taking hold in medical visits!

I have noticed many medical office's putting more responsibility on the patient. For example: Did you do the blood test at home? Or a take home do it your self stool test packet! Now why am I paying for an office visit, and doing the test at home myself! Why did I need that office bill for that? It use to be one sample right in the office with instant results. I liken it to self serve gas, do it yourself. The only difference is I am not paying the gas station just to drive into their work area. So if do it yourself medical is taking hold, why is insurance raising??

I hear in some larger cities, that Blue Cross/ Blue Shield will not be allowed at major Hospitals. Such as Mercy in Iowa City, do to new ownership. What is that about?? That many head doctors have left Mercy to go to the University Hospital in Iowa City. Will we all be paying outrageous prices for insurance that is not even accepted? Please, Stop the raising of prices!!

83.  *Greg Beck* Says:
[June 17, 2015 at 2:56 PM](#) | [Reply](#)

I don't think they'll ever get 21.7%, from the increase, and they expect me to pay for their administrative expenses? Why do I have to Pay so that their employees can have better insurance then I have? I just wanted to voice my opinion regarding this proposed increase. People need to know that we aren't excepting this.

84.  *Cynthia Jewell* Says:
[June 17, 2015 at 3:09 PM](#) | [Reply](#)

I trust this email be forwarded to the insurance commissioner.

I recently received notification from the aforementioned company regarding a premium rate increase of 21.7%. Given that everyone is required under federal regulation to carry medical insurance that meets specific minimums of coverage & that the federal website was so fraught with problems that were insurmountable for many individuals, searching for coverage has been an onerous task, especially for many of us who do not have the income to pay high premiums. As for myself, what I found on the federal website was more expensive for me even after the application of credits, than what I could find from my own search. But now, with this anticipated increase in premium rates, I will have to resort to going without coverage.

I resent any company being able to raise premiums on individual policies based upon activity that has no impact on the individual's claims & cost history. As for myself, I have paid far more in premiums than I have had paid in claims & costs, not just in the last year, but for several years. I would have been more money ahead if I never carried any insurance, but I felt it prudent to not assume that level of risk, not just for myself & my small retirement account, but also not wanting to expose my child's financial welfare to that level of risk.

This maneuvering by insurance companies have to stop. Individuals should never have their premiums adjusted due to the activity of others if their premiums have always exceeded claims & costs. If as an individual, I am striving to use my insurance very prudently & to not create a financial burden on my insurance carrier, the carrier should show me the same respect. I am tired of being financially used as a whipping post. This has got to stop.

85.  *Minda L. Wyant* Says:
[June 17, 2015 at 3:44 PM](#) | [Reply](#)

Last week I received a Notice of Proposed Base Premium Rate Increase from my health insurance carrier, Wellmark, stating their intention to raise the cost of health insurance premiums for its customers. The Notice states that they will be asking for an increase in premiums of 28.7%. I am asking you to consider striking down their proposal, or, at the very least, limit the raises considerably.

The average worker today is lucky to see a wage increase of 2% per year. Some, like myself, are part-time employees (approximately 18.5% of the population) earning minimum wage, and we only see raises of 10-cents or less per hour, if any. Consequently, the average worker seeing a raise of even 10% would lose much of his buying power and be set back financially if these raises were to take effect.

Imagine the impact of your salary being reduced by 10%. A part-time worker earning minimum wage and working 30 hours per week would see a reduction in buying power of \$1,115 per year. This could mean that worker would have to forego some necessities such as medicines, food, rent, etc.

I believe it is unconscionable to think that Wellmark would be given permission to put the average worker in jeopardy like this. Please look into this matter and be a representative of the people and not allow us to be put in such a precarious position. Thank you for your consideration.



86. *Jan & Mary Zach Says:*
[June 17, 2015 at 4:19 PM](#) | [Reply](#)

I believe a request to increase rates by 21.7% is outrageous! The cost for health insurance is too much! To top it off, I can not even go to the hospital of my choice because Blue Cross will not come to an agreement with CHI. A brand new CHI hospital is only 10 minutes from my home, but I have to travel an hour to the next closest hospital that is “in network” . This dispute must get settled. Please start putting the patients first!



87. *Fernandez Alejandro Says:*
[June 17, 2015 at 4:22 PM](#) | [Reply](#)

I received a letter saying that Wellmark wants to increase my policy just want to state that I disagree with the proposal and think the Commissioner should reject it



88. *Pat Kilpatrick Says:*
[June 18, 2015 at 7:51 AM](#) | [Reply](#)

To whom it may concern,
I received a letter regarding the proposed rate increase for Wellmark customers. While I am not opposed to rate increases I do feel that the increases in health care over the last several years have been excessive. When reviewing the rate of inflation and individual salaries compared to

the increase in health insurance premiums there is a very large variance. Since first beginning my coverage through Wellmark in 2012 I have seen the following increases in premium:

2012 – 7%
2013 – 15%
2014 – 6%
2015 – 7%
2016 – 13% (projected)

This represents an overall increase in premium of approximately 58% for this period of time.

I carry a \$2,850 deductible and have never come close to meeting it.

I have also written letters such as this in the past to the commission asking for relief from these excessive increases to no avail. At some point the average citizen needs to be appropriately represented and a stop to these types of increases.

Thanks for your consideration.



89. *Babak Javadi* Says:

[June 18, 2015 at 7:55 AM](#) | [Reply](#)

Dear Consumer Advocate:

I am a policy holder with Wellmark Blue Cross and Blue Shield of Iowa. I am in receipt of a notice of proposed base premium rate increase from Wellmark BCBS, and I would like to formally voice my disapproval of their proposed premium rate increase.

I urge you to deny Wellmark this request, as Wellmark has not provided adequate justification for such a steep increase. Medical may have gone up, but they have done so as we attempt to make corrections to a system that has been broken for decades. After years of taking advantage of the public, insurance companies are seeing a decrease in their profits due to recent corrective measures, and they are attempting to pass on the “cost” of these corrections to the policy holders in an attempt to keep their profit margins the same.

Please do not take lightly the precedent they are attempting to set. The health system exists to serve the interests of the public good, and not the profit interests of the architects of a broken system.



90. *James P. Kesterson* Says:

[June 18, 2015 at 8:00 AM](#) | [Reply](#)

I am not in favor of a Base Premium Rate increase.



91. *Margaret Beidler* Says:

[June 18, 2015 at 8:24 AM](#) | [Reply](#)

My daughter is completely disabled, and I don't know how she will be able to afford an increase. She doesn't receive much money from her disability checks and she is currently in assisted living. She is 50 and I am 80, and I'm doing my best to take care of her, I just wish there was another option for her here.

92.  *Eric Kellar* Says:
[June 18, 2015 at 2:29 PM](#) | [Reply](#)

It makes me sick every time I get one of these notices that rates are increasing. The insurance companies make billions of dollars, yet we have to keep paying more. Unfortunately, I can't do anything about it as the rich get richer and blue collar people get the short end. Such a sad world anymore taking advantage of people and the top end gets it all.

93.  *Dr. James Steer* Says:
[June 18, 2015 at 2:47 PM](#) | [Reply](#)

I oppose the rate increase, and I question why they feel the need to do this? At the same time they want as many healthy people in their pool as possible. I have a very high deductible, and I rarely use it! I've spoke with them before, and they tell me that because I am getting older, they will raise my rates. Now that doesn't make much sense at all.

94.  *Kimberly Fenton* Says:
[June 18, 2015 at 11:39 PM](#) | [Reply](#)

I oppose this rate increase...I pay high prices and barely use it except for preventative care...please listen to the people...we cannot afford an increase!!!!

95.  *Randall Lympus* Says:
[June 19, 2015 at 9:25 AM](#) | [Reply](#)

they raised them a lot last year. And now they are really going to raise them a lot this year. And I don't think that anyone will be able to afford it. So I just want them to know that I don't agree with it, and that I don't think that they have a right to increase our rates again.

96.  *Jeff Dykstra* Says:
[June 19, 2015 at 9:39 AM](#) | [Reply](#)

We already raised our deductible so our premium would be cheaper. There aren't a lot of jobs out there that offer insurance, so most people have to pay for their own. People can't afford it, and our deductible is already \$5000. Obamacare isn't helping anyone. If we are all paying for the insurance of other people, then why are we being punished? We eat healthy so we don't have to

go to the doctor. When are the gonna start making everyone eat healthy so we don't have to pay for them too?

97.  *Anonymous* Says:
[June 19, 2015 at 11:01 AM](#) | [Reply](#)

No, I don't want it to rise.

98.  *Mark & Krista Fischer* Says:
[June 19, 2015 at 1:46 PM](#) | [Reply](#)

Commissioner of Insurance,
We received the letter informing us of Wellmark's proposed 21.7% increase to our medical insurance policy. What is disturbing is that this will continue for the next two years due to Obamacare. Math and statistics do not lie. What the bottom line is: those who can pay will continue to pay for those who cannot.

As working Americans, we continue to take on more financial burden due to cost increases than our paychecks can absorb. We could only dream of receiving a 21.7% raise at work. These cost increases have gotten out of control. When will it end?

Even though the base rate may not be accepted, Wellmark can continue to increase our premium which has been done every year since 2002 when we have had this policy. One way or another, Wellmark will get it's money from us. It is very disappointing to have "good" medical insurance that is barely used but continues to climb in price.

Please carefully consider the proposed rate increase before agreeing to it.

99.  *Mona Bond* Says:
[June 19, 2015 at 1:48 PM](#) | [Reply](#)

RE: Requested Rate Increase – Wellmark Blue Cross and Blue Shield

1. I believe all Americans should have access to health insurance
2. I have no employer to assist in paying my premium
3. My income is limited and diminishing following a change in my employment and my age. I am a part-time employee.
4. There is no federal government assistance available to me on premiums.
5. My current annual costs for a \$2500 deductible policy is approaching \$7000 or over \$575 a month (new proposed rate with increase would be \$630 a month or approximately \$7600.

I was surprised and disappointed that Wellmark would ask for an over 20% increase in the base premium. In my case it will be an additional \$54.62/ month or \$655.44 a year.

Thus far, I have received no qualified explanation as to why the increase must be so dramatic. Medical Trend: Comment: I am not sure that the “general costs” have gone up 19%. There needs to be a much better explanation of how and what costs have increased and are medical providers getting the entire increase?

Government fees & taxes .1%: Comment: I won’t argue this.

Administrative Expenses: 2.6% Comment: I won’t argue this but do think it needs review.

I would offer that a total 10% increase would be more inline in a base price increase to help keep medical insurance affordable to myself and others in my circumstance.

I would strongly encourage the Commissioner to reduce the rate increase request.

100.  *James McPherson* Says:
[June 19, 2015 at 2:03 PM](#) | [Reply](#)

21.7% is pretty steep. I farm and I’m not getting that kind of increase in my crops. It’s costing my wife and I \$850+ a month, and I can’t afford that. 21.7% is just too steep for me.

101.  *Patricia Maffengale* Says:
[June 19, 2015 at 2:14 PM](#) | [Reply](#)

I am opposed to this every year. I am on social security and my social security doesn’t go up. I don’t know how people can afford health care when it goes up every year when our wages don’t. I am opposed to this increase. And they expect me to pay for these supposed “administrative costs?” That’s not okay.

102.  *Barbara Brown* Says:
[June 19, 2015 at 2:48 PM](#) | [Reply](#)

I am a concerned citizen who would like the increases to stop. I am a single person who pays \$1904.54 four times a month, and I pay that out of pocket. I am 62 years old and only a couple years away from medicare. Obamacare has helped me none, and I just want to avoid these increases. i just got a rate increase last December, and here we are again, raising my rates!

103.  *Kristopher Lyons* Says:
[June 19, 2015 at 7:48 PM](#) | [Reply](#)

I vehemently oppose the ridiculous requested rate increase. My policy for my family is going up a proposed 19.8%. and last year it rose around 14%!! Imagine if your electric, water, or gas company kept raising rates like this year after year?!?! I can’t continue to keep up with these increases when I don’t get pay raises equivalent to the requested hike or even remotely close in comparison :(This is not sustainable and will eventually cause irreparable harm to the consumer

and the moral of the people. Expect a lot of crazy law suits, demonstrations, and god knows what else if this keeps up.....

The rate of inflation for an increase is tolerable(3%-4%), however. Please reconsider this absurd request as this company has raised it's rates astronomically over the past 5 years as noted by a previous poster above.

Thank you.

104.  *Linda Cook* Says:
[June 22, 2015 at 7:56 AM](#) | [Reply](#)

According to the Economic Policy Institute, a trend of wage stagnation continues in the United States.

Elise Gould writes “Though the labor market has continued to strengthen, it has not tightened nearly enough to absorb the millions of potential workers sidelined by the lack of job opportunities—and not nearly enough to generate real wage growth.” (Feb. 19, 2015, <http://www.epi.org/publication/stagnant-wages-in-2014/>)

In plain language, this means that workers are learning to get by with what they have. Real wages have *declined* in the last few years, according to Gould.

So I ask whether Wellmark Blue Cross and Blue Shield of Iowa can learn to do the same? Instead of a premium hike of nearly 20 percent, can Wellmark Blue Cross and Blue Shield of Iowa learn some cost-cutting procedures like the rest of us wage earners have?

I urge you to be bold, Wellmark. Take a stand for your customers. Be one of the few organizations that doesn't further compromise the already-compromised working class.

Be innovative, Wellmark. Find creative ways to cut costs instead of creating yet another burden for the hard-pressed working Iowan.

Be compassionate, Wellmark. Just because you *can* raise your premium rates doesn't mean you should.

105.  *Michael L. Taylor* Says:
[June 22, 2015 at 8:00 AM](#) | [Reply](#)

I don't believe they should get an 18 % increase. They got a 14% increase less than 2 years ago. Cost of living should be good enough. No wonder people can't afford insurance. When I was working I never got more than a 7% raise and that was over 3 years. Being retired, my health insurance cost is just about more than I can afford. It's more than my rent—credit card payments—or any other bills I have. If they are allowed to raise the rate, than they should provide better benefits and coverages.

106.  *Carol Wiekamp* Says:
[June 22, 2015 at 8:03 AM](#) | [Reply](#)

Almost 20% increase again this year? Where is this going to stop? Every year insurance pays less of our claims and yet our premiums keep on rising making our 'out of the pocket' cost another 20+%! Small business cannot afford these skyrocketing cost!

107.  *Jill Birks* Says:
[June 22, 2015 at 8:07 AM](#) | [Reply](#)

I am very concerned with the 18% proposed increase in premiums for Wellmark. For my family of 5, I am already paying \$761. An 18% increase would raise me \$137 to \$898. This is way out of proportion to my salary in a year, typically 3%. We have used very little of our insurance this year, which is good considering the \$5000 deductible.

This will probably force me to take the less desirable insurance offered by my employer. My husband is employed also but his premiums are even higher. Thank you for considering the effect that this will have on the middle class, who is "insurance poor".

108.  *Ashly Weaver* Says:
[June 22, 2015 at 9:13 AM](#) | [Reply](#)

I already got the bill and it says on here that it won't be affected until January 1st of 2016, and it has already increased. It increased my bill over \$200, and I don't know how they can expect people to afford this. Every time I get a plan with Wellmark it increases in under 6 months, and they keep telling me one thing, and doing something entirely different.

