

2019 Exchange Filings

Public Comments to the

Green Mountain Care Board

Comment Period: May 11, 2018 – July 25, 2018

(addresses and phone numbers redacted)

Name: Neal Smith
Date: August 1, 2018
Affiliation, if applicable: Taxpayer. Worker. Vermonter.
Town: Fletcher
Topic: Other

Comment:
Michael Fisher— what the heck is up. We NEED the advocate's voice at the table. MVP and BCBS are transparent; are you? How far are you willing to take this??

Name: NEAL SMITH
Date: August 2, 108
Affiliation, if applicable: Educator, Sr., Concerned Vermonter & American
Town: Town of Fletcher
Topic: Other

Comment: Michael Fisher banned? What the heck are you thinking, and have you no concern for the perception, the repercussions, to say NOTHING of Vermont and Vermonters?
Con Hogan is a VERY reasonable person. Did you hear him this morning on VPR?

Surely you've read Vt Digger:
<https://vtdigger.org/2018/07/26/margolis-health-care-board-a-puppet-of-insurance-companies/>

Fisher is the head of the Vermont Office of the Health Care Advocate.
That's not a state agency, but the Legislature created it and funded it to represent consumers.

So let's review: The board, a quasi-judicial state regulatory agency with the power to approve, modify or deny rate increase requests, receives from the companies seeking those increases formal motions to ban the testimony of the legislatively designated consumer advocate.

And on receipt of this motion, the state agency does not say, "Don't be ridiculous; this is why we have a health care advocate," but instead replies (in effect) "whatever you say, boss."

Of all the "western democracies", ours is a PAC and profit-driven farce in terms of funding healthcare. You all know this. And now YOU would deny testimony from Fisher?
Kevin Mullin et al--WHAT are you thinking?

Name: Gayle Poinsette
Date: July 28, 2018
Town: Plainfield
Topic: Health Insurance Rate Review

Comment: You people should be ashamed of yourselves denying Mike Fisher the chance to give his expert testimony as a consumer advocate. Your actions show that you really are in the pockets of MVP and BCBS. How dare you not listen to the people's advocate.

Name: Christina Koliander

Date: July 26, 2018

Town: Monkton

Comment:

Hello.

My name is Christina Koliander and I have lived in Monkton for more than 20 years. I grew up in Montpelier, so while I wasn't born in Vermont, I've lived 40 of my 51 years in the state.

I believe everyone has choices in life and everyone makes the best ones he or she can. I am a thrifty shopper yet we are given just two choices for health insurance in this state, MVP or Blue Cross Blue Shield. I'm relatively healthy, so for the past few years, I have chosen the Bronze plan. Yet a choice I did not make was receiving news that I needed a biopsy late last year. The end cost was more than \$5,000 out of pocket. So I had two choices:

have the procedure and pay the bill off incrementally or face a possible illness in the future. I am extremely lucky that my family was able to help me pay off the bill.

Every year I take a gamble and roll the dice of what the state of my health will be in the coming year. Yet I always wonder (and worry), will I be able to afford the costs if something comes up? Will I be able to afford the existing health insurance rate hikes? I am a hard working Vermonter with a full-time job who is very lucky to have health insurance through my employer. Yet even I have a hard time paying the astronomical increases that come every January.

I don't see my salary increased 5-plus percent every year, yet I find every year I have to pay more for my health insurance on top of out of pocket expenses.

In the past few years, the health insurance rates set by this Board have been increased nearly double the average cost of living raise in the United States. Vermonters are getting to the point that we can't continue to pay for astronomical health insurance increases each year. Last year MVP's rates were increased by 3.5 percent; if that trend continued, in just five years that equals 17.5 percent.

I implore this Board to consider the state's residents and the affordability and vote to not raise the rates to what both Blue Cross and MVP have requested.

Thank you for your consideration

Christina Koliander
Monkton, Vermont

Name: David Hills

Date: July 25, 2018
Affiliation, if applicable: Waypoint Management Services, LLC
Town: Middlebury

Comment:
July 25, 2018

Comments and questions to the Green Mountain Healthcare Board following the 2018 Rate Review Hearings of the two primary health insurers of Vermont, BCBS and MVP, respectively. Yesterday, July 24, I attended the bulk of the MVP Rate Review Hearing. I must admit, it was my first hearing of this kind, and going in, I did not think I held any real expectations. It was to be mostly a first-person learning experience for me. Yet, after it was over, I found myself feeling disappointed – indeed, like some expectation had not been met.

What I witnessed was an exercise between the GMCB and an MVP lawyer with an actuary arguing largely technical reasons for yet another health insurance rate increase for Vermonters. Perhaps this was by design. Perhaps the arguments for a “gut check” have already been made. But, in my mind, I thought I would hear more universal and common-sense arguments. It seemed as though this proceeding was very far down-the-line of acceptance by the Board – almost to the point of formality. I thought, “I must be late to the process. The Board must have already approved the ‘sniff test’ and common-sense arguments. I guess this is the time for the bean counters.”

So, here’s my comment:

Our tough little state - indeed our entire country - continues to be afflicted with continuously rising healthcare costs at a rate that significantly exceeds cost of living increases. Everyone knows it; everyone agrees that its unsustainable and unacceptable to the masses; most of us feel the high costs continuing to eat into our budgets; many of us simply cannot afford to insure ourselves and our families at these rates; and nobody seems to be doing anything about it. It’s like we’re all whining frogs in a pot of water being boiled by big money, big medical, and big pharma.
. . . and here’s my question:

Who’s going to throw a stake in the ground and say, “Enough!” Who’s job is it anyway? If not the GMCB, then who? What is it going to take to say, “NO! UVMMC does not need another building or an administration that costs \$15 million annually. NO! Our payers should not have to chase these outrageous costs. NO! Vermonters will not pay anymore for what should be a right to adequate health care. Time is up. Game is over.”??

Sincerely,
David Hills,
Middlebury, VT
www.waypointvt.com

Name: Dianna Jo, Palmer
Date: July 25, 2018
Subject: Blue Cross rate increase

Dear Green Mountain Care Board,

I hope that you seriously consider **not** to let Blue Cross increase their rates, especially by 7.5%. As a nurse at UVMHC, I still pay excessively for my healthcare. Last year when the insurance rates went up, I actually took a take home pay cut. Many of my coworkers are the same. Please, please consider all of the Vermonters who cannot afford to pay these increases either, and would actually go without insurance than to pay the rate hikes.

Thank you,
Dianna Palmer, RN

Name: Caitlin Gasser
Date: July 25, 2018
Subject: concern for insurance rate increase in Vermont

Hello,

I am a registered nurse at UVMHC and have BCBS health insurance. We are currently negotiating our contract where the hospital management is willing to give us a 13% pay raise over 3 years with 6% of that 13% coming from the pay scale and does not affect all members. So effectively a 7% pay raise over 3 years.

Hearing that BCBS wants to raise our premiums for 7.5% is extremely discouraging and unaffordable. UVMHC nurses and employees will not be able to afford health insurance. I urge you as the Green Mountain Care Board to not pass the premium raise.

We Vermonters cannot afford this! I personally am considering leaving the state due to wages and cost of living. If this passes, I may be forced to leave a state and city I love living in due to the fact that I cannot afford living here.

Thank you for considering,

Caitlin Gasser

Name: Debra Scarpinato
Date: July 25, 2018
Subject: Health insurance premiums

Good Morning

I'm writing in response to a flyer I saw from VT Legal Aid and Healthcare Advocate.

Please do not allow my policy premium through BCBS via UVMHC to go up. I have a family plan that covers 3 of us. We barely make ends meet as it is in a overtaxed high cost of living state. Please help. My husband and I make under 70k a year and pay 8k in Childcare cost. We can't afford it.

Please please stop this!