109.  *Debra Jorgensen* Says:
[June 22, 2015 at 9:44 AM](#) | [Reply](#)

I am not in favor of another increase. I am a little old lady and I can't afford another increase, this has just gotten way out of hand.

110.  *Calvin Kinney* Says:
[June 22, 2015 at 1:57 PM](#) | [Reply](#)

When will it end? As a struggling small business owner that is the question. Since 2009 I have had to cut staff, wages and costs that affect other small independent businesses such as mine. Since 09 we have seen health insurance rates raise above and beyond any increase of wages or private profits. Those of us who choose to remain independent of the government health care plan continue to be financially strapped to maintain some type of coverage.

But we continue to witness media outlets talk about "record profits" negligence by both insurance and medical fields. Hospital campuses continue to build, insurance CEO's receive bonuses, benefit packages worth record value, investors flourish...All at the cost of families that have to give up so much for health insurance.

These increases are all in the name of corporate greed. I have no doubt that the CEO's of such companies sleep well at night as they have left their ethics at the door years ago. I believe in private enterprise and no shame in profit, but this is a runaway train that continues to aid our country's growth. The answer isn't in government assistance, it's responsible pricing/profits for the corresponding industries. People who choose to remain independent and see the importance of health insurance to protect their own assets should not be held up by annual increases exceeding 20%.

I am a city councilman for a small community in SW Iowa and this affects our budgets along with other communities and school districts across our nation. Shame on our federal government for showing boating how they will investigate such actions that are taking place. It's no secret that they share the same bed sheets, I'm sure it's amazing how far those profits go towards state and federal election campaign funds.

In closing, I have no choice but to swallow this bitter unfair increase to protect my personal assets.... Tell my employees there will be no wage increases, cut costs to the businesses that we do business with... For what???? Corporate Greed...

111.  *Marian Fink* Says:
[June 22, 2015 at 3:39 PM](#) | [Reply](#)

To the Iowa Insurance Commissioner;

The proposed 18.9% increase to the base premium rates is a staggering increase for the average person and this significant increase should not be allowed.

112.  *Leo Monaghan* Says:
[June 22, 2015 at 3:46 PM](#) | [Reply](#)

The rate seems very hard to budget for.

113.  *Joshua Feuerstein* Says:
[June 22, 2015 at 3:48 PM](#) | [Reply](#)

I am writing you about your request to raise my insurance premiums for ANOTHER year in a series of yearly rate increases. I am a 29 year old male who is healthy, no medical conditions, used my health insurance once for a bad bout of the flu during my years with BC/BS, don't take any medications. I feel that it is ridiculous that you are asking me to pay more money every month for something I never use. I feel your asking of me to increase my rates is unjustified and a way to pad your pockets. If you cannot meet the needs of cost for others who are insured by you then maybe they need to pay more for what they use but not the person who gives you money monthly and rarely asks for a service. I thought Obama's magically ACA was supposed to solve the problems of the uninsured and quiet frankly I am tired of the need to support others who don't feel the need to work hard and take care of themselves. I feel that you constantly

changing the premiums under a contract is unconstitutional and an absurd business plan. Maybe I should just drop my plan with you and take government assistance to meet any health care needs should they arise since that seems to be a better option for you. If my rates increase I will be looking to other insurance carriers who will provide a better service to me (which is essentially nothing) than stay with a criminalizing organization ran by people who are worried about their profit margin such as BC/BS

114.  *Debbie Rothe Says:*
[June 22, 2015 at 4:04 PM](#) | [Reply](#)

I'm writing in regard to the proposed premium rate increase by Wellmark BC/BS. I was stunned bu the size of the increase Wellmark is requesting. Where are policyholders supposed to come up with a 21.7% increase in their budget to pay for this? Does Wellmark think we can just ask our employers for a raise or farmers ask the elevators for a 21.7% increase in grain prices so we can pay these premiums? Policy holders have to live with their budgets, maybe Wellmark should be asked to live within their budget. Ask Wellmark when was the last time they didn't have an increase in premiums. I'm asking you to look out for policy holders and vote no for this purposed increase. Policy holders can't say this is too high and just not buy it. The law is on their side, we have to buy it.

115.  *Connie Kroeger Says:*
[June 22, 2015 at 4:28 PM](#) | [Reply](#)

I am writing this letter concerning the possibility of raising the rats on Blue Cross Blue Shields. Has everyone lost their minds? Sure it is okay for the rich who can afford it. But NOT for the middle class families who struggle from pay check to pay check to make ends meet now. Who gives anyone the right to tell an individual who they can and can not doctor with? Because my husband went to your so-called doctors here in Iowa, he was diagnosed with prostate cancer in 2009. He went to a specialist in Des Moines who wasted so much precious time, nine months in fact. By that time, it had gotten out of his prostate. Luckily, the doctor had enough brains to send him to the very best-Rochester to have the surgery. We have lost so many loved ones because of the doctors here in Iowa. There were all mis-diagnosed or the so-called doctors could never figure out what was wrong until it was too late. I lost my dad at 50 because of negligence. I lost my beautiful Mother from cancer because the doctors wasted too much precious time trying to figure out what was wrong with her. That almost destroyed me. My sister had hip surgery in Des Moines, which was a huge mistake because that so-called doctor screwed up the surgery and wanted to leave her a cripple (left in a wheel chair) all of her life. Luckily, she went to Rochester-the best. They were able to fix the doctor's mistake in Des Moines. My husband, Chuck lost his sister at the age of 54 because the doctors in Marshalltown could not figure out what was wrong with her until it was too late. He lost his Mom because the doctors here could not figure out what was wrong with her also. The list goes on and on. We have been paying almost \$10,000 per year out of out own pockets just so my husband can keep going to Rochester. This is just for him, not me also. Where he works, the insurance they offer does not allow him to go to Rochester.

Blue Cross increased their rates last year. How can you think it is okay for them to keep raising the rates? I am sure you go to whomever you want to; why shouldn't we be able to? It is not our fault that other people choose to live their lives destroying their bodies and not taking care of themselves to cause so many health problems that the insurance company feels they need to keep increasing the rates. Isn't this America where you should be allowed to make choices you can afford? It seems we help other countries more than we do our own people. What is wrong with this picture? I for one hope you wake up soon and put a stop to this nonsense. Put a stop to the insurance company increasing their rates continually. We just want to afford to go to Rochester. They are the BEST.

My husband, Chuck, means the world to me and so does my "little angel with 4 legs." I want Chuck to be able to afford to keep going to the very best; and that is to be able to continue to go to Rochester. If you choose to go to these so-called doctors in Iowa, that is your choice. But I don't choose to. That should be our right. If you continue to increase the rate, we won't be able to afford to keep going there if we have to pay out of our pockets. That to me is not fair. You need to stop helping all these lazy people who get unemployment and who are on welfare. Some are capable of working and need to stop taking advantage of the system. Do the right thing and put a stop to the insurance company increasing their rates.

116.  *Sharon Bartlett* Says:
[June 23, 2015 at 8:08 AM](#) | [Reply](#)

I just received notice about Wellmark wanting an increase in insurance premiums. Even if they don't get an "ok" on the increasing the base rate, I am informed that my premium rate may still change.

I am totally against this as I haven't used my insurance except for 3-4 times for chiropractor adjustments per year. I pay \$1,063 every quarter with a \$5,500 deductible. Take 4xs that amount. I feel it's ridiculous already and they raise it each year around your birthday anyway.

I've often wondered if I'm working self-employed 6 days a week, taking care of those that are able living off society free.

I am not for this Base Premium rate increase by 21.7%. I am not for any rate increase.

117.  *James Benzoni* Says:
[June 23, 2015 at 9:36 AM](#) | [Reply](#)

I was just in West Des Moines, and I was looking at the extraordinary expensive buildings that are being put up for the medical industry. Instead of that why don't they help the little men and cut the costs of the medical people? Why doesn't the insurance commissioner shut the gate and cut off all of these expensive projects that Wellmark is undertaking? I was in the elevator at Methodist hospital and the walls were lined with Mahogany! I get that they want to look fancy, but where does it end? I am a private practice lawyer and I can't afford to pay for these outrageous bills and still make a profit. The insurance society is financially obese, this has got to end somewhere.

118.  *Steve Mcpeek & Barbara Beaver Says:*
[June 23, 2015 at 2:13 PM](#) | [Reply](#)

She just went to the doctor and the bill was over \$300. They are saying that because she is outside Iowa, they won't cover anything, not even an office visit. We were misled terribly by the farm bureau. If we were in Arizona, we can't use our insurance in a Wellmark hospital! We can't let them charge us more and cover less. If they are going to charge us 20% more, then they better cover us all over the place. This is ridiculous, and I have never seen an increase come through that would be this devastating.

119.  *Kevin Says:*
[June 23, 2015 at 6:33 PM](#) | [Reply](#)

This rate increase seems rather excessive! If Wellmark is allowed to continue raising rates like this it will make health care unaffordable for everyone who is currently purchasing their plans. Its time the insurance advocate listens to the people....|

Enough is too much!

120.  *Linda Leech Says:*
[June 24, 2015 at 7:53 AM](#) | [Reply](#)

This letter is in regard to Wellmark Health Plan of Iowa applying for permission to increase premium rates for existing individual policy holders in my rating class. It states one reason for this increase is the current Medical Trend.

Last year Wellmark sent me a refund for a little over \$500.00 due to not using my health insurance very much in the previous year, the explanation was that it was part of the Obamacare Affordable Health care plan. Now they want to raise my premiums because of the Medical Trend shows medical care & prescription cost is increasing. That doesn't make much sense, I suppose it's like other insurance companies, they want you to purchase it but not use it, if you do use it then your premiums will increase.

At this time I pay \$352.75 per month for a 70/30 health & prescription plan. This plan only covers me. In addition to my premiums & 30% out of pocket cost are deductibles & copays. My prescriptions are about \$125.00 per month at this time. I do have health issues so yes I'm going to be using my insurance & it's going to continue to cost me a small fortune. As you know a 70/30 plan is really not a great plan, but this is what I can afford as I'm retired & on a fixed income. If the insurance premiums keep going up I'm going to have to forgo my retirement & go back to the working field.

I understand there will be small increases every year, but \$35.87 per month seems to be excessively high. This is a yearly total of \$430.44. It's like making an additional monthly payment. If this amount is approved will they be seeking another similar increase the following year? The question is when do the yearly increases stop?

I have had Wellmark as my Health Insurance carrier for about 3 years now. I do not have any

complaints against them with the exception of the increases in the premiums. They are a local company & have a very good history in this area.

121.  *Rose Goetsch* Says:
[June 24, 2015 at 8:15 AM](#) | [Reply](#)

We don't want to pay more money for services we're not using.

We have chosen to go the homeopathic route. My husband Bill got off his \$400 a month pills for ulcerative colitis by getting bronchitis so bad in January 2007 that he couldn't swallow his pills. A doctor put him on antibiotics and I made him follow up with a probiotic with seven soil-based organisms. Then our son Owen lost his speech at age two from vaccinations. The doctor put him in speech therapy which wasn't working. I heard about a chiropractor that was treating a lot of children with autism. Owen's speech exploded, his lead level went from 6.8 to 3.3 and he no longer had that glassy-eyed look. It was like he woke up. I have also been treated for chronic fatigue by a board certified functional medicine doctor. He put me on a lot of supplements and got me to eat right. I've lost 88 pounds and have lots of energy now.

This has mostly been out of state and out of pocket expense. The insurance wouldn't pay for hardly anything.

122.  *Mrs. Bart Warner* Says:
[June 24, 2015 at 9:27 AM](#) | [Reply](#)

A rate increase! No please! We have had a raise every year since we had this health insurance plan! I believe that another increase is seriously NOT NECESSARY!!

Right now my husband's health insurance is \$268.65 a month-every month!

This is also with over \$5000 deductible!! Really? So you actually think we can afford an increase!??? Well-no. This increase plan is for just my husband! Please reconsider any increase of any kind.

123.  *Teri Petrzalek* Says:
[June 24, 2015 at 11:04 AM](#) | [Reply](#)

I wish to comment on the proposed rate increase.

I am a 54 year old small business owner with another woman. She has insurance thru her husband's employer, so I have an individual policy.

In the 10 years we have owned the business rates have gone up every year.

The article in the Register says Wellmark did not take an increase for 2014, yet my insurance went up 7%.

An article in the Cedar Rapids Gazette recently said Wellmark was not planning an increase for group plans, but would be between 26-29% for individual plans.

The Register article says 5.9% for individual plans.

It is very difficult to get any information that is reliable. My friend received a letter saying her Farm Bureau Group for retirees was going up 18%, yet the Register lists no increases above 14.5%.

I am very concerned that as a single woman trying to make a living in Iowa I pay 10% of my gross income (12% of the net) for health insurance. And I dare say that some people pay much more.

I would encourage the IA Insurance Division to limit the increases for individuals and retirees.

124.  *Arlys Hansen* Says:
[June 24, 2015 at 12:12 PM](#) | [Reply](#)

I am writing to ask that you not allow Blue Cross Blue Shield to raise their rates AGAIN. We have seen too many of these and it is getting very difficult to keep up with them. Those of us who pay for our own insurance without any assistance from an employer are struggling to pay for what we have. The deductibles and out-of-pocket costs are so high we don't even use our insurance unless it is something we can't avoid.

125.  *Connie Adams* Says:
[June 24, 2015 at 1:32 PM](#) | [Reply](#)

I continue to be very frustrated with the insurance rates that we have for my son. Every year I look at increases and every year I am forced to increase his out of pocket and deductibles so that I can keep a monthly rate that is feasible. I have now gone as high as possible on deductibles and out of pockets limits that I can financially afford. I can't afford this much of an increase. I understand rates go up, but 21% is outrageous. My son is a healthy kid. We maybe use his insurance 5 times a year on a bad year. That's it...usually a well check, an eye doctor appointment and occasionally a clinic visit for a chest cold or ear infection. Therefore my \$123 a month I am already paying is barely worth it. Upping his rates that much will hurt us at home. I teach and my husband drives a semi locally. Neither one of us are seeing much increases in pay these days so finding a way to off set this much of a rate increase is going to force us to not pay other bills to afford his insurance.

I ask you to turn down this request. I can NOT afford this much. A small increase I understand, but this much is going to hurt my family even more. Thank you.

126.  *Shane Neely* Says:
[June 24, 2015 at 3:52 PM](#) | [Reply](#)

I think that is outrageous to try to raise it 19%, in one year too. I don't understand how the government would allow that. They don't raise the prices at the hospital, so how can they justify raising our rates? I know that it increases every year but 19% is just ridiculous.

127.  *Adam Fuller* Says:
[June 25, 2015 at 9:44 AM](#) | [Reply](#)

I have had insurance with these guys for ever, like 12 years. And every month, they raise it \$50. My family is pretty healthy, and my kids only use the insurance just for their wellness checks. In the last 12 years I have spent over \$100,000 on just insurance alone, so I am definitely saying no to an 18% increase, that's just astronomical.

128.  *Deb Schwalenberg* Says:
[June 25, 2015 at 10:02 AM](#) | [Reply](#)

Please do not grant Wellmark a rate increase. My insurance costs keep going up as it is, and I rarely utilize my insurance coverage.

Thank you for your time and consideration.

129.  *Brian Rumbaugh* Says:
[June 25, 2015 at 10:09 AM](#) | [Reply](#)

I'd like to weigh in a quick comment about their proposed premium hike. Before Obama started on his healthcare B.S., my wife and I were paying \$3000 annual premiums to Wellmark with minimal out of pocket. Now we are up to \$9000 annual premium with a \$7000 max out of pocket and this pathetic President is still in office! These hikes have just been in the past 5 years maybe and now they want another 25%? Holy crap! I don't know how they can sleep at night. Not meaning to sound paranoid but this has to be designed to further destroy us. Self-employed can't afford this (ask me), small businesses are closing because they can't afford this, driving us all to the government's worthless healthcare plans. Socialism we are here. Please, I beg you, draw a line in the sand and tell them to get stuffed! It's to the point that there is no incentive to strive anymore. Bottom line, the hard working self-employed are getting screwed over by paying for everyone's healthcare and it has to stop. I simply cannot endure much more of this and I know I am not alone. My friends and associates all echo the same hardship. I might add that my wife and I are healthy people. We take no medications, no heart attacks or any such history whatsoever. Just two self-employed people trying to survive.

130.  *Kristen Kokemiller* Says:
[June 25, 2015 at 11:21 AM](#) | [Reply](#)

We just can't keep affording these increases, it's ridiculous.

131.  *Mary Woodford* Says:
[June 25, 2015 at 2:06 PM](#) | [Reply](#)

We recently received a Notice of Proposed Base Premium Rate Increase and Public Hearing (WID: 367AD3010) stating that Wellmark Blue Cross and Blue Shield of Iowa has asked permission to increase its base premium rates by 21.7%. As business owners, my husband and I pay for our own insurance out of our own pockets. We would NEVER consider raising our rates 21.7%, our customers would go somewhere else. Unfortunately, we don't have many options to go "somewhere else" for health insurance as providers are limited.

We chose not to provide health insurance for our full time employees because of these drastic rate increases that health insurance companies are known for. It is sad that our government went through all the work to pass Obamacare, thinking that it would make things better for its citizens, not knowing there would be consequences such as a 21.7% rate increase for them instead. I feel as though, once again, we are being taxed, but this time through the health insurance industry.

Our government is forcing those of us who have paid for our health insurance out of our own pockets to support those who won't/can't pay for their own health insurance.

If health insurance rates continue to climb in such dramatic fashion, it will soon be much more beneficial to simply take the chance and go without.

PLEASE help control our health insurance premium costs! Do not permit health insurance carriers to increase their rates by more than the cost of living each year!!

Thank you for your time and allowing me to comment on this issue.

132.  *David Hudson Says:*
[June 25, 2015 at 2:11 PM](#) | [Reply](#)

I am responding to the notice of proposed premium rate increase submitted by Wellmark. I find it incredible that I am facing yet another rate increase, which is becoming a yearly event. Recent increases were 14% in 2015; 13% in 2013; 9% in 2012; 8% in 2011; and 18% in 2010. I also find it is meaningless to argue against the rate hikes because Iowa's insurance commissioner routinely rubber stamps whatever Wellmark wants. I am an individual policyholder who is self-employed. At some point in the near future, if these rate increases continue, I will not be able to afford any health insurance.

133.  *William & Carol O'Brien Says:*
[June 25, 2015 at 4:00 PM](#) | [Reply](#)

We would like these comments to be included in the Wellmark Blue Cross Blue Shield rate increase public hearing to be held on July 25th/

We have had our insurance through Wellmark Blue Cross Blue Shield for over 8 years. We are private pay clients, and we use a health savings account; therefore, we have always had a deductible in the range of \$5,000.

In 2014 we paid \$7,416.60 in premiums for a family of four. Wellmark paid \$680.60 in medical claims for our family, which were all yearly physicals. We never reached our deductible; therefore, the remaining medical bills, which amounted to \$3676.20, were paid by us personally using our health savings account. So in recap, we paid Wellmark \$7,416.60 and they paid out \$680.60. That's a difference of \$6,736.

This was a very typical year for our family. We have never reached our deductible so Wellmark has never had to pay any bills on our behalf except for a yearly routine physical in the eight plus years we have been insured. In 2015, our annual premium is \$7,923.

When is Wellmark going to recognize that their insureds using Health Savings Accounts and basically paying for their own medical costs need a premium break. Do Health Savings Account holders actually have to have the same percentage increase as other insureds?

We strongly urge you to give consideration and to review Health Savings Accounts. The insureds who have these accounts are taking responsibility and helping to keep medical costs down. This is the exact behavior Wellmark has been advocating for everyone to do. Do not burden these insureds with excessive increased premiums.

134.  *Robert E. Oliver* Says:
[June 25, 2015 at 4:12 PM](#) | [Reply](#)

I have received and read the company's request for increases to its base premium rates. After sustaining many rate increases, an unfavorable rating for my wife's health (which her premium claims is unwarranted) and an underwriting that increased our premiums and required us to reduce coverage in order to keep any health insurance in effect, I can advise you the requested 21.7% increase will almost certainly cause us to lose our insurance coverage.

My wife and I are employed full-time and have had only insignificant increases to our base salary since 2003. For the insurance company to ask for another big increase in premiums in this setting-one shared by many working Iowans-is an expense we are unable to afford. We both work for small businesses with no group insurance plans, and consequently, have been forced to buy insurance as individuals at high, and ever-increasing premiums.

Throughout our working life we have always been able to budget and pay for basic health insurance, but do not expect this to be possible if the rate increase is allowed,

Accordingly, I urge you to NOT allow the company the increase it is seeking.

135.  *Scott Schuster* Says:
[June 26, 2015 at 8:01 AM](#) | [Reply](#)

I do not want my rates increased.

136.  *Cathleen Wignall* Says:
[June 26, 2015 at 10:08 AM](#) | [Reply](#)

I have been notified that Wellmark Blue Cross Blue Shield of Iowa has asked permission to increase its base premium rates by 18.9%. I am a retired person living on a very fixed income and feel this significant increase would put not only me, but many other individuals and families

under a huge financial burden. I would like to publicly plea to the Iowa Insurance Commissioner to deny this increase and to find a way to make healthcare affordable and fair for all Iowans.

137.  *Marilyn Longlee* Says:
[June 26, 2015 at 11:34 AM](#) | [Reply](#)

My husband and I currently pay 1600.00 per month for health insurance. We are 59 and 61. Our health is reasonably good and our office visits are once per year. How much higher can these rates go? We both work and do not get health insurance through an employer. I work in the health care field and see the abuse by people on Iowa wellness, Medicaid and Medicare. It is outrageous! Please reconsider your decision. Thank you!

138.  *Bonnie Larson* Says:
[June 29, 2015 at 9:38 AM](#) | [Reply](#)

I strongly oppose the rate increase.

139.  *Rod Turner* Says:
[June 29, 2015 at 9:53 AM](#) | [Reply](#)

I would like to offer a comment on the form of the factors being expressed for the need for a rate increase. It appears to me that your letter informing us of the factors needed for a rate increase is lacking a factor. Your form has three factors: Medical Trend; Government Fees and Taxes; and Administrative Expenses. The missing factor appears to be an adjustment of the plans based on previous experience of the business in force. For instance, if a company had a block of business that experienced losses in previous years because the rates were insufficient you would want them to include in this calculation an adjustment to the rates to a level that was sufficient before they proceeded to include the factors you list. You would want this to happen so that the company did not continue with a rate that was insufficient and risk going out of business, leaving us policyholders with unpaid claims. An example of this calculation might be something like this:

All numbers are for example only

Expected claims based on the premium charged in the previous year: \$10,000,000

Actual claims in the previous year: \$11,000,000

Adjustment factor to bring the premium for the next year to an appropriate level before including any of the three adjustments on the form: $\$11,000,000/\$10,000,000=1.10$ or a 10% increase

This is a simplistic example and this calculation should be adjusted for the expected loss ratio filed with the policy form. Also, if the numbers were lower instead of higher, then a reduction in the rate calculation would result.

If the amount of business in this block is not actuarially credible, then a number of previous years may need to be combined to have sufficient business to do this calculation.

Once this is done, then your form should be adjusted to include the factor for adjustment for previous year's experience.

This form change would be very helpful to me when determining whether I want to keep my policy in force.

140.  *Jacques Dubois* Says:
[June 29, 2015 at 9:56 AM](#) | [Reply](#)

I received a letter announcing a significant base rate increase proposal from Wellmark BC/BS of Iowa in the amount of 21.7%. As you might imagine, I am appalled at such a suggestion! I certainly understand that insurance is a for profit business, and that rate increases are the norm and not the exception. I find it fatiguing when one entity blames another for cost increases; it is always the consumer that must adapt. I am retired and therefore am on a fixed income. This is my individual policy and only insurance. The premium has increased each year; it is my impression that we have come to expect this and therefore the insurer is not held accountable. Never have I received a salary increase of 21%, and I am guessing this would be the same for most individuals. Please add my name to the list of individuals who are protesting such an enormous premium increase.

141.  *Debbie Moser* Says:
[June 29, 2015 at 10:02 AM](#) | [Reply](#)

How could you possibly think that a 21.7 % rate increase could possibly even be fair to anyone. We the working class have a hard enough time paying for insurances as it is and then you want a rate increase??/ This is totally not OK and not justifiable. I DO NOT KNOW ANYONE THAT EVER GETS A WAGE/ RATE INCREASE FOR THEIR WAGES AND I DO NOT KNOW OR EVER HAVE KNOWN OR EVER WILL KNOW ANYONE THAT EVEN COMES CLOSE TO THIS KIND OF A WAGE / RATE INCREASE. I do not know where these people live that can even now afford their health insurances let alone another huge increase. Unheard of. We must try to do something about these constant rate increases that are so un-affordable . An individual –hard working has all he or she can do to keep up with all the past increases let alone another unbelievable rate increase. We the hard working people should not have to help pay for all those people that get free health insurance, food stamps, etc!!!! Do the insurance companies get that much of an increase each year to help to line their pockets? THE GOVERNMENT CAN AND SHOULD PUT A FREEZE ON THOSE THINGS AS SOON AS POSSIBLE. There are way too many hard working people that are having to pay for others who choose not to even look for work.

These rate increases are not justified by any means—I read the list of the factors that may effect premiums and I do not fall into anyone of those categories — yes I am blessed —but YOU THE GOVERNMENT IS MAKING ME PAY FOR OTHERS. THE GOVERNMENT NEEDS to place a freeze —someone is price gauging for their own benefits. NO RATE INCREASE–IT IS UN-AFFORDABLE!!
We need change!!!!

142.  *Tracy & Rick Niederhuth* Says:
[June 29, 2015 at 2:42 PM](#) | [Reply](#)

This is quite concerning to me as a consumer. My husband and my rates have increased dramatically in the past 3 years. Every year we have to take out a larger deductible, decrease coverage, and still pay more. I dont mind helping out my fellow man, but our wages dont increase at the rate that this insurance does and because we are self employed, we do not receive the benefit of having someone else pay for us. Just in base price alone, combined, my husband and I will be paying 153.37 more each month. This does not include the additional hikes Wellmark will place on the policy itself. My husband and I now pay a combined \$819.74 per month in premiums alone, with \$6000.00 deductible. We rarely go to the doctor only for routine checkups and yearly suggested wellness checks. We choose not to go because we know that it will eventually drive up our costs. I am extremely upset that not only are we forced to pay for everyone else’s health needs, we in turn are FORCED to purchase health insurance. This is a violation of our freedom to choose what is best for our family. Please consider our needs before filling the pockets of the provider with bonuses from their work package. We all know full well it is the salary of those working for the insurance companies that this is benefitting.

On a final note, I feel that this email will go in one ear and out the other. So Thank you for bankrupting your fellow american.

143.  *Rebby Lucas* Says:
[June 29, 2015 at 2:50 PM](#) | [Reply](#)

We received the note today wanting an increase in premiums of over 21%. My wife is self-employed and cannot stand an increase of that size. Many times her net income is below 0 dollars per month. Maybe a 10% or 15% increase might be in order. She has a bare minimum policy. If Blue Cross wants an increase of over 20%, they should increase what they will cover in her policy class.

144.  *Chris Low* Says:
[June 29, 2015 at 3:11 PM](#) | [Reply](#)

We went from \$480 up to almost \$500, and I just pray with all of my heart that you will consider this. Please consider the ways in which this will hurt seniors. My husband and I don’t smoke, we don’t drink and we are healthy. We don’t deserve this increase.

145.  *Ron Pulse* Says:
[June 29, 2015 at 3:18 PM](#) | [Reply](#)

I'm paying \$338.55 per month with a \$5,000 deductible now. The only time I ever used their services was for a physical approximately 20 years ago. How on earth can they raise their rates another approximately \$50.00 per month? Just seems crazy to me.

146.  *Ryan Hall* Says:
[June 30, 2015 at 10:40 AM](#) | [Reply](#)

I like Wellmark, they provide good services, but I just don't think that they can increase our rates and still expect us to be able to pay them. I don't increase my clients' rates, and my salary doesn't increase, so I just don't know if I can swing 21%.

147.  *Ken Schultes* Says:
[June 30, 2015 at 12:04 PM](#) | [Reply](#)

Healthcare providers spend excessive money on advertising and curb appeal in our area. I live in Pocahontas Iowa and there are always 1-2 large highway billboards advertising some hospital, surgeon, or service. I have also noticed extremely nice furniture, fireplaces, grand pianos, and waterfalls in waiting rooms. Not to mention the Wellmark Mansion in Des Moines. I have no idea where the Medicare Payment Center is, maybe that could be a model for Wellmark.

Patients also must be made accountable for some personal decisions they make about their health for example obesity and other risky behavior. I also have been told that with payment based on a successful outcome after a set time period, some institutions spend a lot of money reaching that time, then what you might say: pull the plug.

148.  *Barbara Konigfmark Schultz* Says:
[June 30, 2015 at 2:23 PM](#) | [Reply](#)

That's ridiculous, they charge too much, I am an independent person, and I pay for it all on my own. It's over \$600 a month, and I don't know how they expect people to afford that. I mean, I'm healthy, I rarely go to the doctor, why are my bills so high and climbing?

149.  *Shirley Gieselman* Says:
[July 1, 2015 at 7:56 AM](#) | [Reply](#)

I disagree with the 21.7% for the coming year. I realize my premium will increase each year. But I feel that much of a increase is way out of line!!!!!!
I already pay my share and I never use my Insurance. I'm very thankful I'm very healthy.

150.  *Mark Rensink* Says:
[July 1, 2015 at 8:16 AM](#) | [Reply](#)

It seems like every year we receive a double digit increase. And that has just got to stop. We don't receive more money each year in our salaries, but we do receive an increase in insurance. Something is going to have to be done in order for us to maintain our insurance. I just wanted to leave my comment here, somewhere publicly, so that I can insure that I am being heard.

151.  *Janet Feauto* Says:
[July 1, 2015 at 3:40 PM](#) | [Reply](#)

I am asking you to disallow this rate increase. Wellmark has done absolutely nothing to control their costs. We consumers can not continue to bear this burden.

152.  *Marilyn Romine* Says:
[July 1, 2015 at 4:11 PM](#) | [Reply](#)

I want to lodge my opposition to this; this is my 4th year that I've had this and every year I get a notice that they are raising it. I don't know how much good it will do to comment on this, but I feel better knowing that my opposition to this increase is out where it can be seen.