Thanks
Debra Scarpinato

Name: Lisa Johnson
Date: July 25, 2018
Subject: Blue Cross Blue Shield of Vermont premium increase for 2019

To whom it may concern,

I am a Registered Nurse at The University of Vermont Children's Hospital. The increase in insurance premium to 7.5% for the year 2019 is not realistic. Due to the poor pay wages at the hospital and the current conflict between the Union and the hospital regarding our current wages, a rate increase would more than swallow the current wage proposal. Vermont is becoming more and more expensive and families as well as our next generation are unable to live here. My fear is we cannot attract and maintain not just nurses but trade workers and new college graduates at any institution in Vermont. My family is considering leaving Vt because it is becoming more and more expensive and no longer affordable to live in this beautiful state. Please reconsider this unrealistic and expensive premium increase.

Thank you,

Lisa Johnson, RN
UVMHC
Vt. Childrens Hospital

Name: Lorie A. Marriott
Date: Date: July 25, 2018
Subject: Blue Cross/Blue Shield Insurance Premiums

Dear members of the Green Mountain Care Board:

I am writing to express my concern about the Blue Cross Blue Shield and MVP insurance premium rate increases of 7.5 and 10.5%. As a life-long Vermonter who has raised my family here, I struggle to survive in a State where the cost of living is raising much faster than my income. As a Registered Nurse in Vermont at UVMHC, I am unable to afford a home, car, or vacations of any sort on a single income. What about the others that are employed at even less income than mine? What about the students with student loan debt? Now I am faced with the raising costs of taxes, food, housing, and insurance that leaves my income level in the negative each year. This forces me to face the reality that I will have to leave this state that I have been a committed, devoted community member for my whole life for greener pastures. To go to where I can afford to retire and afford to live so that my income will sustain over my remaining years. I have worked my whole life here and now feel that I

am the working poor and will be facing poverty in a state that does not support my work ethic or community values. I still have a lot to offer this community.

This leaves me wondering, will I have to be without health insurance because it is what I will cut to be able to buy food or make my car payment? Will I be able to retire? Will I move now? These are serious questions. I urge you to consider my position.

Sincerely,

Lorie Marriott

Name: Christina K. Cotnoir

Date: July 25, 2018

Subject: Insurance Premium rate increase request

Hello,

I just learned that Blue Cross wants to raise individual and small business plan premium prices for 2019 by 7.5% and MVP Health Care wants an average increase of 10.9%. This is not affordable for rate payers and I want to express my strong opposition to approving these increases. The annual rate of inflation for 12 months ended January 2018 is only 2.1%!! With the cost of living in Vermont higher than the national average and yearly pay in Vermont **LOWER than the national average by \$7,765.00, I don't see how can anyone justify agreeing to this increase! This will only make Vermont less attractive to companies and those looking to relocate.**

We need to retain our young people and make Vermont a place people can afford to live. A health care advocate is needed at these meetings to ensure the voice of the ratepayer is heard.

Respectfully,

Christina Cotnoir

Name: Brita Fisher

Date: July 25, 2018

Subject: Additional Testimony

Dear Green Mountain Care Board,

Please find attached a written and recorded version of an expanded testimony. At the hearing yesterday I gave a few of the sentences in the middle, but I am now submitting the full testimony.

Please confirm receipt.

Brita Fisher

(public comment included attachments 1. Word file of testimony & 2. Audio recording of testimony)

Name: Ellen Schwartz
Date: July 25, 2018
Subject: Public Comment

Hello,

I testified at the public hearing last night but also wanted to send my comment via e-mail since I did not hand in a print version. I have edited my testimony slightly to reflect the news shared last night that Mike Fisher was granted party status at the MVP hearing on Tuesday. My comment is pasted in below.

Ellen Schwartz
Brattleboro

I am on Medicare, which means that I am not directly impacted by the insurance premiums charged to people who have the misfortune to be younger than I am. In this country if you're old like me you're deemed worthy of access to healthcare — well, at 80% of the cost in any case. I am speaking today because I cannot sit in silence just because I have the good fortune to benefit from a public health care program while others are priced out of the health care marketplace. That is our current reality, and these increases, if granted, will only intensify and extend the damage.

The real problem is that we have a health care marketplace at all. Health care shouldn't be treated as a consumer good — accessible to some but not to others. It is a need that we all have by virtue of being human. I am guessing that those of you on the Board, like me, can access care when you need it. As you consider these rate hike requests, I implore you to think about people in your lives, people you know and love, and ask yourself which of those people *deserves* not to have healthcare. To which of these people would you say, "Sorry if the premium is too high" or "too bad that you can only afford a high deductible plan"? I hope that you would never relegate someone you care about to that fate, and that, as a public Board, you will take seriously your obligation to *all* Vermont residents.

I am also concerned about the independence of the GMCB. Act 48 clearly states that the GMCB is an independent Board. I have been attending these hearings since they began and this year, for the first time, the office of the Health Care Advocate has been blocked from weighing in at *both* of the hearings. I am glad they were able to participate in the MVP hearing, but why not also the BCBS hearing on Monday?

How independent is the Board of the insurance companies? It looks like they get to call the shots about who counts and who doesn't. The only voice that the people of Vermont have is the testimonies you receive — which if I remember correctly from last year don't actually "count" since none of us have party status. Until this year we also were represented at both hearings by the Office of the Health Care Advocate.

From where I sit, it looks like the Board is *not* independent of the insurance companies. You are supposed to be a regulatory body but how can you fulfill that function if the the only body that represents people on the receiving end is not party to both hearings?

The Board you sit on was created by Act 48. The Board's first aim, according to that law, is to "improve the health of the population." That same law states that "systemic barriers, such as cost, must not

prevent people from accessing necessary health care.” Your board has both a moral and legal imperative to ensure that premiums do not stand between people and needed care. Ultimately, the solution, as spelled out in Act 48, is a universal publicly funded system of healthcare. I urge you to reject the rate increases and do all within your power to move us towards the full implementation of Act 48 with its promise of Green Mountain Care as a public system for every Vermont resident, so people never again have to come before this Board pleading for the basic human right to health care.

Name: Marc A. Stanislas
Date: July 25, 2018
Subject: Public Comment

Dear Green Mountain Care Board Members,

Attached is the presentation I briefly spoke to at the public comment session yesterday afternoon. Given the structure of the public comment session, it is understandable comments had to be kept brief. I worry there was not the opportunity to fully comprehend the benefits of the findings within the presentation and the opportunities it identifies which could service as starting point to providing much needed transparency for consumers, the general public, and any other interested parties?

A setting where there could be a sit down presentation allowing for an interactive conversation would serve this purpose much better. I respectfully request the opportunity for a sit down presentation to share the findings to allow the time necessary to fully comprehend and allow for an interactive discussion. There is much excitement about the possibilities and new levels of transparency these work efforts could generate to help inform the consumer and all interested parties in connecting the dots between the Commercial Insurance Rating process and the Hospital Budget Review process.

Thank you for this opportunity and consideration,

Marc

Marc A. Stanislas
Network VP, Treasury & Financial Services

(public comment included PowerPoint attachment)

Name: F Greenough Nowaski
Date: July 25, 2018
Subject: Health Insurance Rate Review

Dear Green Mountain Care Board ~~

I am very appreciative of Vermont Health Connect's service and management of my health insurance. I have benefited greatly from the person who helped me select what BCBS plan I could afford and helped prepare me for the sticker shock -- because I could JUST afford it!

For many years I consumed VERY little health care. Being generally without problems and prioritizing healthy choices for exercise, diet and recreation.

Of late, however, I have needed to work many part-time jobs some of which have a negative impact on my health and I have had to get serious about making appointments and trying to address some now chronic issues. And now, in addition to the co-pays, I have what for me are hefty bills to pay from my health care providers because I have a high deductible plan. Meanwhile, I have more appointments I should make, as well as preventative screenings to do such as a breast exam and colonoscopy.

My Vermont Health Connect bill is often the first thing I pay at the beginning of the month because it is so important. My income FLUCTUATES and this year 2018 is LOWER than 2017. The system has been responsive to income changes and that is soooo helpful! But I am still just managing and have overdue bills due health care providers. So I am writing you to PLEASE REJECT RATE HIKES. So many cannot afford them! I know I can't.