153.  *Rich Hendricks* Says:
[July 2, 2015 at 7:57 AM](#) | [Reply](#)

I hope that you will, indeed, advocate for us consumers rather than rubber stamping yet another rate hike. Despite trying to research data, I could find nothing indicating that 2014 medical provider health care costs (in general or in Iowa) increased at a rate anywhere near 19%. The general inflation rate is at .8%, which means if Wellmark is not making enough money, they are simply not managing their resources well. NO to any "medical trend" increase.

And then they add insult to injury by proposing a 2.6% increase due to "administrative expenses"??? IF their administrative expenses went up — which I highly doubt despite how they might manipulate their numbers for you — then it's just shame on THEM and they should NOT be rewarded for their inefficiency and we should not have to fund their inefficiency.

Finally, who else but healthcare ever asks a government regulator for an increase like 21.7% and gets it? Much less year after year! They are simply crying because their own bad business practices have priced themselves out of the market.

My church and I absolutely CANNOT pay another increase in premiums on the heels of last year's increase. NO, no and NOOO!

Wellmark should be denied ANY increase in premium rates and any so-called increases in their “costs” should come directly from executive salaries and bonuses. I do not have access to recent information, but back when they started this annual rate hike crap, we read this from the Des Moines Register:

3:34 PM, Apr 15, 2013 | by Lynn Hicks Categories: Biz Buzz, Des Moines Business and Economy John Forsyth and other Wellmark executives received a nice little advance in their pay last year, as the health insurer shielded itself from higher taxes. The CEO received \$2,322,821 in December for short-term and long-term incentive pay, according to a footnote in a filing with the Iowa Insurance Division. That’s on top of the \$2,623,075 in salary, bonuses and other pay he received in 2012 for leading Iowa’s largest health insurer, the filing said. Wellmark executives receive incentive pay for reaching performance goals, such as attracting new members and reducing costs. Forsyth’s bonus increased \$703,678 from last year, a 43 percent bump.

So if they are attracting business and reducing costs, why are they being granted premium hikes? And a \$2.6 million+ salary for a CEO in Iowa? Really? It doesn’t seem to me that they have any shortage of monies coming in that they could and should be using to pay out claims.

I am sure you can look at executive compensation for 2014 and I am sure they has never been a pay cut since those figures were quoted in 2013. Why not? They are bloated at the top and simply milking consumers who can no longer pay for their continuing price increases.

154.  *Stephen Moy* Says:
[July 2, 2015 at 8:26 AM](#) | [Reply](#)

I am writing this e-mail because of my concern about a proposed base premium rate increase of my health insurance. I strongly disagree with this proposal because these premium increase rates are too much to pay for.

The premium increases from Wellmark have increase far above the rate of inflation. I believe that the Iowa Insurance Commission should demand that Wellmark publish its financial statements (balance sheet and income statements) for the past 5 years so that we can I view what their actual profitability has been before any rate increases are permitted. It’s particularly disturbing that Wellmark does not publish its income statements on their website, while they only publish their balance sheet. According to their balance sheet, their assets have increased by 4.045% per year between 2011 and 2014. In contrast, their liabilities have decreased by 2.2 percent per year during that same period. It would seem important for the Iowa Insurance Commission to evaluate the corresponding income during that same period. Based on published financial data, it seems absolutely unbelievable that Wellmark can justify a substantial rate increase.

155.  *Michelle Wenke* Says:
[July 2, 2015 at 3:37 PM](#) | [Reply](#)

I wish to protest any increase in health insurance. Every year they want more money. I don’t go to the doctor for yearly physicals, mammograms, or pap-smears because I can’t afford the co-pay. I am sick to death of hearing all these great things about health care. The ones of us paying

our own insurance are getting the rotten end. We pay for everyone's insurance (including yours) but we get nothing. Put a cap on what people get in malpractice false claims and clean up the system.

I'll be 60 years old this fall and I wish I could drop my insurance because of all the increase and I would be money ahead.

Vote NO to the increases!!! Cut the administrative costs.

156.  *Carol Haberl* Says:
[July 2, 2015 at 3:52 PM](#) | [Reply](#)

Please vote to deny Wellmark Blue Cross Blue Shield increase of the insurance premium. If anything they should be lowered 25%!

I am the only person on my insurance policy. My premiums are \$420.40 a month. With the increase of premium they are asking for, it would increase my premium to \$480.97 a month! These premiums are devastating. I keep raising my deductible to defray the cost of premium increases. My deductible is already at the top deductible. Now how do I fit this increase into my budget? Paying these high premiums has been a hardship to pay. I do my best to live within my means. Do the CEO's live within their means? Do they need another BONUS?

I'll bet if you took a survey and asked the policyholders what they think, you would find they feel the same as I do. The last time I checked, we still live in a Democracy. Doesn't that mean the people are suppose to have a voice?

I am concerned about the high cost of medical care. What is my next step? Obamacare? Please vote to deny the premium increase and yes to a premium decrease! Thank you for your time and the consideration of my opinion.

157.  *Rex & Cathy Maile* Says:
[July 6, 2015 at 7:57 AM](#) | [Reply](#)

I am opposed to the increase on rates. The medical field is the one who needs to decrease their rates, not increase our rates. In order to escape being unable to pay for my medical insurance, I have to choose a coverage that includes a high deductible rate. I end up paying a large premium PLUS all of my medical expenses, as I never reach the \$3000.00 deductible. Something needs to be done to curb the rates the medical field can charge! NOT make the low income people pay more.

158.  *Betsy J. Reinert* Says:
[July 6, 2015 at 11:54 AM](#) | [Reply](#)

I am opposed to any substantial rate increases for my health insurance. Any substantial rate increases could make my insurance coverage un-affordable.

Please do what you can to keep our premiums as low as possible. An 18.9% increase in premiums would be devastating for me.

159.  *Erin Soukup* Says:
[July 6, 2015 at 4:16 PM](#) | [Reply](#)

For the past 4 years, Wellmark has taken a sizeable increase in premiums. Since the “Affordable Care Act” has been put into place, these increases have become out of control. With the restructure of the healthcare system, we as consumers have been FORCED to purchase health care, regardless of our situation. We have been FORCED to pay for services that we neither need nor want, ie. maternity coverage. Since the “ACA” has been put into place I have personally watched my health insurance deductibles increase by THREE times what they were previously. My copays have doubled and my premiums have INCREASED 42.5% in the past FOUR YEARS! This is an outrage! I am a business owner and thoroughly understand that every year costs increase due to inflation and even more so when the government meddles into business matters. If I were to increase my prices by 42.5% I would be out of business. If I were to take that much price increase my competition would be able to beat me on price every single time. Herein lies the problem as well as part of the solution. WHY are we limited to only a select few health insurance companies to choose from in our area? WHY did the government NOT open the market of health insurance providers to allow for national competition? WHY does the government hand feed these insurance giants and fleece the public they are supposed to be helping? WHY does the government continue to monopolize the health care options available to us?

IT IS TIME FOR CHANGE! These yearly requests for premium increases by Wellmark BCBS are out of control. Isn't it bad enough that we are FORCED to purchase health insurance AND FORCED to pay for services we NEITHER need nor want? According to this notice, the medical trend and government risk sharing program claims the Federal Reinsurance Program has helped stabilize the cost of premiums. NO IT HAS NOT. If it had, why would there have been a yearly rate increase of OVER 10% EACH YEAR?!?!?! The percentage increase increases itself each year. 2016 proposed 26.5% increase, up from 2015 17.5% increase, up from 2014 13% increase, up from 2013 I can't even remember, up from 2012 12% increase. When will this stop?

It is time for the government to STOP attempting to put everyone in a cookie cutter program and allow US to choose what coverage we want and need. We are not children who need their hands held to make decisions. If we choose to opt out of certain coverage, we are aware of the “risks” of not carrying said coverage. I was able to drop maternity coverage in 2013 and my rates dropped by more than 25%. Just to turn around and have this “Affordable Healthcare Act” aka Obamacare shoved down my throat and make me have to pay for it again. This is an outrage! Now I'm looking at a proposed 26.5% premium increase on top of paying for coverage I don't want or need?

NO! TELL THEM NO! WE REFUSE TO PAY MORE FOR LESS!

160.  *Dean & Linda Frideres* Says:
[July 7, 2015 at 3:31 PM](#) | [Reply](#)

I recently received another notice of rate increase from Wellmark Blue Cross Blue Shield, stating they are asking to increase my premiums. Each year, Susan Voss allowed every increase that Wellmark has requested in the past for both my own and my husband's premium. However, the actual increases were higher than what Wellmark originally stated they would be. Has the Insurance Commission ever followed up on the actual increases?

In 2014, my husband's premium/deductible was \$10,932 per year, no vision/dental, no medications. This is without consideration of the out of pocket expenses. We fully expect a rate increase for his insurance as well, as has happened every year.

For 2014, I switched health plans within Wellmark to a Health Savings Acct, paying \$7,825 a year in premiums, with a much higher \$3,200 deductible, no vision/dental, for a total of \$11,025 also not including out of pocket expenses. Combined: \$21,957

A 2015 increase of 16% has already brought my premium/deductible to \$11,604, no vision/dental. Not including out of pocket expenses. Now they want to increase it again. In 12 years, our premiums have increased each year.

As self employed farmers, just our premiums and deductibles together take \$22,536 out of our income, if there are no increases. Without receiving "benefits" like those who work for a company/government agency, every penny for health care comes straight out of our own pockets. Why are Wellmark's increased healthcare expenses being borne by mostly self-employed small businesses?

It's difficult to read about the excessive salaries paid to Wellmark executives, while we struggle just to pay health care premiums and out of pocket expenses. This is data from 2012: The CEO received \$2,322,821 in December 2012 for short-term and long-term incentive pay, according to a footnote in a filing with the Iowa Insurance Division. That's on top of the \$2,623,075 in salary, bonuses and other pay he received in 2012 for leading Iowa's largest health insurer, the filing said. Forsyth's bonus increased \$703,678 from last year, a 43 percent bump. The following is from THE AIS REPORT ON BLUE CROSS AND BLUE SHIELD PLANS September 5, 2014, Volume 13, Issue 9

Thirty-two Blues plan CEOs who served that role for part or all of 2013 collectively earned nearly \$25 million in salary and about \$103 million in total compensation, which includes bonuses and incentives.

CEO Joseph Swedish received nearly \$17 million in salary and other perks during his nine months in charge in 2013 (The AIS Report 4/14, p. 1). Swedish replaced Angela Braly, who left the company with more than \$20 million in total compensation in 2012

WellPoint, Inc. Joseph R. Swedish: \$913,461 \$0 \$16,066,466 \$16,979,927

John Cannon¹*: \$810,097 \$0 \$5,667,766 \$6,477,863

1. John Cannon served as interim CEO until March 24, 2013. Joseph Swedish was named CEO, effective March 25, 2013.
2. Swedish's other compensation includes stock awards worth \$7,900,056, option awards worth \$1,600,019 and non-equity incentive plan compensation worth \$2,510,625.
3. Cannon's other compensation includes stock awards worth \$3,900,049, option awards worth \$599,988 and non-equity incentive plan compensation worth \$1,059,580.

Are their salaries commensurate with other CEO salaries? They get a pay increase based on how well someone is doing at another organization, not on what their own company is doing? Which is increasing the premiums, in particular for the self-employed consumers that are bearing the weight of costs. And those salaries are part of those costs.

We are asking the Commission to deny these increases. If that is not possible, at the very least Wellmark should be severely restricted in those percentages.

Please deny these increases for those of us struggling to pay premiums and health care costs.

161.  *Anonymous* Says:
[July 8, 2015 at 8:55 AM](#) | [Reply](#)

This is my response to your rate increase proposal. Honestly, I thought it had to be a joke. My family can barely afford the rates now. We can't afford to go to the doctor, and we don't because we have trouble affording our monthly premium and it's an all deductible plan! We do not qualify for any government help, nor would we want to. Our rates go up every year and when the ACA took effect our rates went up 100%! I am not seeing how this helped us?

We recently had a surgery that was unavoidable and come to find out the ONLY anesthesia provider in our area is not in network! They said they never will be either. So we had to pay that whole bill! I would think this kind of issue needs addressed before raising our rates! Are we supposed to go to another town for services? We shouldn't have to worry about things like this either, our focus should be our health!

I work in a medical office and see firsthand insurance issues and rates are crippling people when it was to be the exact opposite.

So in the end my answer, although it will not matter, is NO to a rate increase! Maybe stop paying providers so much and maybe providers should stop billing everything under the sun when it is not needed in order to save you some money. In regards to the surgery I referenced above the hospital charge was \$10,000 for literally 10 minutes.

162.  *Sally Johnson* Says:
[July 8, 2015 at 10:36 AM](#) | [Reply](#)

We are responding to the recent notice of a proposed base premium rate increase by 26.7% from Wellmark Blue Cross Blue Shield of Iowa. It is very disturbing to think this increase is being considered.

The typical middle class family, if lucky, may receive an annual pay increase of 4%. An increase on our health insurance premiums of over 25% would greatly stress the budgets of most households to regress towards or remain in a poverty level. This increase also nudges business to cut back on full-time positions in order to avoid the costs of health insurance programs and as a result increasing the state's unemployment rate.

Furthermore, a health insurance premium increase of this magnitude will reduce take home pay creating many households to be in need of assistance to pay rent or perhaps lose their home because they can't afford their mortgage. It will also force many of the hard-working people of Iowa to turn to government-assistance programs in order to pay their utilities, heat their homes, and feed their families.

Prediction: this increase in government-based need will take away from Iowa's economic growth!

The cost of medical care is out of control. Fees charged by hospitals, doctors clinics, and pharmaceuticals are astronomical. Why are there no regulations in this area? These outrageous costs have to be absorbed by either the patient (out-of-pocket) or by their insurance provider another reason behind the large premium increase.

And how much of the health care given is truly necessary? Pregnancy tests, for example, are not emergencies and should not consume priority of emergency care. Emergency room visits should be given to ONLY emergencies. And why is a pregnancy test given from an emergency room to a patient already abusing the system?

Let's instead promote healthier life styles through sensible incentives that could in turn reduce the insurance premium when the consumer shows proof of performance. Wouldn't it make sense to have Health Savings Accounts available that are sustainable instead of losing unused money at the end of the year? Wouldn't it be great to take the abuse out of the system and use some common sense where everybody is held accountable instead of just the hard-working people?

Iowa is the backbone of agriculture. Agriculture makes up 34% of the Iowa population. We are a proud people. We work hard for our money. And we love our country and our family. The last thing to do to the middle class of Iowa is to take a way ALL of their buying power. This will only create a trickle-down effect and send the state into a depression. How do we keep our graduating college people if they can't make a living? How do we attract more business if there is no one to work?

The proposed health care insurance premium increase will hurt the economy and the people beyond repair. Please, with wisdom and common sense, reconsider this proposal and please reconsider other alternatives to make health care something we can afford and not be dependent on assistance.

163.  *Patti Mitrisin* Says:
[July 8, 2015 at 2:14 PM](#) | [Reply](#)

Concerning my health insurance coverage. My rate went from 289.00 to 486.00 because I had to get different insurance. I pay for my insurance on my own, but I sure didn't get a cost of living increase to cover this. And NO I do not qualify for Obamacare. If I did, my premium would be over \$1000. a month. Deductibles are outrageous. I should quit my job and get divorced so I can live off the government, and get a free cell phone.

164.



Jo Ann McNeil Says:

[July 8, 2015 at 2:37 PM](#) | [Reply](#)

Thank you for considering my comments. I am an active, healthy, 62-year-old female, 110 lbs; I run, I have participated for 6 years in a weekly Pilates class, I do yoga, play golf, meditate, and I eat healthy food (lots of fruits and veggies and protein, and yes, red wine and chocolate). I have never smoked or used non-prescription drugs.

My concern is not that Wellmark might need to increase rates occasionally; I appreciate the complexity of the conditions and marketplace that influence such decisions. My concerns, however, are as follows:

Wellmark does not provide a “wellness care” option for insurance that provides incentives for healthy practices – such as subsidy for health club membership or the types of classes I referenced above. Other insurers offer a “silver sneakers” option for Medicare recipients, but why do we have to wait ‘til age 65 to have such incentives? To my understanding, it’s not available here.

2) I frequently visit a wholistic practitioner (chiropractics, acupuncture, nutritional response testing, etc) to manage my health in a proactive, natural way, and these visits are, of course, not covered by insurance.

I usually visit my insurance-approved doctor only for annual check-ups, or if something is REALLY wrong and concerning. This year, however, I came home from a trip with very irregular symptoms (vomiting), and my physician ordered several very expensive tests to find or rule out the cause. In the meantime, I went to my wholistic practitioner who, within a few minutes, figured that I had some type of parasite, and suggested an herbal remedy – widely available – which cured my symptoms (and cause) well before all my other expensive tests were complete. However, insurance does not cover my \$45 visit to determine this. And the mention of “parasite” to my physician was met with a blank stare, and suggestions for medications for symptoms I did NOT have (acid reflux, headaches, etc.) There are thousands of parasites other than tapeworms. 5 minutes on the internet indicated how I likely picked up one/some in my time away, and listed natural remedies – which I tried – and which worked.

4) Is someone my age who doesn’t practice healthy lifestyle habits paying the same premium as I do, even though she may be sabotaging her health and using the health care system for every sniffle? Are we all treated the same by Wellmark? (This is a serious question to which I would appreciate an answer).

Our medical and insurance systems seem to be run by pharmaceutical companies, and certainly do NOT allow for pro-active wellness practices. Wouldn’t Wellmark have been happier with my \$45 wholistic office visit (and supplement, which I am happy to purchase) than with my multi-thousand dollar tests? What if Wellmark acted as a partner with health care consumers in wholistic, integrative, and functional health practices?

Is Wellmark actively recruiting functional medicine practitioners, and encouraging “conventional” medicine docs to learn and practice functional medicine? (another serious question to which I would appreciate an answer).

It’s hard to look at Wellmark’s beautiful new downtown headquarters building and not feel just a little resentful of these increases, continuing to operate under their old paradigm of “health care” that is actually rooted only in symptom-centric “disease care”. There is a whole world of plants that hold the keys to our health. Anyone noticing the increased interest in essential oils, herbal remedies, and acupuncture? Why not assist in encouraging and integrating these practices into our health-care practices, instead of flatly denying them?

Third question I’d like answered: What were Wellmark’s profits last year? Why is there not a current Financial Statement on the website?

If Wellmark would take some of this 18.9% toward figuring out good, long-term solutions that actually help Iowans IMPROVE their health, I might feel a little better about “contributing.”

In the meantime, I urge you to PLEASE consider a less aggressive insurance rate increase, AND to encourage Wellmark to see where it might a) find operational efficiencies, and b) better utilize resources toward long-term pro-active customer-healthy practices, reducing their reliance on the current over-burdened disease-care system.

165.  *Michael Finck* Says:
[July 9, 2015 at 8:06 AM](#) | [Reply](#)

I am Michael Finck and I am writing in regards to Wellmark Blue Cross Blue Shield’s proposed rate increase of 21.7%. I am a 61 year old self-employed farmer on a single grandfathered policy. I have had some kind of double digit base rate or an age break rate increase almost every year. One of the changes was a rate increase that came in the middle of the year because I was not on the correct calendar year and then they back billed me for the increased amount. Their answer to my question about this increase was for me to raise my deductible and cut some of my coverage. I am now almost out of deductible raises I can do to make my insurance somewhat affordable.

I very rarely see the doctor and very rarely use my insurance. I am not an abuser of the system. I now spend almost more on my premium than I have claimed in my lifetime.

I was wondering if you ever turn down a rate increase for Wellmark? Also, is there a way that the costs charged by hospitals, doctors, and the pharmaceuticals companies can be controlled instead of Wellmark passing the costs along to the policy holders? It is becoming an economic burden to me. My policy is grandfathered and in 2016, I will have to take a policy that meets the Affordable Health Care Act requirements. This has a whole lot more coverage than I have now so I can’t imagine how much my policy rate will increase at that point.

I am encouraging you not to approve the base rate increase for Wellmark Blue Cross Blue Shield.

166.  *Kevin Bouska* Says:
[July 9, 2015 at 8:24 AM](#) | [Reply](#)

Absolutely not. Last time we had a record premium hike and there was a record profit. Last time it was 13% this time 18.9%. Getting pretty clear this is a racket.

167.  *Terrill Stanley* Says:
[July 9, 2015 at 8:28 AM](#) | [Reply](#)

Hi, my name is Terrill Stanley & I would like to comment on the proposed increase to the base rate of my insurance. I am an LPN & a RDA & make good money for this day & age but that doesn't mean that I can afford to pay more for my health insurance than I do to rent my home. My dad always taught me that whether I rented or bought a home that my payment should never exceed 25% of my income because I would need 75% to cover the rest of my living expenses. I would like you to explain to me how I & other people are to survive if we have to pay 25% for our homes & 40% of our income for our health insurance? How are we to cover our utilities, other insurances, groceries, car payments, etc. You are going to force people like me, the middle hard working class to either work two jobs or force us out of having insurance. The penalty for not having it is more affordable. If you go with this 21.7% increase in insurance I will be forced to make some drastic changes in my health coverage, or not have it at all.. I have never ever in my life heard of a 21.7% cost of living increase in pay, I am literally going to be insurance poor & now know what that means. I struggle to pay what I have to now. I am apposed to this large of an increase for whatever reason you give. Maybe you need a reality check because I don't know of anyone who can afford this. Please reconsider for us middle class workers who carry most of the tax burden on our shoulders too. You're forcing Iowa to be RICH or destitute & maybe even homeless.

168.  *William Beringer Jr.* Says:
[July 9, 2015 at 9:14 AM](#) | [Reply](#)

My dad died a year ago, and I have worked for him all of my life as a farmer. I got my insurance through him, and now that he is gone they are seeking to raise my rates, and I'm seeking to protest that. I can't afford that. It was \$600 and I got it lowered to \$450, and now they want to raise it again, and I can't hold on to it! I am in my late 50's and I have farmed my entire life and never had any serious health concerns. It's not fair that they can seek to raise my rates regardless of what I can afford.

169.  *Terry Conrad* Says:
[July 9, 2015 at 11:32 AM](#) | [Reply](#)

there's been so many with out for so long, what do expect, you increase it, your gonna push everyone to be with out again. if we could all afford insurance we would all have better health cause we would have had care at the time of need, but since we can't we wait till its really bad

and so now its more expensive. don't you see the pattern here. most of us don't care any more. you wonder why crime rate is high, suicide increases, depression is out of control and all you can think of is charge us more. how about the insurance companies and the government taking a crunch and live like the rest of us so then the prices should come down- A LOT. can't make enough to pay all bills now, so have to do with out other things needed, drugs, food,can't pay the light bill, phone bills, just the basic living bills. don't have any monthly bills because we can't pay the living expense bills that come every month. still paying on a Dr. bill for the 3rd year cause my insurance had to change so i could at least have some. we don't have any money to enjoy a little of life, we don't go out to eat, movie or shop or anything everyone else does. its so expensive.

always said that we didn't want to have to live like our folks, broke, nothing to their name. what kind of life is that well that's where we all have been pushed to, but the government has MADE us do what they want, we don't get to make decisions for ourselves.

the drug companies charge way to much, most of us would all be better with out all the drugs. so we buy junk food, the healthy foods that we all need are to high to buy so we don't. now does that make sense? fruits, veggies, the things i use to buy before everything went to \$2.00 and up per item. that takes away a lot of things that are good.

we are taxed to death, no money to enjoy life, leads to no one working, caring and back to no insurance. you want to take everything away from us, we don't have any more to give. getting to the age where there should be something there to plan to retire on and that's never going to happen cause you've taken all we've worked all our lives for. the amount of stress for us; me has paid a big toll on my health, but then what do you care. I'm just a number. you think that you have to increase rates, everyone else has, there must be something happening, we don't want to get caught in a mess and not make as much this year. **PUT ALL THE HIGH PAID PEOPLE IN OUR SHOES AND SEE IF THEY LIKE IT.**

but of course you'll never do that.we all would like to have good health, good income, nice home and time to enjoy the reason we were put on this earth.

By the way we were all told that the insurance WOULD NOT go up, but then you lied to us again, right? mine went up and come fall or when you GO AHEAD with your increase, we will be without because we have nothing else left. we have owned our own business for over 35 years and there's no one using the accident paid claims to fix the cars, they just drive the car, then take a vacation that they never got to take or buy the TV or phone they think they need. you have done a good job on all of us. so i say you don't need any increases, no more. you can tell the rest of the world that they don't need more either, live within your means and stop blaming everyone else. take responsible for your actions, lets make this world a good place to live in again, and one that we all can afford.

NO MORE- NO MORE. remember nothing from nothing is still nothing, which is what most of us have left.

170.  *Martin Maher* Says:
[July 9, 2015 at 3:26 PM](#) | [Reply](#)

I am writing in regard to the public hearing on July 25, 2015 about the proposed increase in premium requested by Wellmark Blue Cross and Blue Shield of Iowa. I will not be able to attend so I am sending my opinion in writing.

I am a policy holder, male age 63, and I see no reason for such a large increase in premium. My health care costs have risen very little this year thus I see no reason for this dramatic increase. My income has shrunk this year so an increase of this size will have a large impact on my budget.

This large of an increase seems to be just a money grab by this health insurer. Please deny this large request. Most negotiators ask for more than they need just so they get the amount they want and look good in public view by settling for a lower rate. Please deny this rate increase.

171.  *Dixie Peters* Says:
[July 10, 2015 at 10:51 AM](#) | [Reply](#)

18.5 seems like a huge increase, and I understand that the premium goes up every year but that is just ridiculous. It's gotten to the point where I have to decide between paying for my insurance and buying food. This would be more understandable if my wages increase by that much, but they don't making this very hard for me to bear.

172.  *Connie Grall* Says:
[July 10, 2015 at 11:58 AM](#) | [Reply](#)

Hello. My name is Connie Grall from Fort Dodge, Iowa. I am writing regarding the again increase in my premiums. I do not want to see premiums go up this year. I understand the Medical Trend etc., and I am truly thankful for today's technology, but I am a single person and my wages do not increase with Medical Trends. My rating characteristics have not change. I have not misused my insurance and luckily have been pretty healthy. My opinion is like most. There should be groups with different base rates that reflect your group. Then rating factors. I don't want to pay the same as a smoker, or someone who is still having babies. I believe a rating factor should also be how much you use your insurance. I have not had any changes in coverage or benefits. It is only me on my policy. I live in Iowa (not a big metropolis area). I do not use tobacco. I have no ongoing health issues. I do not deserve an increase in my premium. I am probably going to be forced to surrender my great policy I have had for years for a group plan through my employer, which scares me to think I have to go to a lesser policy. So, just in case they allow me to keep my own policy, please do not raise the premiums.

173.  *Deb Tudor* Says:
[July 13, 2015 at 1:00 PM](#) | [Reply](#)

I am writing in regard to the 18.9% increase in our health insurance that Wellmark Blue Cross Blue Shield is asking for. My husband and I are already paying over \$900 a month for our insurance. After this increase, it will be close to \$1200. It is a struggle for us to pay this amount as I am sure it is for other also.

174.



Brad Says:

[July 14, 2015 at 11:12 AM](#) | [Reply](#)

I DO NOT BELIEVE THERE SHOULD BE AN INCREASE IN PREMIUMS.
They can not expect me to pay more and earn less.

175.



Melinda England Says:

[July 14, 2015 at 1:06 PM](#) | [Reply](#)

I am writing in protest to Wellmark Blue Cross Blue Shield's request for an 18.9% rate increase to their base premium. I think the rate increase is excessive and unnecessarily places a hardship on their policyholders.

My husband and I have full-time careers. My health insurance is covered by my employer; however, my husband's employer offers no insurance nor does it compensate him for purchasing his own coverage. We purchased a Wellmark BC/BS policy for him and our college age son through our local Farm Bureau Insurance office before it was a requirement for ObamaCare. Our premium is already in excess of \$700 per month.

Our employers are both government entities in our scarcely populated area of rural southern Iowa. Both of those entities are held to strict budgets driven mainly by property tax income and have given only token raises in the past. As of July 1st, we began receiving a mere 2.5% increase in our wages.

According to the information received, our Wellmark BC/BS premium will increase \$50.39 per month which, according to my calculations, represents a 7.1% increase to our overall monthly premium. This rate increase is 4.6% higher than our increase in wages. Our paychecks are more but our health insurance premium will take most of that, leaving very little to cover other increases to our monthly bills (such as gas, groceries, electricity, property taxes, etc).

It is my belief that our health care system is broken and in need of serious re-structuring. It would be interesting to see how much of this increase will go to the top executives at Wellmark. The citizens of this country cannot continue to foot the bill for excessive executive pay and doctor compensation. We cannot continue to pay excessive premium increases like the current proposal from Wellmark BC/BS.

I would recommend that your committee reject the proposed increase. Thank you for your time and consideration of the points I mentioned above.

176.



Paul Williams Says:

[July 15, 2015 at 9:31 AM](#) | [Reply](#)

I am presently enrolled in Wellmark's ACA plan. I have had to up my deductible to the maximum (\$5000) in order to afford this year.

If it is raised another 28% I will no longer be able to afford. I believe a rate increase of this magnitude is completely unfair and a lot of people will have to discontinue insurance. Please do not allow this to happen.

177.  *Mandy Says:*
[July 15, 2015 at 9:42 AM](#) | [Reply](#)

I received a letter in the mail stating that you guys want to raise insurance 2016, I can't attend the meeting so I want to address the concerns/comments by email. I'm a single 29-year-old female and I work hard every day to try to afford health insurance and right now it is very difficult to afford health insurance and buy you guys wanting to raise health insurance that is going to be hard to get health insurance that actually has decent coverage so I'm going to have to go to some cheap insurance that has crappy coverage as I'm not going to be able to afford Blue Cross Blue Shield anymore. I just don't understand how these people that don't work get free insurance or barely work that can get insurance and the ones I have to work their butts off every single day have to pay an arm and a leg for insurance and get the same kind of coverage how is this possible. And another thing that is very irritating is this whole HSA insurance who can afford to pay all out-of-pocket that amount of money upfront before the insurance actually kicks in. I don't have that much money laying around to pay that all out-of-pocket before the insurance kicks in I a big fan of the whole co-insurance deductibles.

Raising health insurance would be meaning losing customers as we would have to go find cheaper insurance or we would have to switch plans to find a cheaper plan with a higher deductible which would still screw all of us in the end.