Some people have it worse than me. I know of more than one independent contractor, especially those in the building / physical trades who as part of their livelihood beat up their bodies. And while they pay their premiums, they DO NOT SEEK OUT NEEDED SERVICES because they CANNOT pay off their deductibles or co-pays.

What would be better is you all could put your heads together once again and FIGHT FOR UNIVERSAL HEALTH CARE.

Thank you for your consideration and good works. I hope for your wise and compassionate consideration for the working poor and just-managing neighbors who need affordable, smart and reliable health care.

Many thanks ~~ F Greenough Nowakoski

Name: Joanna Weinstock
Date: July 25, 2018
Subject: BCS/MVP rates

Dear GMC Board,

Why the heck did you not let Mr. Fisher, consumer advocate, testify about BSBC/MVP rate hikes? Your decision seems to evidence very poor PR on your part. I would even say the decision is outrageous. Whom do you represent???

Sincerely yours,

Joanna Weinstock, MD

(my affiliation is concerned long time citizen of Vermont, who invested my medical career in caring for Vermonters and not with intention of lining corporate pockets)

Name: Steven Kaplowitz

Date: July 25, 2018

Town: Burlington

Comment: This is another method of denying as many lower SES people from getting "Basic Healthcare" and each year a new idea comes along to disenfranchise even more from "Basic Healthcare". This is on top of the fact that most healthcare professionals, in my opinion, work very hard at providing as little healthcare as they possible can justify. Their highest and best talent is simply providing a "BAND-AID" approach to healthcare; oh, and getting more people addicted to opioids and other fascinating drug addictions. It is unfortunate that something so basic as healthcare has to made so ridiculously convoluted and maze-like. G-d bless, Steve

Name: Paul Bakeman, Jr.

Date: July 25, 2018

Affiliation, if applicable: Ex medicare exchange advisory board

Town: South Burlington

Comment: The proposed increases by BCBS and MVP are simply not affordable by Vermont ratepayers. Consistent increases in the cost of health care in excess of VT GDP, wages, etc. cannot be sustained. The administrative costs of our present insurance system on the part of both the insurers and providers cannot be justified. As an example, in my primary care physician's office there are more people (some of which are outsourced) handling back office administrative work than are providing healthcare to patients . This impacts the cost of healthcare which hopefully you can fix. Please take action to bring the insurance loss ratio of insurers in Vermont to close to European rates of about 6% for those countries that still use private insurance intermediaries in their health care systems.

It seems that doctors are either leaving or never entering primary health care because they can't afford the cost of bureaucracy of the present heart care system. Please address this problem immediately.

Thank you for your efforts on behalf of Vermont ratepayers.

Paul Bakeman

Name: Lisa H Stitt

Date: July 25, 2018

Town: Jericho,Vt

Comment: An increase in BlueCross/BlueSheild premiums affects all employees @ UVMHC. The lowest to midlevel wage- earning employees will be affected t most adversely. The Nurses, who have been ineffective in securing a fair contract, will be greatly affected by this increase. Why is it ok to offer bonuses and high salaries to the highest paid administrators and physicians? How can a board such as

yours condone this BC/BS increase without demanding that UVMHC offer a fair contract to Nurses? A contract that would cover this BC/BS premium increase would need to include pay raises that are double the amount that we nurses are currently requiring. Shame on all of you !

Name: Elizabeth Anderson

Date: July 25, 2018

Town: Cornwall

Comment: I appreciate the chance to voice my concern about health insurance rate hikes. We are new members of MVP. Previously I had BCBS COBRA coverage through my Michigan employer. I am concerned about the system that keeps insurers raising rates.

I have noticed that my providers send a bill to the insurers that push the limits of what they know the insurers are willing to pay. They submit for payment and wait to see their request denied and the corrected final payment.

The system is so broken!

I had a shoulder surgery in 2016 and the private surgical center submitted a 30K bill to BCBM (warning me that I would see it and should not be alarmed, that I would not be responsible for this amount) They KNEW that BCBM would only pay a fraction. But the game was to push and push and see the tolerance for pricing inch up. Insurance companies must not pass on this profiteering by some providers to patients. They should not tolerate it. We are not customers. We are sick or ailing and need health care.

BCBS and MVP are in service of the insured, or should be. Yet, the money they make is evident in the infrastructure (offices and buildings) and the salaries they pay top executives. Ratepayers (small business people like us) are already paying 7-27K per year to have health care (if they happen not to have employer coverage or qualify for what's left of the ACA) We can not afford a rate increase of the size proposed.

Name: Laura Hain

Date: July 25, 2018

Town: Bennington

Comment: I have MVP through Vermont health connect and get help with subsidies because I don't get paid enough at my job to pay in full for health care. If you increase it by 10.9% I def will not be able to afford it and would have to get a 2nd job. Which in turn then I would be making too much money according to your requirements and in reality I'm really not because I am giving the money to MVP. I then can't buy food or gas to get me to work.

This is ridiculous. I am begging you to not increase this because then I will be forced to have no coverage and then I will be penalized for not having it. The system is so backwards and messed up. The health care

system is suppose to be there to keep us healthy, not add more stress to our lives. Stress is the number one killer of people in the U.S. due to suicide, heart attacks and strokes.

Name: Brendan Tang

Date: July 25, 2018

Town: Brattleboro

Comment: I am a Vermont resident. I work as a cook, spending ten to twelve hours a day on my feet doing dangerous manual labor. In this industry there is little upward mobility. I can not expect my modest wage to increase at half the speed that Blue Cross Blue Shield and MVP expect to raise their rates.

In the past year I have had to take unpaid months off of work when my father was hospitalized and later died. My partner has had to drastically reduce working hours to undergo an intense and costly treatment for Lyme disease.

Our circumstances are difficult but not unusual. Illness and loss are unavoidable facts of life, but when combined with low wage and precarious work they can become backbreaking. As young working class Vermonters, my partner and I absolutely rely on our state subsidized healthcare to make it work in a rural state with few better job prospects. To approve these rate hikes would not only confirm that the state is deep in the pockets of the insurance business, and will serve their interests over ours—it will also force us to choose between groceries, rent, and doctor's visits.

In the same year that we lost my father, two of my coworkers, also in their twenties, had a son. This baby is curious, playful, and totally calm at the restaurant even at its noisiest and most hectic moments. We suspect he got acclimated to the sounds before birth, since his mother worked as a server up until a week or two before her due date. Unfortunately, between medical costs and what little unpaid leave the couple could afford to take, they got behind on rent and were served an eviction notice. As it stands, my friends and coworkers don't see much of a future here, and won't be raising their family in Vermont. I'm sure they would feel differently if Vermont were to treat healthcare as what it truly is: a human right, not a commodity. Vermont has the opportunity to lead the rest of the country forward in the struggle for health justice, starting with implementing statewide universal healthcare, free at the point of service as is already required by law under Act 48 and going further to recognize food, housing, and paid family and sick leave as healthcare. This progressive vision is what would make it possible and desirable for people like us to stay in Vermont for good (not grants for a handful of tech workers' staycations) and moreover it is the only sensible and moral vision of healthcare in the richest country in the world."

Name: Christine Birong-Smith

Date: July 25, 2018

Town: Lincoln

Comment: My husband and I pay very high premiums for insurance through Blue Cross Blue Shield and have a very high deductible plan. Though we have insurance, we are afraid to use it. Although we have insurance, every time we go to use it, we are inundated with medical bill after medical bill to cover the premiums. We do not get anything for the money we spend. It is catastrophe insurance, not health

insurance. We can't take care of ourselves. For instance, my husband broke his collar bone and a rib last year in an accident. We paid out of pocket well over \$2000 for everything regarding his recovery because we didn't meet the deductible. We pay into this system, and we get nothing in return.

Name: Lois Flanders
Date: July 25, 2018
Town: East Montpelier

Comment: I am what they deem as "working disabled." For a time I was able to stay on Medicare/Medicaid. But with my increase in full time wages I had to switch to what the cooperation I work for has for insurance. What does it mean to have a \$2000 dollar deductible? For me it means paying more for my medications and avoiding doctors at all cost. Even with the previous benefits I became sick and went on a unpaid family sick leave. Because of the time of no income Medicare continued to withdrawal automatically their monthly amount. When out of the hospital I had weeks of struggling to make ends meet.