178.  *Michele Haas Says:*
[July 15, 2015 at 9:50 AM](#) | [Reply](#)

I recently move from Minnesota to Iowa. I am currently paying \$500 a month for coverage with a \$5700 deductible. This is almost \$100 more a month than I was paying in Minnesota. If they increase my monthly premium I will have no choice but to find another health insurance company. I have always had Blue Cross Blue shield health insurance, but they are no longer affordable.

179.  *Janet Johnson Says:*
[July 15, 2015 at 9:58 AM](#) | [Reply](#)

I received a letter stating they want to raise my insurance again. I have paid for my own insurance my whole life. Nothing free given to me. I have a single policy and with a rate increase it will go over 1100.00 a month. Obama care did not lower my health care at all. I am getting tired of working and paying for everybody's insurance, phones, housing, etc. I watch people with EBT cards buy food then use cash to buy beer, cigarettes and dog food. Getting old. Find a solution to this problem and stop the political fighting and fix it.

180.  *Tedra Towne* Says:
[July 15, 2015 at 12:13 PM](#) | [Reply](#)

I am one of many who received Wellmarks notice of rate increase. 28.7%??? Maybe when my fixed income increases by that much! So many people are on an edge where increases in insurance (let alone increases in gas, electric, groceries, etc) will be the tipping point between sinking in debt to keep up with bills and a quality life. Please help us. Thanks for listening.

181.  *Deb Kruse* Says:
[July 15, 2015 at 12:16 PM](#) | [Reply](#)

SERIOUSLY?? An 18.5% medical coverage increase!!!! Zero Percent goes to gov't fees so they can't blame the Affordable Care act.

My son and husband have used insurance for 4 office visits in the last 5 years. And there was a co pay. There was no additional testing. We have the highest deductible they offer. And still pay out the butt.

I don't recall hearing of an 18.5% cost of living increase for anyone that has to pay for insurance. I would like to see the \$\$ amount of all bonuses paid out in the company. And accounting for all activities paid for by the company. And what the profit of the company is. They raise the rates annually. This is ridiculous.

182.  *Karla Vogel* Says:
[July 15, 2015 at 12:19 PM](#) | [Reply](#)

I received your notice of the proposed 18.9 % increase by Wellmark Blue Cross Blue Shield.

All I can say is, NO! NO! NO! I can barely afford the premiums where they are now! I pay for my own insurance out of my own pocket and it's about \$400. per month. I was already looking for a different alternative the last time they increased the premiums.

Obama care didn't help me. My insurance just went up. I hate that I have to live in fear of paying increased premiums, and also increased medical care bills. We constantly pay more to get less.

Why are those of us who pay our bills repeatedly penalized for being able to pay our bills. I have relatives that don't have to worry about a single medical bill as all theirs are paid for by the state! The lazier you are the more the government pays. I'm tired of paying for all these freeloaders!

I wish I had more time to vent, but I have to go to work to pay these bills.

183.  *Mark Eno* Says:
[July 15, 2015 at 12:22 PM](#) | [Reply](#)

I would like the commission to consider, at the very least, a lower percentage increase than the one proposed by Blue Cross Blue Shield.

As in the past, the rate increases are the result of poor health practices and abuse by the policy holders and healthcare system. I would really like to see a structure where the people who eat right, exercise and take care of themselves aren't thrown into the pool like everyone else.

Please do not allow a percentage increase like this!

184.  *Eric Johansen* Says:
[July 15, 2015 at 12:25 PM](#) | [Reply](#)

I like my coverage with Wellmark Blue Cross and Blue Shield, however if they continue to raise their premiums I will be forced to look elsewhere for coverage. I will not be able to afford my health insurance with Wellmark.

185.  *Sandra Denglar* Says:
[July 15, 2015 at 12:27 PM](#) | [Reply](#)

My husband and I are covered under Wellmark Blue Cross/Blue Shield with a family plan. We do receive excellent coverage but feel that 21.7% is quite a big increase to the people that have individual/family plans. Our income does not go up by that much each year. We can see that it does have to increase due to the cost of health care. We would hope that it wouldn't have to be such a large increase. It is getting hard for the "little" guy to make ends meet! Thank you!

186.  *Jeannie Giordano-Shanks* Says:
[July 15, 2015 at 12:31 PM](#) | [Reply](#)

This public comment is in response to the Wellmark BCBS request to increase its base premium rates by 18.9% I'm sure it will come as no surprise that I am commenting in hopes that this premium increase is denied.

As a family that must purchase our health insurance, we already pay top dollar for insurance that does not provide coverage at the same level as those who have subsidized or no-cost premiums. In order to afford our insurance, we have opted to stay with a policy that does not cover services that the parity act has stated should be provided; to include mental health counseling, substance abuse counseling and maternity coverage. While those who pay much less or none at all receive better coverage, we are faced with paying significantly more for less. I recognize that, in part, this is the point. Health care coverage for all means that those who can afford more will assist those who cannot. But where does this end? I believe it is true that we cannot take care of charity unless we take care of ourselves. And I am beginning to fear that if this continues, we will certainly not be able to take care of ourselves.

Please help us to find another way.

187.  *Anne Marie Nelson* Says:

[July 15, 2015 at 12:35 PM](#) | [Reply](#)

Please deny permission to Wellmark Blue Cross and Blue Shield of Iowa to increase base premium rates by 21.7% This company has increased rates repeatedly and not provided increased benefits to the policy owners and families.

The proposal includes a 2.6% increase for administrative expenses; please, please investigate at least this portion of the proposed increase. Just who is getting that portion????

I really feel despaired writing this protest of the proposed increase and the request to investigate the same proposal; nothing seems to stop insurance companies.....at least I am trying.

188.  *Dianna Bremert* Says:

[July 15, 2015 at 12:38 PM](#) | [Reply](#)

This is a very unfair Request for an increase, we don't get these kind of increase's on our retirement income and this will make insurance unaffordable for us. Its just not fair, the bigger the company,s get the more greedy they get, I wish we could charge everyone what ever we wanted to, why don't you do something good for all, like go after the rich people that always get out of paying their fair share because they have the Fancy Lawyer's etc, its time we give the working class of America a break.

189.  *Craig Nordyke* Says:

[July 15, 2015 at 12:42 PM](#) | [Reply](#)

As an existing Wellmark individual policyholder I am writing regarding the proposed Wellmark rate increase for 2016 for individual policies under ACA. This is the second year in a row for significant increases. Last year, the increase was about 15% and this year the increase is proposed at 26.5%. The same message is being provided by Wellmark in that this cohort of policyholders has had excessive claim activity. That may be valid and I am sure the experience will be independently checked.

I would ask you to consider two important points as this proposed increase is evaluated:

1) consider the downward spiral effect of this magnitude of an increase. I am a relatively healthy participant in this cohort and I will now be forced to look at alternatives for my health insurance given this large an increase. The more the relatively healthy leave the cohort, the more rapid the future rates will increase; and

2) I believe the more important question with this change is what will happen to rates in 2017. Unlike many other states and carriers, under President Obama's ruling Wellmark chose to grandfather existing pre-ACA individual policies so the only cohort under ACA policies would be new entrants and many previously uninsured with health issues. That left hundreds of thousands of individuals covered with pre-ACA policies so the spread of risk of ACA policies

did not occur. In 2017, that exemption and grandfathering for pre-ACA will expire. Will the existing ACA cohort then be combined with the much larger pre-ACA cohort for rating purposes? Presumably, this would result in a broader risk profile and therefore actually reduce rates for the current ACA cohort in 2017. I believe as you consider the 2016 rate change, in addition to the downward spiral effect, that you evaluate Wellmark's approach to the 2017 rating process for individual policies.

As a retired insurance executive, I understand the rating concepts and the need to adjust premiums to adequately support claims and expenses. I also understand the increase is to be prospective in nature and not to recover past losses. I appreciate your consideration of the issues I have raised as you evaluate the proposed rate increase.

190.  *Gary Moore* Says:
[July 15, 2015 at 12:45 PM](#) | [Reply](#)

My premium was \$160/month the year before ACA. The first year I was under the ACA, my premiums went up to \$535/month, a 334% increase or \$4500 more per year, with a higher deductible. Now, Wellmark is asking for a 26.5% increase for 2016. My annual income is \$75,000 a year, so I do not qualify for a reduced premium. In essence, my pay has gone down 7% already. It would cost me another \$1700 per year. Where does it end? The "employer mandate" keeps getting pushed back for political reasons. It's simply not fair that a few of us are picking up the burden. The 80 million under the employer mandate should be paying their fair share. Otherwise, the rates should not go up.

PS: We were promised that our rates would go down. What a laugh.

191.  *Aleta Mottet* Says:
[July 15, 2015 at 12:49 PM](#) | [Reply](#)

Ms Robinson I would like to address the notice we received about the proposed premium rate increase of 18.9% for my husbands Wellmark Blue Cross health insurance He pays well over \$1,000 a month now for his insurance. We are farmers and have always paid for our own insurance but the rates are starting to be a burden for the working class. He can't afford to be without insurance because he has had some health issues in the past. We don't qualify for any assistance or would we want to. We just want to be able to afford to take care of our own needs. Obama Care was suppose to make health insurance more affordable but it has not helped the middle class working families. Our health care system in this country is broken and by raising the premiums it's not going to fix it.

192.  *Allen & Ruth Engelhart* Says:
[July 15, 2015 at 12:53 PM](#) | [Reply](#)

The Iowa Insurance Commissioner is the only voice my wife and I have, as a personal policy holder. From 2012 to 2013 our premium rose from \$8365.80 to \$9927.00, an 18.66% increase.

From 2013 to 2014 it rose from \$9927.00 to \$10,963.20 per year, a 10.44% increase. From 2014 to 2015 it rose from \$10,963.00 to \$11,443.80, ONLY 4.84%. That means it has risen 33.94% over the last 3 years.

If Wellmark Blue Shield is allowed the proposed 21.7% increase, our premium will jump to \$13,600 per year.

Since Wellmark and our governor, terry b., turned their nose up to the Affordable Health Care Act, we get \$0.00 tax credit. With our gross fixed retirement income of \$38,040, our insurance policy consumed 22% in 2012, 26 % in 2013, 28% in 2014 and 30% in 2015.

If the Insurance Commissioner allows the proposed 21.7% increase, our policy will increase by \$2483.30 per year and will consume 35.3% of our GROSS income and if we include the \$3500 deductible, insurance costs then eat up 45% of our income.

If the Insurance Commissioner allows individual health insurance premiums to continue to inflate at the unheard of rates, then we as individual policy holders have NO voice and our worthless governor just as well get rid of the Commissioner and save the State some money, so he can start up soup lines.

P.S If I was to get a job at the current minimum wage and work full year, (2080 hrs.) I wouldn't make enough to pay these premiums, after taxes let alone pay the deductible.

193.  *Sherryll Wallace* Says:

[July 15, 2015 at 12:58 PM](#) | [Reply](#)

According to Wellmark BCBS of Iowa the following factors are the reason for their request for a base rate increase:

Factor Change From Current Premium Portion of Base Premium Rate Increase

Medical Trend \$47.22 19.0%

Govt. Fees & Taxes 0.22 0.1%

Administrative Fees 6.68 2.6%

While the medical trend and govt. fees and taxes are probably due to OBAMA care, the cost increase on administrative fees looks suspiciously like a cost of living raise (if it walks like a duck).

According to Wellmark BCBS of Iowa (as shown on their website) they provide Corporate Sponsorships for the following events:

1. Grand Blue Mile
2. Wellmark 3-Point Play
3. Wellmark Family Series
4. Wellmark Tour de Oake
5. The Ag Bowl
6. Iowa Sports Foundation
7. Sioux Falls Youth Triathalon
8. Blue Zone Project

Unfortunately they didn't have on their website what the cost was for each sponsorship but I'm sure they aren't cheap. And, how many other events do they sponsor that aren't listed and at what cost? I would like to know these costs and where the money comes from to pay these sponsorships.

In light of the above facts maybe it's time to discontinue some of the sponsorships to make up the 21.7% rate increase and maybe for one year a cost of living raise could be postponed. Those of us who are retired should be so lucky to get a 2.6% raise! Instead BCBS keeps raising premiums and we are expected to pay them without question. Enough is enough. I could be more understanding if the increases were one or two percent, but they never are.

Their argument will be that those sponsorships help promote wellness throughout the state. I don't believe that is the business they should be in, especially when they have to raise OUR premiums to do it. There are a lot of non-profit organizations that can and do fill that void. BCBS is in the business to provide quality health insurance to it's members just like doctors are in the business to provide quality health care to their patients.

They built a brand new office building in Des Moines a few years ago. I don't know how many other new offices around the state were or have been built and at what cost. Would be interesting to know.

Also, while speaking to them I would also like to voice my dissatisfaction with the fact that as BCBS members we are co-owners and should be able to attend every board meeting that is held and have a say in decisions that are made. Instead we are never notified, there is a meeting held in a room full of people who think they know better making the decisions for the rest of us and then and only then are we allowed to know what it was about.

In conclusion, I am not in disagreement that they probably do need to raise the premiums, however, I don't believe it should be a double digit increase.

194.  *Judy Watznauer* Says:
[July 15, 2015 at 1:03 PM](#) | [Reply](#)

I have been self employed now for over 13 years. My cost for insurance go up every year!! I fight hard every year to keep insurance. Half scared to ever go to the doctor because then I have another bill since my insurance only pays so much. So I stay away from the doctor. My wages hardly ever go up and never enough to pay for the increase. So every year I find it harder to keep insurance. Is this the American Dream. Work harder to pay for insurance but then you will not go to the Doctor...something is so wrong with this.....

195.  *Henry Krecklow* Says:
[July 15, 2015 at 1:07 PM](#) | [Reply](#)

I for one do not think Wellmark needs a rate increase, they received one last year which increased my premium by \$200 a month. This is suppose to be affordable care not let take the

public for everything they have and leave them with nothing. If they keep getting increases they will soon drive themselves up to the point that no one can afford them and they will put themselves out of business.

Instead of increasing premiums on the public why doesn't the insurance industry and the government go after the real problem with health care that's the Medical industry itself which is in most cases over charging and tax exempt! Look at most Doctors today they are associated with a clinic and that clinic is associated with a Hospital Medical organization. They charge what they want when they want with no one disputing the charges.

If this increase is allowed I plan to go on the social forms on the internet and call for a general boycott of the insurance industry and the affordable care act. It cheaper to pay the IRS penalty than to pay the insurance.

196.  *K. LeAnn Keenan* Says:
[July 15, 2015 at 1:11 PM](#) | [Reply](#)

The proposed hike to basic premium prices proposed by Blue Cross Blue Shield is outrageous. President Obama is trying to make sure everyone in the country is insured, but with continued hikes like this the private pay patron will soon be squeezed out.

I understand the reasoning that BCBS paid out more than they paid in, and with that in mind, I have a couple of suggestions as to budget cuts they might make before they gouge the private pay client: eliminate the multi-page color newsletter that no one reads anyway; eliminate the expensive incentive gifts given to corporate workers attempting to motivate them to get healthier. Someone with an accounting mindset could no doubt find other places to save money.

After last year's increased rates, a 26.5% hike is unthinkable.