Finding work where I could to pay for my car, meds, and then Medicare kept attempting to withdraw what I owed them causing great stress on an bank account that barely had funds. I lost those benefits and then accumulated large sums of debt still having to go to appointments. Instead of concentrating on my wellness I was stressed with medical bills piling up. I still have that debt and I still don't go to doctors appoints except when I need to. If insurance companies are hurting I fail to see how. We in Vermont need a clearer plan to take care of Vermonters without gouging our pay checks. Mine is one of many stories that need to be addressed in Vermont and nationally. Thank you for your time. Lois Emily Flanders

Name: Nathan Bacon
Date: July 25, 2018
Town: Montpelier

Comment: As a young (26), year old male I recently had the shocking awakening to the costs of healthcare coverage when I turned 26 in April and lost my healthcare coverage.

I am healthy, active, have no pre-existing conditions and am a non-smoker. One would think this would give me access to a reasonably low cost healthcare plan that would give me some semblance of coverage. Much to my dismay I was quoted a nearly \$450 a month premium for a "catastrophic plan" which also carried a deductible of \$4000. A plan that actual gave me coverage in which I could regularly see a doctor without having to sell a kidney to afford it were as high as \$680-750 per month!

I currently make \$48,000 a year before taxes working as the facility engineer for a food manufacturer. That's pretty good pay and enough to exclude me from medicare. But to think that in order to get coverage I should be paying out nearly 10% of my income, plus another roughly 8% in deductibles should I actually need to use that coverage, is asinine. As you imagine I no longer have healthcare due to the cost of coverage. What would the point be if I would no longer be able to afford to pay-off my student loans, put a roof over my head, afford a car to get to my job, or put food on the table.

I am also an individual who has begun the transition into being a steward of Vermont's farming landscape and culture as I recently started a farm this year while still working full-time elsewhere to pay the bills. As if starting a diverse, ecologically minded farm isn't hard enough financially I am forced to work day in and day out with no healthcare coverage. Working on a farm is risky work. Frequently using heavy equipment, constantly moving, carrying things, building things etc. The added stress of knowing I am one slip-up or mistake away from likely needing to file bankruptcy is unnerving.

First off we must oppose these rate hikes. For many I am sure the cost of healthcare is already a substantial burden likely putting them financially on edge. There are also many people like me who forego coverage completely due to the inability to pay for coverage. That said we MUST move to a single payer healthcare system that treats healthcare as a right and public good. It's a good idea for the public, for small business, and for farmers both in Vermont and across the country.

Name: Stephen Baietti
Date: July 25, 2018
Town: Shelburne

Comment:
Dear Green Mountain Care Board:
One Hundred percent of Vermont residents depend upon your board. Please treat health care as a human right just like clean air and water. Lets now take big steps away from insurance companies and establish Primary Care for All. Insurance companies are unnecessary middleman money skimming operations. Be courageous and confront the insurance industry.

Sincerely yours,
Stephen Baietti

Name: Alice Leeds
Date: July 25, 2018
Town: Bristol

Comment: As a breast cancer survivor I have witnessed what happens to those who cannot afford the rising cost of health insurance. It was the young and lower income member's of my support group who were not able to access care in a timely fashion, and the consequences were dire. Rates should not be raised to increase profits. That is immoral.

Name: Shaun Stephens
Date: July 25, 2018

Town: Montpelier

Comment: My silver plan through BCBS costs me \$4,200/yr, and my employer \$9,500/year for a total of \$13,700 per year, and I receive nothing from it. I have never gone above the giant deductible, so for the past 5 years that I've been at this employer, BCBS has received \$68,000 from us and provided nearly nothing: one physical. When I've been injured or sick, I have had to pay for that out of pocket.

Name: Julia Blake
Date: July 25, 2018
Town: Jericho

Comment: For heaven's sake, please do not allow the insurance companies to raise their rates yet again. Health care should be a right for people - healthier people make better citizens. For-profit companies and the UVM Medical Hospital are paying executives far too much. We're all in this together. Help people afford healthcare!

Name: Deborah Kirchwey
Date: July 25, 2018
Town: Brattleboro

Comment: Health insurance rates have skyrocketed during the 17 years I have lived in Vermont. We pay more and more, and have higher and higher deductibles. This is unsustainable! Most of my partner's paycheck goes to cover our premiums. No one should have to work a full-time job JUST TO PAY FOR HEALTH CARE. But we do. The wealthy may be able to afford it, the poor get a subsidy, but those of us in the middle are in a bind. I cannot be there in person but I urge you to consider the cost for working Vermonters who are not eligible for a subsidy and have to pay these incredibly high rates out of our hard-earned wages. Give the people a break. No increases next year. Rates need to go DOWN, not UP.

Name: Shelley Sparks
Date: July 25, 2018
Town: Brattleboro

Comment: Please hear us. Many people, especially seniors, live on fixed incomes. Quality of life goes down every year while costs keep going up. It's hard enough to pay for medications and heat alone. Seniors have contributed all of their working lives. Many move out of VT in order to find more affordable living. Too many hands are always in our pockets and we need someone to help look out for us. Thank you.

Name: Brita Fisher

Date: July 25, 2018

Affiliation, if applicable: Vermont Workers' Center

Town: South Burlington

Comment: Over the last 2 years that I've been working in Vermont I have been on a Blue Cross Blue Shield plan. I have been able to afford the rate hikes. I come from a background of privilege through absolutely no merit of my own, or anyone else's for that matter, by virtue of a financial system that exploits, dispossesses, slashes and burns. On a personal level I am working to redistribute the resources to which I have access. It is abundantly clear to me that the healthcare system is complicit in the ever-increasing economic divide. The system does not work for all and is not affordable if those with access to wealth are the only ones who can afford care. As I work to redistribute the wealth I've been given in pursuit of a more just and equitable world, I also fight to hold agencies like the Green Mountain Care Board accountable to creating a system that cares for all people. Under a publicly funded plan, I believe I would pay more than I currently do, but I would be paying into a system that took care of everyone in Vermont equitably, not one that sought profits from regressive hikes designed to make more money for the insurance companies at the direct expense of peoples' lives. It is uncomfortable for me to talk about this because of my own family's complicity in the current economic system, but I believe it is crucial to acknowledge that privilege comes at the cost of poverty.

I ask the Board today to consider the factors driving up rates. It's a simple question: what is more important, growing the profits of the insurance companies or the health of Vermonters? Under Governor Shumlin's own plan we saw there was enough money to fund healthcare for all. This choice before you is a moral one, make no mistake. The function of the Board is to ensure the adequate provision of healthcare in Vermont and to ensure the transition to publicly funded universal healthcare.

We sit here today in a room far away from the hospitals where nurses fight for safe staffing against the same profit based system (and the GMCB should be as dedicated as they are to fighting for Vermonters' right to equitable care: it's your responsibility, in fact). We are far from people actively receiving care, but we are not far from folks sacrificing everything to fight for their lives; you've heard several of their stories tonight.

Human lives lived in dignity. That's what healthcare is. That's the consequence of your decision in these hearings, the cost of your financial choices to put profits, not people, first. It is YOUR decision whether my friend can afford the vital therapy needed to prevent long-term damage, YOUR decision if someone close to me will spring for a potentially life-saving test because the premium on the Blue Cross Blue Shield Vermont's bronze-level plan is already so expensive, despite its high deductible.

The impetus should not be on individuals to hope they know someone who can help pay for care. It is on you to scaffold a system where we all rely on each other, where we pay what we can and get what we need, where we put taking care of each other as the highest priority. We all know that's not the system we have right now.

I unequivocally oppose the insurance rate hikes. If private insurance is not affordable for all, and it is not, then it is not affordable, full stop.

Healthcare should be a right and public good, not a commodity. We can quibble about the exact definition of the word "affordable," and indeed the insurance companies' lawyers would like us to do so. But, I hope we can all recognize that when healthcare costs are the number one reason for personal

bankruptcy filings in the US, when so many have to choose between care or medication and other necessities like food, rent, and electricity, something is deeply wrong.

Perhaps all of this seems to you a theater of pathos compared to the logos and ethos provided by the testimonies of the insurance companies. Maybe it's easy to dismiss personal accounts on the basis of being emotional. I assure you that I do speak with emotion and I hope you, too, are affected by the gravity of the stories you hear today. I ask you to pull down any barrier in yourselves that you might have erected to differentiate yourselves from us. Who among you has never needed healthcare? Who among you has never worried about the health of a family member or friend? But I also want to ask: Who paid for that care, and where did the funding come from? If the answer is private insurance, what factors made it affordable, and are those factors accessible to all? And, who among you can produce the numbers to claim that the profits of citizens are rising at the same level as the profits of the insurance companies?

You continue to ACTIVELY protect rate hikes at a level that you know has nothing to do with the fluctuations of salaries in Vermont. As the lowest-rate plans become more expensive and cover fewer and fewer services, it is all of our responsibilities to step in and ask questions. That's what we're doing today, that's what your role should be too. Where does the money go? Who receives protections and profits? If you believe that acquiescing to the insurance companies' demands and their false narrative of "increased hospital utilization" and denials of complicity in rising pharmaceutical costs makes you protectors of the care Vermont citizens receive, think again: I've seen your track record at these hearings.

Shaving off a fraction of the hikes they request does not absolve or redeem you.

I want to emphasize what someone else mentioned: the level of empathy, accountability, and responsibility you would feel for a loved one who couldn't make ends meet because of healthcare costs, or who became seriously ill because they couldn't afford care, should be the same standard with which you consider the cases of every person in Vermont. That is what you've been entrusted to do, that is what we are entrusting you to do. The insurance companies are betting you won't. Look carefully at the choices you make: whose interests are you protecting? Who will YOU put first?

Sometimes it feels like we are powerless as individuals to change the course of things. But, as you go home tonight, as you consider what you've heard today, remember that you have the power here to make an active choice. Indeed any course of action you take will be a choice, and it is no hyperbole to ask: will you choose to protect the very lives of the people of Vermont, or the fiscal interests of companies (BC/BS VT, MVP, UVM Health Network, the pharmaceutical companies) who continue to compete to see who can make the largest profits off of the people who can least afford it?

Name: G. RICHARD DUNDAS, MD, FACP

Date: July 25, 2018

Town: Bennington

Comment: At the top of the page is the question "How are my health insurance rates set?" The answer seems to be "The GMCB determines your rates after listening to the slanted testimony of BCBS/MVP and excluding the citizen's advocate, Mr. Fisher."

Name: D. Cotnoir
Date: July 25, 2018

Comment: I am writing to urge the Green Mountain Care Board to NOT change the premium prices for 2019. Personally, this inflation will greatly effect my family. My husband and I are lucky to get a 1-2% raise each year, to think that our BCBS premium will increase 7.5% will cause a financial burden. We are both active members of our community working in both the public school system and the hospital. This is an extremely large increase, and unfair for many hard working Vermonters. Insurance premiums should be affordable and accessible for all, and not hinder other aspects of life such as a families ability to provide food or housing. Increasing premiums will move us farther away from healthcare for all and cause more harm than good. Please consider these valid concerns from your Vermonters!

Name: Jill A Tofferi
Date: July 25, 2018
Town: Proctorsville

Comment: It is unconscionable and a travesty that this board is considering the approval of a rate hike!

Previously to 2012, and for 32 years, I had USPS Health Coverage which included Eyes and Dental. Because of divorce in 2012, I was able to sign-up with Catamount for one year. Then that was superseded by VTHC - my only choice for health insurance. (Health insurance is not offered by the non-profit by whom I am employed.) The cost has gone up I believe close to 100% from 2012 - current. For what? The coverage has significantly decreased and copays have significantly increased.

I began with the Gold plan and now the lesser Silver. I rarely (fortunately) need to seek medical help. Good thing, because the balance owed is generally outrageous considering I pay annually almost \$6000. (Yes, that is with a small reimbursement)

So, an increase you say - looks like I may need to put my health care at risk and go down to bronze! Is that fair when the insurance and pharmaceutical companies are allowed to have such large margins on product/service mark-ups with CEO's and Boards, for some, exorbitantly paid?

I wish my salary would increase say 25% and I would be happy. But, alas, it is Vermont (which I love!) and salary increases here are more like 1-2.5%. Because grant writing among my job duties, I am well versed in the Ludlow demographics. Not a hopeful picture when, for the last 6 years our student population is 70% -80% (depending on the specific year) eligible for Free & Reduced Lunch - a Federally & State reported statistic that is used for many reasons, I use in my grant writing.

I hope that this board really does consider the welfare of families and individuals and the impact on communities when considering yet another rate hike!! It is the right thing to do. You should be bargaining for Vermonters:
NOT corporations.

Thank You,

Jill

Name: Betsy Austin
Date: July 25, 2018
Affiliation, if applicable: UVMMC
Town: Essex, VT

Comment: Please reconsider the increase in BCBS premiums, 7.9% is unrealistic and a financial hardship on many Vermont families. Health insurance should be a human right and not so expensive that people have to choose between the premium and food. No pay has been increased NEARLY that much, if any increase is warranted it should not be more than the cost of living.

Name: Ethan Parke
Date: July 25, 2018
Town: Montpelier

Comment: Your decision to exclude testimony by the public's advocate is wrong. The affordability of health insurance is the key issue in the rate hearings. If insurance is no longer affordable for individuals and employers, then it is the Green Mountain Care Board's responsibility to do something about it. You can no longer take the position that hospitals charge what they must and insurers merely set rates to cover those charges and remain solvent.

We have more and more of a vertically integrated monopoly in health care today, where the hospitals, the insurance companies, and the ACO collude to keep their coffers full, to pay their too numerous administrators luxurious salaries, and bankrupt the average Vermonter. The Green Mountain Care Board is the only entity we have to fight back against this trend and excluding the testimony of the public advocate reveals a shocking disinterest on the part of the Board toward the views of the public.

Name: Joyce Touchette
Date: July 25, 2018
Town: Burlington

Comment: We are small non-profit that offers MVP health insurance benefits for our employees. A rate increase of 10% would mean we would have to find an additional \$30,000 in our already tight annual budget. The staff, most of who live in Chittenden County, can't afford to absorb an increase in fees of this size either. Increases are to be expected, but MVP's request will put undue hardship on small organizations like ours.

Thank you for allowing us to comment on this matter.

Sincerely,
Joyce Touchette

Name: Mariah McGill
Date: July 25, 2018
Town: Waitsfield

Comment: I purchase my insurance on VT Health Connect and oppose the rate increases. Every year, the rates go up while the insurance covers less and less. I have paid almost 20,000 dollars in health insurance premiums over the past four years and am still hit with high co-pays and deductibles when I actually need health care.

The direct result of ever-increasing health insurance premiums has meant that my family has not been able to scrape together enough for a down payment on a house, or saved for retirement or college costs for our child. Please reject this increase.

Name: Arthur Hendrickson
Date: July 24, 2018
Subject: comment on blue cross raising rates

This comment is from Arthur (NOT LINDA) Hendrickson in Moretown, VT: Having had some health issues in the last year and seeing what is charged I am making a comment on Blue Cross asking for a rate increase. The GMCB has allowed two of the largest, if not the biggest, "non-profits" in the state (UVMHC and Blue Cross) make too much money far too long. These monopolies are ruining the state. Both need to be brought under control. Please do something about it. Not only deny the BC increase, lower what both "non-profits" are allowed. AH

Name: Beth Kamhi
Date: July 24, 2018
Subject: healthcare rate and affordability

Dear Board Members,

I see that the state healthcare advocate was barred from the recent rate hike hearings. Since, we the consumer, are not being represented by the designated advocate, I feel compelled to represent my own interest directly.

It is not possible to attend your public forums as I have to work to be able to pay my expenses. If I understand it correctly, the BCBS proposed rate hike is 7.2%, which is 4.7% when applied to the Silver plan accounting for subsidies.