197.  *Dennis Dittmer* Says:
[July 15, 2015 at 2:32 PM](#) | [Reply](#)

We have had two rate increases since ACA went into effect, and it seems that the working class is the ones who are paying for it? How many people are going to receive a 20% increase in their raises? And if they keep raising it how are they going to assume that we can afford it later on down the line? What is going to stop them from increase it next year too?

198.  *Joan Gengler* Says:
[July 15, 2015 at 3:46 PM](#) | [Reply](#)

I am against the increase, I am not for it at all.

199.  *Joni Says:*
[July 17, 2015 at 11:27 AM](#) | [Reply](#)

We are struggling right now to pay a month premium, and we raised our deductible to the highest point to make it cheaper. I don't believe that Wellmark is struggling to pay claims. We would have to go without insurance, and I don't know how other people afford it. We don't use our insurance thank God. We don't smoke, we don't drink, we eat well, we exercise. We don't use their money, they need to reimburse us. I think we need to do something about this. We are self-employed, and if they try to increase our rates by 21.7%, then we will lose our business. We can't make any more money than we are making. We pay all of our own insurance, we pay our own bills. We don't know how to keep this up. Corporate companies provide their employees with insurance and I bet they actually use it. I think that Wellmark is out of line for even requesting this. I'm begging the commission to not allow an increase. This is highway robbery. I'm praying that they don't raise this. We don't have any other choice when it comes to care do we?

200.  *Kim Mitchell Says:*
[July 17, 2015 at 1:58 PM](#) | [Reply](#)

I am opposed to the proposed premium rate increases.

201.  *Dan Doherty Jr. Says:*
[July 20, 2015 at 11:10 AM](#) | [Reply](#)

I am one of many affected with every increase imposed on us by the insurance industry. I am self-employed so I pay the full cost of my insurance. We have on one hand the government enforcing everyone to have coverage, this alone should have made our rates go down due to not having to pay for those who wasn't insured. Instead the insurance companies just keep wanting more, since I have had my coverage with Wellmark, every year they have gotten a double digit increase, this is resulting in pricing me out of affordable insurance. I have already had to increase my deductible to the point that I have told my wife that I had better be dying before sending me to the hospital. Our economy has not seen this degree of growth, not our wages, not the GNP, not interest rates. It's time to say NO, it's time for businesses to get in line with what's going on in the world. Say No to their 21.7% proposal please!

202.  *Mick Samsel Says:*
[July 20, 2015 at 11:13 AM](#) | [Reply](#)

I am writing to comment on the proposed rate increase that Wellmark is requesting. We are small town self-employed business people. We have had a huge decrease in retail business. Some of it due to the impact that the internet has on us, but we also had our largest employer, Tyson Foods close its doors in our town, leaving many unemployed. We have had our rate increase each year by at least \$50.00 a month.

As we see our income decline, we are very concerned about the rise in our costs. We would express that you not let this increase request be passed. Maybe Wellmark should try to cut their costs by reducing employees, spending, etc. to help all of us who have supported them for years.

203.  *S. Derry* Says:
[July 20, 2015 at 11:16 AM](#) | [Reply](#)

I would hope you, making the decision about the increase, would NOT ALLOW this increase. The reason I feel this is really a bad thing for many people, especially for people between ages 60 & 65, is because at age 60 premiums rise about 1/3 and with this increase that is going to increase the cost to everyone turning 60 almost 50%.

I will be turning 60 the end this year, so that would make my insurance go from \$536 monthly to approx \$800 monthly. With many companies dropping work hours back to 30 hours per week, to keep from having to provide insurance, mine were cut from 8 to 5.5 hour day. I already have a higher insurance premium and a lower income this year. If the increase is allowed it will take almost 3/4 of my monthly take home pay.

How is a person to live. You are making it so people will have to choose whether to have insurance or to have food and shelter. It is not making it so everyone has insurance it is making it so no one but the rich can afford insurance. Insurance companies keep charging more and more. We keep getting less because you can only afford high deductibles, making it so you can't even afford to use the insurance except for a major illness. Who can afford to save for the deductible with it taking most of their income just to have insurance.

I have always been pretty healthy, & it is costing me about \$6000 annually & I get a physical every year(\$300 value). If you allow this it will increase my costs to about \$9000 per year. My annual income is around 12000. This leaves very little to live on for the year. When you need it most you, can least afford it or don't dare to drop it.

PLEASE RECONSIDER HOW DEVASTATING THIS INCREASE WILL AFFECT THE AVERAGE INCOME POPULATION.

204.  *Chris & Janeane Van Ginkel* Says:
[July 20, 2015 at 11:22 AM](#) | [Reply](#)

I am writing on behalf of my husband and myself in regards to the proposed increase in our base premium rates. Wellmark BCBS should not be allowed to raise their rates and our premium. As hard working Americans trying to provide for our family and pay our bills every month, we should not have to pay more for our premiums. Is this because of Obamacare? What was supposed to help Americans has become a burden on many. We do not agree with the proposed increase and would like to be heard.

205.  *David Ure* Says:
[July 20, 2015 at 11:29 AM](#) | [Reply](#)

Have received two different mailings from Iowa BC/BS about their proposed 20+% rate increase for 2016. By any measure, this is nonsense. Their

20+roughly

8% increase in my personal insurance in 2014 was acceptable though still 3 or so times higher than inflation.

Their 20-some percentage increase that they want for next year might make sense if the ACA weren't in place and keeping medical inflation down, if general inflation were more than 2-3%, it there were flying pigs.

Please don't let BC/BS get away with this old way of thinking and of mindlessly raising rates. It's wrong and it's a lie.

206.  *Steve Thurn* Says:
[July 20, 2015 at 12:37 PM](#) | [Reply](#)

We would like to say that these rate increase's every year, year after year, have just gotten out of hand.

They have to stop we are just plain fed up with them. How can Wellmark keep justifying premium increases onto the consumer and increasing it own profit at our expense.

26.5 % increase is just crazy and unjust !!!!!

How do they expect people to keep paying these rates that go up each year and our own wages do not increase at all.

We have such a high deductible already if we had to use our insurance we would never get past our deductible amount.

207.  *Cheryl Lascheid* Says:
[July 20, 2015 at 1:48 PM](#) | [Reply](#)

We've probably been policy holders for at least 11 years, and our policy has increased every year too. I hope the commissioner finally says no to them because they let them increase it every year. It's just steadily increasing, and my son is no longer on the insurance so it should be cheaper. With the new proposed increase, I figure we will be back to about \$800 some a month. And I think that all of those reasons they are increasing are bull crap. They want to increase the base premium to 21.7%, and that is just crazy.

208.  *Ethan Graham* Says:
[July 20, 2015 at 3:04 PM](#) | [Reply](#)

I have no problem paying for health insurance. I think it is necessary and good. This is what I have a problem with is that I do not use any tobacco products. I realize that I am most likely a minority in alcohol use because I don't drink. Now that being said, what is being sent to me in the mail is that this is a definite increase in premiums. However, the fact that you want to raise the premiums significantly by 27.8% and reading straight from the letter I was given, "Wellmark has asked for a base rate increase because of higher costs by policyholders in your rating class." So when I get a letter that says that to me, it communicates that I have to pay for other people's

poor decisions. I love this country and the freedom we have here and that we can decide what to do with our bodies. But, I'm not ok with paying for other people's decisions about what they do with their bodies. For people like me who choose not to make those decisions, they should not be punished. I'm not trying to act like I'm better than anyone else. What people decided to do with themselves is their own choice. But, my wife and I make a daily effort to eat well and take care of our bodies so we don't have to use our medical insurance unless it is an absolute emergency. Which what I believe is the purpose of insurance. It's for the transferring of risk in case something happens.

209.  *Lucretia Ferley* Says:
[July 20, 2015 at 4:17 PM](#) | [Reply](#)

Wellmark's proposal to increase insurance rates is unconscionable. Once a symbol of quality health care, Blue Cross/ Blue Shield now brings to mind corporate greed and indifference. Is a beautiful building really necessary for good administration and service? Are policy holders to be sacrificed for greater company profit? Is this yet another prime example of how and why the middle class in America is disappearing?

Wellmark raised rates 18% in 2010, 13.3% in 2013 and proposed 18.9% in 2016. Most of us don't receive even a cost-of-living wage increase. What is fair? What is right?

I ask you to stand up for the middle class and deny Wellmark this increase. Thank you for your consideration.

210.  *Lynn White* Says:
[July 21, 2015 at 5:53 AM](#) | [Reply](#)

Wellmark has proposed another rate increase (even though the rates increase every single year). Their reasoning is in regards to underestimating their costs, the number of claims over \$50,000, and the members who signed up and then dropped coverage after large claims.

One of the first notifications I received stated "members in your class". If their proposed rate increase is surrounding the reasons noted above, then I most definitely am not part of that "class". I've only used my benefits twice in the last year and they were for age-related physicals (that used to be fully covered in the past, but now were only partially paid); and, my husband didn't use his benefits at all!!! And, even when we do, we would never use the deductible amount because it's so high.

So how can they justify punishing those of us who do not abuse the "insurance system" and rarely use it??

I would like to see an explanation for that

Thank you

211.  *Michael Collins* Says:
[July 21, 2015 at 7:58 AM](#) | [Reply](#)

I am writing to express my comments on Wellmark Blue Cross and Blue Shield's (Wellmark) request to increase premium rates by at least 21.7% in 2016!!!!

First a few facts that I have researched:

Since the advent of Obamacare, Wellmark has increased rates on average 14.3% per year (2009-2016). Prior to Obamacare, the average annual increase was 7.7% (2006-2009). Surely Wellmark wouldn't use a law they supported as part of the reason for these high increases? Yet, THEY DO! "Government Fees and Taxes" are listed in their reasons.

Since 2008, Wellmark has INCREASED their Total Reserves from \$929,000,000 to over \$1,533,000,000, an increase of over 65%! During this same time frame, they have REDUCED the amount of premium dollars spent on health care services from 87% to 85%. Their net earnings from premiums has more than DOUBLED!

Their total reported employment has declined 8% since 2008. Lower salaries and wages and related benefits costs contributes to a more profitable Wellmark.

I do NOT have issues with Wellmark's improved financial performance, as long as it doesn't come on the backs of us as policyholders. A 21.7% premium increase certainly is excessive given the above statistics.

Some questions for Wellmark:

How big do your reserves have to get?

Are these +14%/year increases designed to get rid of policyholders?

Do you really expect the public and government officials to believe that your new building didn't come from premium payments by policyholders over the years?

Do you really appreciate us as policyholders when you keep asking for and receiving double digit rate increases?

I am OPPOSED to Wellmark's proposed rate increase. In my opinion, an increase somewhere between 0%-5% is more appropriate given their recent financial performance.

Thank you for the opportunity to comment on Wellmark's proposed rate increases for 2016.

212.  **Brenda Ehlert** Says:
[July 21, 2015 at 8:03 AM](#) | [Reply](#)

Are you serious in letting this company make a 21.7% increase on our premiums. I sure hope not, because this isn't the first one I have had since I enrolled into the company. I know they only want an increase to set off the health care reform issue but I don't think it should be at my expense. It would be different if I used my insurance more and they had to pay more but that's not the case. Their proposed increase would cost me an additional \$62.00 a month. So I hope you agree to disagree on the propose increase for Wellmark this year.

213.  **Bill Kettelkamp** Says:
[July 21, 2015 at 8:14 AM](#) | [Reply](#)

In regards to the proposed 20% base increase in Wellmark health premiums:

If this rate increase goes through I will leave Wellmark after 35 years! There are options now and I simply can't afford to eat and have healthcare with Wellmark--this increase is an extra \$200 a month!!

High prices cure high prices in agriculture or any free market economy. Not for healthcare, it is exempt--for that reason healthcare is going to kill the economy--IT'S EVIL!

Our society would collapse if farmers could just bankrupt people and make them slaves for food.

Why would Wellmark risk losing my money? I'm paying these premiums and making no claims.

P.S. Astronomically high healthcare premiums will cure one thing--there will be no more Wellmark!

214.  *Rhonda Fothergill* Says:
[July 21, 2015 at 10:29 AM](#) | [Reply](#)

I think it is absolutely uncalled for and ridiculous. We should deny them this increase. What else can we do as a consumer to protect ourselves from going into the hole? Why are they trying to push us into the hole? Hell, I'm about to just pay the fine for not having the insurance. I've never been to the ER in my life and I only go to the doctor twice a year! Tell the commissioner that I say NO GO!

o  *Rhonda Fothergill* Says:
[July 24, 2015 at 7:54 AM](#) | [Reply](#)

After receiving two notifications about the 28.7 increase to my health insurance premiums in the 2016 calendar year and my inability to attend the public hearings on July 25th I am writing to you with my concerns.

My husbands company offered insurance to cover our family when my husband took his job some twenty years ago! Then when the ACA started rolling out his company was forced to discontinue my sons and I insurance coverage without having us pick up the higher premiums. It was a very large increase and frankly we could not afford it. I then had to purchase separate policies to insure my son and I.

With shopping around we went with Wellmark to cover me and my son is getting insurance through his college! With purchasing insurance it made a dent in our budget that was hard to accept but knew we needed to have it! I was not interested in the option of the ACA.

Now, with the proposed 27.7 increase in my rate I'm very angry as all of us not in a group plan are getting penalized for not being in a group plan! I am self employed and such increase are not only stressful but difficult in managing to find extra funds to accommodate the expense! Yet many who chose not to work or chose not to carry insurance slide through and I pick up the tab?

Why aren't we passing a rate increase for group plans at this rate that is being passed on to me?

I realize the cost of doing business is rising but I believe a increase of this magnitude is absolutely ridiculous and is going to cause many others to drop their insurance in which will cause even more increases to me?

I feel this to be discriminating against me because I choose to work for myself vs a company having a group plan!

I also have a feeling that Wellmark feels the the same way as myself about the ACA or they would be jumping on board with them through the exchanges?!?!!

I truly hope you consider a compromise on this issue and say no to this proposal on behalf of myself and others in the state of Iowa!

215.  Sara Trueblood Says:
[July 21, 2015 at 10:31 AM](#) | [Reply](#)

Dear Consumer Advocate:

I am writing this letter to you because I do not understand how Blue Cross/Blue Shield can increase an individual's health premium for more than your division approved. Yet it has repeatedly happened to us. I have talked with Blue Cross/Blue Shield about these discrepancies and they have replied it is due to age. What? Isn't that built into the increase? Everyone is another year older. Wouldn't it make more sense to go on their use of health insurance? Wouldn't it be great if we could be reinforced for staying healthy and not going into the hospital?

I have documented information (Des Moines Register) from your division for the past 5 years on what increases you have approved.

I have premium notices from BC/BS that demonstrate the discrepancy.

I appreciate you taking the time to look at these and then post/share for the hearing dated July 25, 2015.

Your approved rate increase	Actual monthly premium increase
2010 18%	28%
2011 8.5 %	10%
2012 9.35%	17%
2013 12.2 %	19%
2014 5.9%	9%
2015 21.7%	(pending)

This most recent rate change proposal is the largest yet and I am certain, if it follows the trend, the actual monthly premium will be more than the approved.

How can this be justified?

P.S. I will send paper copies of the approved rate increases for each year and the actual rate increases that we ended up having to pay. I really appreciate your listening to all of us "middle class" people who make too much money to get a subsidy yet not enough to afford good, quality health care.