I am one of your many constituents that do not get subsidies of any kind. I purchase the Bronze plan for \$484.56 per month currently and I under utilize healthcare services to be able to carry any health insurance at all. Each time these rates rise for a product I essentially cannot use I have to reconsider having health insurance. At the rate you are going I will have to become uninsured even as I age and become more likely to need such services before reaching Medicare eligibility a few years from now.

Please consider the many of us, who are caught in the middle of the current system. My income goes down as I age and the rates go up. I will be forced to make a choice between a rock and a hard spot. Then the system at large may bear significant costs if something happens and I am forced to seek medical care.

I understand the need for insurers to fund reserves. Please consider that I cannot fund reserves of my own with these kinds of costs. I run a monthly deficit and "rob Peter to pay Paul" each time I make this insurance payment, as I am doing again this Thursday July 26th.

The least you can do is allow the testimony of the experts assigned to represent consumer interest. I strongly resent the infiltration of cold, calculated strategies intended to suppress our voices in the operations of government entities such as yours.

Name: Linda Andrews
Date: July 24, 2018
Subject: Public Comment

Dear Board,

I am very concerned about the increase in insurance rates that are now being discussed. I am worried that this will be unaffordable for many people and businesses. It will have a grave impact on the health of Vermonters who will then not get insurance and will not then seek health care when necessary.

Mike Fisher is our advocate and it is important for him to speak on behalf of all the citizens of VT. Please let him do his job. He knows how this will impact many Vermonters.

Thank you.
Linda Andrews

Name: Anna
Date: July 24, 2018
Subject: Rate increases

Anna called the GMCB general phone number and left a voicemail to share a comment regarding the rate increases. She is a clinical social worker in Montpelier and is disappointed the Health Care Advocate was not allowed to testify at the hearing on behalf of Vermonters. The rate increases are a concern to her after past increases.

Submitted by phone

Name: Robert Oeser
Date: July 24, 2018
Town: Brattleboro
Topic: Health Insurance Rate Review

Comment: To my great dismay, I just learned that (1) the GMCB upheld the motion of one of the parties to exclude the testimony of the state's designated health care advocate from hearings this week on rate changes and (2) declined to issue a timely written opinion for the ruling.

This is egregiously non-transparent conduct that is clearly not in the public's interest and undermines any trust that the public might have had in the Board.

I urge the Board to adjourn the pending rate review hearing to take time to deliberate and reconsider it's position and/or make it's reasoning clear to the citizens of Vermont.

Name: Kai Mikkell Forlie
Date: July 24, 2018
Subject: Public Comment

I just read the following article which reports that the GMCB ruled in favor of the health insurance industry to ban the public's consumer advocate from providing testimony on affordability:

<https://vtdigger.org/2018/07/23/consumer-advocate-barred-insurance-rate-hearing-state-wont-say/>

The optics of this decision are horrible and as a member of the public who regularly takes it on the chin from the out-of-control healthcare insurance industry why on Earth would the Board ever think it is a good idea to limit the testimony of anyone, let alone a professional like Mr. Fisher? I demand that his testimony be heard and that what he has to say be factored into your decision making.

Respectfully,
Kai Forlie
Burlington, Vermont

Name: Seth Maciejowski
Date: July 24, 2018
Topic: Health Insurance Rate Review

Comment: You must allow Mike Fisher to testify on BCBS/MVP rate increases. There is no justification for year over year rate increases with increases in deductibles and reductions in coverage given the inflation rate overall is so low. On the present trajectory, few families in Vermont will be able to afford health insurance within the next 5 years. The Care Board is the only recourse for

average Vermonters to contest what is essentially a monopoly held by two insurers. Thanks for your consideration!

Name: Kimberly Rockwood
Date: July 24, 2018
Subject: BCBS Rate Increase

Comment:
Hello,

I am writing to give comment to yet another large yearly rate increase request from BCBSVT.

Every year BCBS requests a sizable rate increase, and every year they are granted one. I did not, nor does anyone else I know who lives in VT, receive an automatic pay raise at work that would help offset the yearly increases incurred by health insurance companies in this state. As we have to choose between one of only two insurances offered in VT, we have no recourse but to keep making these already exorbitant monthly payments.

When I was still in the working world, I had to work more than one job to be able to afford both rent (already unaffordable in this state) and health insurance. Now that I am retired, on a fixed income but not yet eligible for Medicare, my insurance bill of \$567/mo is even more than housing costs. That's not taking into account the large deductible required to get this "reduced" rate.

Please, please do not keep automatically granting an inflated rate increase year after year after year. It has to stop somewhere, and the working (and non-working) Vermonter's income simply isn't able to keep up!

Kimberly Rockwood

--

As aye,
Kimberly Rockwood

Name: Eilis O'Herlihy
Date: July 24, 2018
Town: Northfield
Topic: Health Insurance Rate Review

Comment: I am writing to express disappointment that Vermont's chief consumer health care advocate was not allowed to testify at the hearing yesterday to address rate increases for Vermonters. This feels like censorship and bullying by corporations that do not have Vermonters best interest in mind.

Name: Carol R. Heffer
Date: July 24, 2018
Subject: rate increases

Comment: Personally this will not affect my insurance, as I am presently on Medicare. I do, however, work as a therapist in the area and it will affect my clients.

I don't believe people can tolerate another increase in their health insurance. The rates have steadily increased as have the copays and deductibles. The system is not working. We need a better solution than raising rates.

What happened to single payer?

Carol R. Heffer, LCMHC

Name: Kathryn DeBari
Date: July 24, 2018
Subject: Rate hearings and Mike Fisher

Now I know that the Green Mountain Health Care Board is really not impartial and not operating in the best interest of Vermonters. You need to admit Mike Fisher's report and let him testify. I have thought that your actions for a long time have favored the insurance industry and now I know it for sure. Please reverse your decision in order to insure that rate payers can be heard.

Name: Jaqueline Hawks
Date: July 24, 2018
Subject: Increase in Health Insurance

An increase in health care costs would be very difficult for my husband and myself to handle. I have worked at UVMHC for 26 years as a secretary and believe my insurance costs have gone up every year. I maxed out of salary increases years ago. Cost of living in Burlington is getting harder & harder to live with. Please do whatever you can, to NOT increase our health costs.

Sincerely,
Jackie Hawks

Name: Debbie Landauer
Date: Date: July 24, 2018
Subject: Public Comment

Dear Green mountain care board,
I am absolutely furious that you are barring the consumer health advocate from testifying at the rate increase hearings for Blue Cross Blue Shield of Vermont. How dare you! It seems to me this is some bogus, trumped up legality that Blue Cross Blue Shield is promulgating in order to maximize the profits

of their already overpaid upper management at the expense of thousands and thousands of Vermonters and small businesses in Vermont who have to pay they are inflated out rages premiums for sub par insurance coverage. And you're going along with it... Why???

I feel you are failing to do your job. If you cannot perform your duties in a fair and balanced way you should resign.

I can't imagine any reason that actually makes any sense at all that you would bar the consumer health advocate from being a part of these hearings. Are you getting paid off by Blue Cross Blue Shield? Then it would make sense.

Name: Anne E. Taylor
Date: Date: July 24, 2018
Subject: Health Insurance

Hello,

I have Blue Cross Blue Shield of VT health insurance. The premiums are high and the deductibles ridiculously high. I feel that I have to buy insurance in case I have a heart attack, a stroke, or am in a car accident, because I do not want to spend all the money I have for my retirement; but as far as regular preventive care, I do not go to the doctor. There are always tests for which I have to pay out of pocket after paying large premiums. The tests diagnose things that would not have been treatable twenty years ago and I am not sure that treatment actually does any good. I feel that I am caught between the insurance companies and the pharmaceutical industry. The latter keeps creating drugs that may or may not do any good. There is usually little data. An example is the change in the glucose score before diagnosing pre-diabetes which may benefit people, but I suspect really only benefits the sellers of the drugs. If people will not change their destructive habits I don't see why health insurance companies should have to foot the bill. I have completely lost faith in the health care system. Payment for services is absurd. Also, a 7% plus increase? For what? Why are the costs up that much? Nothing else is, least of all wages.

Anne Taylor
Middlebury, VT

Name: Jennifer
Date: July 24, 2018
Town: Milton

Comment: This proposed increase by both BCBS and MVP is no way any more affordable this year than the increase last year. People's income and small business revenue cannot keep up with these increases. For individuals it takes away money that would be spent at small businesses and services which then decreases the amount of income small business makes to be able to offer or provide a health care plan to their employees. This is a nasty circle of profit and greed on part of insurance company's and a fiscal irresponsibility on part of the board and the State. This program is not working and is driving people to move out of Vermont (me included) and not attracting any middle class people or new business to the state. It is an embarrassment and completely ludicrous to allow this year after year. No ones income is

seeing anything close to be able to continue to meet the rising cost of everything having to do with day to day living and now healthcare will continue to make people choose between going without food or shelter or basic necessities in order to pay for insurance that is not giving them anything more. The board needs to demand more from the insurance companies and better rates and open up more options to people and small businesses.

This is not "just business", this is affecting human beings young, old and inbetween and preventing choice and opportunity. So much for the great state of VT and the Green Mountain Board, you have failed and continue to fail in making healthcare for middle class affordable. This is the obvious problem, there are many different layers and problems with "the system"

but maybe if those in charge and those on the board dealt with the obvious and recognized the basics, then maybe something could be done to change things in better financial direction. Start with the insurance company's but don't give in and demand better and when you don't get it, look elsewhere. Work hard for better results, don't give in and don't get walked all over because getting walked all over has occurred for Vermonters and the trickle effect will continue until it affects absolutely everyone and ruins the entire State. Good luck.

Name: Robert Oeser
Date: July 24, 2018
Town: Brattleboro

Comment: I had submitted this comment on the general comment page, but perhaps it is more appropriately posted here: Tx

To my great dismay, I just learned that (1) the GMCB upheld the motion of one of the parties to exclude the testimony of the state's designated health care advocate from hearings this week on rate changes and (2) declined to issue a timely written opinion for the ruling.

This is egregiously non-transparent conduct that is clearly not in the public's interest and undermines any trust that the public might have had in the Board.

I urge the Board to adjourn the pending rate review hearing to take time to deliberate and reconsider it's position and/or make it's reasoning clear to the citizens of Vermont.

Name: Kelci Gibbard
Date: July 24, 2018
Town: Jericho

Comment: I am concerned about the potential insurance rate increases. This will place an undue burden on employees and owners of small businesses.

Asking consumers to pay more is going in the wrong direction- we need to make healthcare available and affordable to ALL vermonters. Is there any way to place limits on the profits of the insurance companies and their executives?

It seems as though we are all shouldering the burden in order to get them more bonuses and profits. While we are at it, can we talk about hospitals maintaining non-profit status while their executives make exorbitant salaries and record profits? Maybe investing these record profits into the staff and ensuring that all employees have a livable wage can help alleviate some of the burden on our healthcare system as well?

Name: Lisa Brugger

Date: July 24, 2018

Town: North Ferrisburgh

Comment: I get BCBS silver plan through VHC. After the last price hike I thought my subsidy would make it affordable but it is now not affordable.

My husband has leukemia and is thankfully on Medicare. Our medical expenses are still a large part of our income. I will no longer be able to pay for this policy and I'm stuck with it till the end of the year. Do not allow another rate hike please.

Name: Jenniflower

Date: July 24, 2018

Affiliation, if applicable: Mental Health Worker

Town: Warren

Comment:

Dear People Of Power,

I do not understand how it makes sense to raise anymore costs for health insurance. I work full time, live pay check to pay check and I am a single parent I continue to pay off my doctor and emergency room visits from last year. I cannot give you all any more money! My daughter would like to go to college! I'm still paying my student loans! Enough is enough. Human beings deserve better treatment and resources to be in good health. I was better off living on welfare! Make it stop...

Name: Vicki D. Ward

Date: July 24, 2018

Affiliation, if applicable: 30 year Nursing background, Doctoral level education, background in community/home health/primary care/psych-addiction

Town: Barnard

Comment:

Good Day to all,

I think it is time to consider the truth suggested by Ms. Paula Schultz, a BC actuary, that 'rates can only be unaffordable if the underlying cost of care is unaffordable". I believe the time has long past that health care is affordable. With 30 years in the business, this medical industrial health complex is not

about health care, but about money/privilege/fear. Since the global economy expansion of the 1990s, the US can no longer afford this ridiculous mega-industry.

Managed Care of the 1990s, bringing in MBAs (whose mission is ALWAYS more money-for themselves!) and more paraprofessionals to healthcare of all types from typists to upper echelon pals who need 'good jobs', has done nothing but escalate costs profoundly. It is time to rid ourselves of the medical industrial complex and begin paying only folks whose hands on work comprises health care for all US folks. Nurses, Doctors, pharmacists, techs who run machines, folks who keep medical machines running, lab personnel stay. All the rest drop away. No more insurers, no more money draining moment by moment bankrupting, fearmongering, and destroying all hope for a humane system for all. Folks will have to be taught how to use such a system, as we have let the 'safety net' of the US erode so far that the sense of 'profound 'pain and neediness' that many feel has to be acknowledged and property assauged.

You might ask the state and federal folks to consider a 'jobs' program or the economic pain might cause some anarchy. But it seemed to bother so few of the state or federal folks when in 2008 the banks, corporations (who had stolen windfall retirement funds from so many Americans), and mortgage companies who destroyed the fabric of US home ownership. These formerly employed folks might find actually doing things, like repairing bridges, roads in the US, helping create high speed rail. improving water lines, cleaning up PFOA, lead contamination, solar installation and all other infrastructure that has been so long neglected ... to be rewarding! Useful! rather than meetings, typing, data entry, gossiping, creating self important papers and reasons why they should once again be paid MORE.

I never forget the many times NPR quoted Washington DC folks stating in the 1990s that the global economy was going to bring tremendous economic change to the US. And, what did we do? Too little, too late, as we so often do..

We do not have the WILL to do the 'right thing,' though we have the knowledge. Vermont could be a leader in this. All Vermonters could have health care. Living wage jobs, \$21 hourly, would have far more advocates than the current \$12 hourly Vermont jobs. Perhaps the currently useless statistics about unemployment (which do not reflect living wage but poverty wages are included and folks who will not even look anymore are excluded) could be updated so we could have meaningful information. But alas... Do we have the will to stop this medical megalopolis from eating us alive?? You have some power in this... I have to think the Vermont health advocate whose writings have been driven from this record by two large Medical industrial corporations, BC and MVP must be effective. Seems that Montpelier advocate of more money for Medical Megalopolis has brought her family's legal background to bear and further distort what 'we the people' need. To whom will you listen? To whom are you accountable?

The UVM Health Center who brought in SCABS to work in Nursing who are unable to provide any real data to support their claims they cannot pay Nursing properly? I worked only briefly in Vermont in Nursing as it historically ,as is documented by being 47 of 50 states, has been horrible for Nursing compared to some surrounding states. This is not NEW... This is a continued failure on the State's part in their valuing of Women? Nursing? acknowledging vulnerability? and not pressing so called Medical Leaders to 'do better' .

Recall it is the gun violence toward domestic partners that is Vermont's gun problem. These matters are interconnected, whether you want to acknowledge this or not.

So, it is time to rid ourselves of the Medical Industrial Complex and embrace healthcare. Vermont can lead the nation.. "never doubt that a small group of committed citizens can change the world, it is the only thing that ever has...."as Margaret Mead so nicely put it.

Sincerely,
Vicki D. Ward MSN

Name: Therese Mageau
Date: July 24, 2018
Affiliation, if applicable: BCBS customer
Town: Montpelier

Comment: I can't believe I even have to say this: the cost of health care is unaffordable. I personally will be able to find a way to pay for any rate increases, but I am the exception. How can you expect working people, middle class people, people with families, people with exceptional health needs, to continue to pay more and more and more every year for their insurance. It's not sustainable. If BCBS is having a hard time financially, maybe they need to look internally -- for example, is their administrative staff more than they need? -- rather than to their customers. Obviously, the way we currently pay for health care in this country needs to be completely overhauled, but since that is beyond your power to do so, you can at least not make the public bear the brunt of this deeply flawed and inequitable system. NO rate increases!