216.  *Brett & Belinda Slaubaugh* Says:
[July 21, 2015 at 10:57 AM](#) | [Reply](#)

In regards to the upcoming hearing for rate increases to Wellmark Blue Cross and Blue Shield of Iowa premiums, my husband and I would like to protest any additional increases. Each year there is some kind of a rate increase with various reasons why Wellmark needs the increase. We personally very rarely ever have a claim yet our premiums keep increasing.

My husband and I both work and pay for our insurance ourselves. In neither of our jobs are we guaranteed a raise yearly let alone the 18.9% Wellmark is asking for. When a couple's health care premium is more than their mortgage it seems a bit ridiculous.

We ask the Commissioner to take the consumer's situations into consideration in the decision of this rate increase. We would prefer no rate increase. However, if it is the determination of the Commissioner to negotiate, at the very least put a moratorium on Wellmark that they will not be able to re-petition for a rate increase again for a set number of years so that we, the consumer, can budget for and afford our healthcare.

Thank you for letting us voice our concerns.

217.  *Karen Austin* Says:
[July 23, 2015 at 11:11 AM](#) | [Reply](#)

Currently I pay 634.85 a month (7618.20 per year) for my Health coverage. My prescription cost is 24.00 a month (288.00 a year) for prescription drugs. My out of pocket for medical was 1113.00. traveled 360 miles for appointments. I was informed that my insurance may go up 54.62 a month this is getting to be unsustainable for me. What Can I do?

218.  *C. Doane* Says:
[July 23, 2015 at 3:07 PM](#) | [Reply](#)

I really don't know why I am writing in regards to the 18.9% proposed rate increase from Wellmark Blue Cross Blue Shield, because it will be approved without question. Costs are high, so naturally, rates go up. But I feel 18.9% this next year, preceded by 14% for this year, not counting all the previous years of hefty increases is getting ridiculous.

The ACA has not helped premium costs or costs on anything—it has made things even worse. When I have my non-grandfathered Wellmark plan at the end of 2016, I don't know what I am going to do. The new plans are double the cost, have higher deductibles (mine now is bad enough) and limits on doctors, hospitals, etc. It includes coverage I will never need—example, maternity insurance as I am 59. Why pay for coverage you do not need? I do not want a subsidy or any other government junk, because I don't believe in it. I have always paid my way, as hard as it is at times, and with Obamacare it is out of reach. I doubt I will ever be able to afford coverage again. Thanks a lot U.S.A.

I guess that is another topic. But to me all these tie in to the fact Wellmark and all the other health insurance companies do not need these huge rate increases every year. Homeowner and auto insurance rates don't skyrocket every year. They all have catastrophic losses all over the country, with storms and natural disasters that raises the cost for everyone as it comes out of the "pool" all property/casualty companies pay into. Why is the health industry so poorly managed and allowed to infiltrate prices monopolize drug costs, fees, etc. continuously, with now end in sight?

Things are out of hand all the way around, and I wish the Insurance Division would do something about it.

219.  *Tanya Hoefler* Says:
[July 24, 2015 at 9:56 AM](#) | [Reply](#)

This letter is in regards to Wellmark Blue Cross and Blue Shield's proposed rate increase for 2016.

Wellmark currently insures approximately 1.8 million Iowans however, only about 30,000 of those are receiving the high percentage of 20% or more.

Wellmark states that this increase is necessary to cover costs on higher health care usage by this "sicker" group of individuals. The discrimination that is being levied against this group should be of paramount interest to all concerned as it has essentially replaced the "denial of coverage" in which the Affordable Care Act was intended to stop. How is this any different?

As individuals, I believe we are at an extreme disadvantage in that it is now the law that you are required to have health insurance, even if you can no longer afford to pay for it. Let me share with you that I am a 54 year old housewife who currently has no medical problems and take no regular medications. In 2015, my family will pay \$14,634.60 for our health insurance; this includes myself, my 61 year old husband, and my 22 year old daughter. We currently have plans for the maximum deductibles.

Before the Affordable Care Act was implemented, my husband's only avenue for health insurance was HIP Iowa. Even though the coverage cost and deductible was high, it was still \$150.00 less per month than what his current coverage cost is.

The most efficient solution at this time would be for Wellmark to pool the individual and group policies together and spread the rate increases out overall. I do not understand why this had not been implemented, unless the goal is to discriminate against the individual policy holders by raising their premiums.

Who would have ever thought that your health insurance would cost as much as a mortgage payment; that you would not be able to afford a car; or you would have to get a second job just to cover the cost of this mandatory policy?

I ask you to deny Wellmark's rate increase for the individual policy holders.

220.  *Joan Kanne* Says:
[July 24, 2015 at 10:15 AM](#) | [Reply](#)

I already pay \$6,000 a year for my health insurance. And BCBS wants to raise it another \$60 a month, and considering my income, that is almost half of my income. I only use my insurance

for wellness, and that is it. I hope they say no to this increase, because \$6,000 is already way to much.

221.  *Bonnie Schmidt* Says:
[July 24, 2015 at 10:22 AM](#) | [Reply](#)

Please, please, please consider NOT raising health insurance premiums! I am insurance broke! I cannot afford a 21.7% increase on my premium! Not sure what I will do if my premiums are raised! Enough said.

222.  *Lucy Hough* Says:
[July 24, 2015 at 10:24 AM](#) | [Reply](#)

I am writing to protest the rise in of my health care premiums. At this time my premiums are paid at a quarterly rate of \$2,432.40. The increase they are asking for is 18.9% or \$136.49. If the increase is allowed my premiums will be \$2,568.89 quarterly for a total of \$10,275.56 a year plus my deductible of \$1000.00. My husband's premium is \$4,981.80 bi-annually for a total of \$9,963.60 a year plus \$1,500 deductible. If this increase is allowed for just the 18.9% our combined out of pocket cost including deductibles will be \$22,739.16. This is unacceptable for anyone to have to pay.

I have a chronic illness, ulcerative colitis, so for me to drop this insurance coverage isn't an option. Sometimes, I feel that I am over a barrel and they know it so they continue to increase my premiums as I continue to try to pay for the coverage. A substantial portion of our income shouldn't have to go towards our health insurance.

Wellmark needs to become more diligent so the costs are better controlled. I certainly don't claim to have all the answers but somehow, someday these large increases have to stop.

223.  *Craig Strother* Says:
[July 24, 2015 at 2:00 PM](#) | [Reply](#)

I have a notice here saying that Wellmark wants to increase my rates by 21.7%. If they keep up at this rates they will have doubled my premium rates in the last year. I am a farmer and this is going to put a squeeze on me and others in the same situation as me. If this is the way that insurance is headed then they need to provide consumers with a way to drop their insurance without having to pay the penalty. They Affordable Care Act is anything but affordable. If this increase goes through they will have raised my premium to \$635 a month, and I've never had an income increase of even 19%, how can they justify this?

224.  *Derek* Says:
[July 24, 2015 at 2:02 PM](#) | [Reply](#)

WHY DON'T WE HAVE A HC SYSTEM THAT INCENTIVIZES PEOPLE TO BE HEALTHY BY REWARDING THEM WITH LOWER PREMIUMS IF THEY ARE HEALTHY BASED ON THINGS THAT ARE PROVEN TO BE INDICATORS OF COST/DISEASE SUCH AS BODYFAT %, HIP/WAIST RATIO, WAIST CIRCUMFERENCE, BLOOD PRESSURE/SUGAR LEVELS ?? IF WE HAD A SYSTEM THAT INCENTIVIZED PEOPLE TO BE HEALTHY DO YOU THINK THEY MIGHT TRY IT ?? PSYCHOLOGY 101 – WHATEVER BEHAVIOR YOU REWARD YOU WILL GET MORE OF !! TRY IT, IT WORKS, EVEN W/LITTLE BABIES. THE SYSTEM WE HAVE NOW IS “TOTALLY BANKRUPT” AND WILL NEVER LAST. 10K BABY BOOMERS GOING ONTO SOCIAL SECURITY/MEDICARE DAILY UNTIL AT LEAST 2026 AND THE FEDERAL GOVT IS CURRENTLY OVER 18 TRILLION IN THE HOLE AKA INSOLVENT.

ANY INDUSTRY THAT HAS ENOUGH MONEY TO FUND THE LARGEST LOBBY IN WASH DC BY FAR (Pharma/Healthcare/HMO, the total lobby dollars spent between 1998 and 2012 was a staggering \$5.3 billion, or nearly three times greater than the second most generous industry: insurance, and well above Oil and Gas at \$1.4 billion, and Securities and Investment at \$1.0 billion. Is it becoming clearer why the US government has few qualms about unsustainable taxpayer funded healthcare spending, especially when there are so many current benefits accruing to the CROOKED politicians who see so many billions in benefits from passing lobby-friendly laws now AKA generous taxpayer funding, the bulk of which benefits the healthcare industry's bottom line)? THE SAME INSURANCE CROOKS ASKING FOR A 21% INCREASE IN MY PREMIUMS ARE THE SAME ONES WHOSE LOBBYISTS WROTE OBAMACARE(SCAMCARE) WHICH HAS CAUSED THIS WHOLE DISASTER. THE INSURANCE COMMISSIONER FOR THE STATE OF IOWA SHOULD FORCE THESE CROOKED GREEDY HEALTH INSURANCE COMPANIES TO PUSH BACK AGAINST THE PRICES THESE BIG PHARMA COMPANIES ARE ASKING FOR THEIR DRUGS. BIG PHARMA CONSTANTLY CRIES/WHINES ABOUT HOW THEY CAN'T LOWER THEIR PRICES BC THEY NEED MORE MONEY FOR RESEARCH/DEVELOPMENT ?? LOOK AT THE “PURE PROFITS”(NOT SALES) THESE COMPANIES HAVE MADE OVER A 10 YEAR SPAN ??

Big Pharma Pockets \$711 Billion in Profits by Robbing Seniors, Taxpayers 06/08/2013 5:12 am EDT

Here's an outrage that must be changed: Big Pharma has been systematically price-gouging the Medicare program for seniors and people with disabilities — and raking in billions in excessive profits. The 11 largest global drug companies made an astonishing \$711 billion in profits over the 10 years ending in 2012.

HCAN reviewed the last decade's financial filings from the 11 prescription drug giants: Pfizer, Johnson & Johnson, Novartis, Merck, Roche, Sanofi-Aventis, GlaxoSmithKline, Abbott Laboratories, AstraZeneca, Eli Lilly and Bristol-Myers Squibb. Even as millions of Americans struggle to afford their medicines and as Republicans in Congress threaten to cut seniors' benefits, these corporate behemoths have extracted \$711.4 billion in profits for Wall Street investors. The drug companies' annual profits reached \$83.9 billion in 2012, a 62 percent jump from 2003. The drug companies, of course, say they have no choice and need to charge outrageous prices to pay for research that enables them to innovate and develop new drugs that

save our lives. But that's not true. Half of the scientifically innovative drugs approved in the U.S. from 1998 to 2007 resulted from research at universities and biotech firms, not big drug companies. And despite their rhetoric, drug companies spend 19 times more on marketing than on research and development.

NOW DOES THAT SOUND LIKE AN INDUSTRY THAT NEEDS MORE MONEY FOR RESEARCH/DEVELOPMENT ?? ABSOLUTELY NOT !! I KNOW PEOPLE WHO WORK FOR BIG PHARMA COMPANIES AND THEY ALL ASSURE ME THAT IF THE PUBLIC KNEW HOW BAD THE AMERICAN PEOPLE WERE GETTING RIPPED OFF BY BIG PHARMA IT WOULD START A REVOLUTION IMMEDIATELY !!

Why do Americans spend so much on pharmaceuticals? Valerie Paris, OECD February 7, 2014 at 12:15 PM EDT

The United States spends almost \$1,000 per person per year on pharmaceuticals. That's around 40 percent more than the next highest spender, Canada, and more than twice as much as than countries like France and Germany spend. Prices in the U.S. for brand-name patented drugs are 50 to 60 percent higher than in France and twice as high as in the United Kingdom or Australia. That's because in many countries, government agencies essentially regulate the prices of medicines and set limits to the amount they will reimburse; they may only agree to pay for a drug if they feel that the price is justified by the therapeutic benefits. This centralized approach can also give them more bargaining power over drug makers. By contrast, in the U.S. insurers typically accept the price set by the makers for each drug, especially when there is no competition in a therapeutic area, and then cover the cost with high copayments(KA CHING !!).

DES MOINES — It took Wellmark Blue Cross and Blue Shield only about a year in 2007 to locate, assemble and buy a 6.6-acre parcel of land from nine owners for its new headquarters in this city's downtown. Next December, after 30 months of construction at a cost of \$250 million ??

I'm SICK N TIRED OF PAYING FOR THEIR NEW BUILDING ALSO BC I'VE ALREADY PAID FOR IT !! MY PLAN HAD 1/4LY PREMIUMS OF \$307 IN 2008 AND I AM CURRENTLY PAYING \$657. THAT IS A 114% INCREASE AND NOW THEY WANT ANOTHER 21% ?? WHAT WILL IT BE NEXT YEAR ?? I HAVE USED THIS INSURANCE ONCE IN 7 YRS BC I EAT RIGHT, EXERCISE, AND AM RESPONSIBLE FOR WHAT GOES IN MY MOUTH. 90% OF HEALTH PROBLEMS ARE DUE TO POOR NUTRITION/EXERCISE WHICH IS SOMETHING THAT ALL PEOPLE HAVE 100% CONTROL OVER AND THEREFORE PEOPLE NEED TO BE HELD ACCOUNTABLE FOR THEIR ACTIONS INSTEAD OF EATING SHIT FOOD/NOT EXERCISING(IOWA IS THE 12TH FATTEST STATE = PATHETIC) DUMPING THEIR ISSUES ONTO THE RESPONSIBLE PEOPLE THAT DO THE RIGHT THING. THIS COUNTRY IS IN MASSIVE TROUBLE BC WE CONSTANTLY REWARD BAD BEHAVIOR ?? PSYCHOLOGY 101 – “WHATEVER BEHAVIOR YOU REWARD YOU WILL GET MORE OF”.

I COULD GO ON FOREVER – IN SHORT, IOWA INSURANCE COMMISSIONER NICK GERHART NEEDS TO “GROW A PAIR” AND START REPRESENTING THE PEOPLE OF

IOWA WHO ARE BEING SCREWED ROYALLY/ROBBED IN PLAIN SIGHT INSTEAD OF CODDLING CROOKED HEALTH INSURANCE COMPANIES. PEOPLE HAVE VERY LITTLE DISCRETIONARY INCOME(2015: Crisis, 62 Percent Of Americans Are Living Paycheck To Paycheck) AND THIS IS A PRIME EXAMPLE OF WHY THE ECONOMY IS IN THE SHITTER(BC PEOPLE ARE GIVING IT AWAY TO CROOKS WHO DON'T NEED IT) !!

AND ANOTHER THING, IF THE CROOKED POLITICIANS WHO ARE SUPPOSED TO BE REPRESENTING US WOULD HAVE READ THE BILL(OBAMACARE/SCAMCARE) INSTEAD OF JUST SIGNING OFF ON IT BC THEY KNEW THEY WOULD GET A BIG CAMPAIGN CONTRIBUTION NEXT TIME AROUND WE WOULDN'T BE IN THIS MESS !! TERM LIMITS FOR ALL OF THEM IMMEDIATELY !!