Name: Erin Campos
Date: July 24, 2018
Town: Waterbury

Comment:
Dear GMCB,

This is my comment on the price increases requested by the insurers. I am currently with MVP and have been for many years. I get my insurance through my employer.

My plan is over \$700 a month for single coverage. I utilize many practitioners not covered by insurance already at my own expense (two naturopaths, massage therapist, acupuncture, etc) and adding onto the premium of insurance I don't normally use for coverage is yet another way to hurt the lower to middle class population.

I also feel that the actual cost of providing me with health insurance is nowhere near the premiums they set. Therefore administrations of insurers make more money and those of us struggling with coverage are making less...

Please consider blocking these increases or capping them to a more reasonable 2%-3%. Most people I know receive an estimated 2% increase from their employers each year and people are never going to get ahead when the items they need to purchase keep increasing costs when their pay is not increasing in line with expenses.

Thank you for your consideration.

Erin Campos, Duxbury VT

Name: Robyn Young
Date: July 24, 2018
Town: Williston

Comment: I am concerned about the large increases to health insurance premiums both BCBS and MVP want every year. I have been insured by both companies, switching back and forth year-to-year to the one that is the least expensive. I do not know how much longer my family can continue to absorb these ridiculous increases in the cost of health insurance. My spouse and I are both self-employed. We buy our insurance through my husband's firm. It is a small company and is thus not able to negotiate the good deals that large employers, such as UVM, get on health insurance. And, because he is a company owner, we pay the full price. The annual large increases in our premiums is hurting us financially. We cannot pass this cost on to our customers - they would walk. But, we can't walk from BCBS or MVP if we continue to live in Vermont. Please li

Name: Beth L Kamhi
Date: July 24, 2018
Town: Perkinsville

Comment:
Dear Board Members,
I see that the state healthcare advocate was barred from the recent rate hike hearings. Since, we the consumer, are not being represented by the designated advocate, I feel compelled to represent my own interest directly.

It is not possible to attend your public forums as I have to work to be able to pay my expenses. If I understand it correctly, the BCBS proposed rate hike is 7.2%, which is 4.7% when applied to the Silver plan accounting for subsidies. I am one of your many constituents that do not get subsidies of any kind. I purchase the Bronze plan for \$484.56 per month currently and I under utilize healthcare services to be able to carry any health insurance at all. Each time these rates rise for a product I essentially cannot use I have to reconsider having health insurance. At the rate you are going I will have to become uninsured even as I age and become more likely to need such services before reaching Medicare eligibility a few years from now.

Please consider the many of us, who are caught in the middle of the current system. My income goes down as I age and the rates go up. I will be forced to make a choice between a rock and a hard spot. Then the system at large may bear significant costs if something happens and I am forced to seek medical care.

I understand the need for insurers to fund reserves. Please consider that I cannot fund reserves of my own with these kinds of costs. I run a monthly deficit and "rob Peter to pay Paul" each time I make this insurance payment, as I am doing again this Thursday July 26th.

The least you can do is allow the testimony of the experts assigned to represent consumer interest. I strongly resent the infiltration of cold, calculated strategies intended to suppress our voices in the operations of government entities such as yours.

Name: Kevin Hans
Date: July 24, 2018
Town: Hinesburg

Comment: Aside from our mortgage, health insurance is our next biggest per month cost. As an independent contractor who often travels outside of Vermont for work, it is getting harder to find reasons to stay when our costs keep going up and there are more affordable places to live all around us.

Name: n/a
Date: July 24, 2018

Comment: I am writing to you as a concerned Vermonter and wanted to share my personal experience and recommendation related to Blue Cross Blue Shield of Vermont's (BCBSVT) proposed rate increase. Based on a the experience of a family member, recounted below, it my strong belief the BCBSVT is not fully accepting responsibility for its role as prudent purchaser of health services with premiums paid to them by Vermonters who expect it as part of purchasing a BCBSVT plan. If the experience I describe is generalized to the Vermont population served by BCBSVT, it is possible there are savings for Vermonters

should BCBSVT more actively manage healthcare costs via provider contracting and not simply be satisfied with passing any new cost on to the consumer.

Per the VT Digger from 7/24, the BCBSVT Actuary was asked whether BCBSVT rates were unaffordable, and he responded, "...our rates can only be unaffordable if the underlying cost of care is unaffordable." And that is not surprising given an actuary's role is to predict year over year spending, not to be able to render judgement on whether the historic costs they are using to predict future costs were spent in a responsible manner or effectively. While not the Actuary's role, it is BCBSVT's role as a non-profit health insurer! Their role is beyond just accurately predicting year over year costs, they should also be actively ensuring that every Vermont premium dollar spent on services was based on a reasonable price for a high quality service in that setting of care.

Vermonters trust that by purchasing any paying for a BCBSVT plan that BCBSVT will negotiate the best possible rates on their behalf. My experience suggests there are opportunities for additional savings to consumers. As recounted in my experience below, it was BCBSVT who was responsible for negotiating the exorbitant price that we were charged yet they did not take responsibility. How many others have been charged excessive prices because of weak contracting and/or poorly negotiated rates? How much of this in the historic costs on which the actuaries base their predictions?

Because of these outstanding questions, I encourage the GMCB to consider not approving the proposed rate increase in full and instead, set aside some proportion of the request as a target for BCBSVT to review its provider contracting and ensure all negotiated rates are reasonable and based on some metric of the underlying cost. This would incent BCBSVT to find savings by improving its contracts and rates so that the underlying historic base on which the Actuary is working is reduced.

Summary of the experience which led to these comments:

- It came to my attention on or around December 2016 that a provider bill owed by a family member under a Blue Cross Blue Shield Vermont (BCBSVT) Bronze Plan was excessive and not usual or customary. Since the Bronze Plan has a high deductible, the family member was fully exposed to the cost and was so much greater than a previous bill received, which was for a much more complex visit, that they brought it to my attention to review.
- Upon researching, we discovered that for the procedure in question, the Vermont hospital-based provider had requested a payment of 5 times the Medicare payment and 6 times the Vermont Medicaid payment. After a lengthy process with the provider, including a submission of a complaint letter and multiple follow-ups, the requested payment amount was dropped to be in line with that of Medicare and the matter settled. A copy of the complaint letter can be provided upon request but contains protected health information so is not being submitted as part of this public comment form.
- Although ultimately resolved with the provider, after completion of the research, we initially contacted BCBSVT to alert them of the issue we identified. While the customer service agent was polite and was under the impression that we simply did not understand that the deductible meant we had to pay full cost, he was insistent that the rate we owed was consistent with BCBSVT contracted prices and there was nothing they could do. Even repeatedly mentioning that these rates were in excess of usual and customary and if not fraud, certainly seemed to warrant abuse of the contracted pricing (i.e., in this case specifically, inflating billed charges in a manner inconsistent with actual costs in order to manipulate rates), the representative insisted that there was no role for BCBSVT and we must discuss

directly with the provider. And there was no other assistance or interest in the matter by BCBSVT following that call.

Name: n/a
Date: July 23, 2018

Comment: Unsure how one can justify an increase of 10.9% never mind over 30% in certain cases. How can we call this affordable. To me 10% (if I am lucky) it will mean a month of food and gas for my car. I guess I will have to scale my plan down and increase my medical expenses or choose not to go to the doctor. It's difficult as you advance in age. I am on Vermont Health Connect and I have MVP

Name: n/a
Date: July 23, 2018

Comment: I vehemently oppose any MVP rate hike. I am a 44-year-old full-time worker. Even with the tax credit, my mother has to pay my MVP premium because I cannot afford it. MVP is not in financial jeopardy, but I am, and so are thousands of other Vermonters. This year's rate hike already hurts. Don't approve another one.

Name: n/a
Date: July 23, 2018

Comment: We need more not less public involvement in health care costs. The public advocate needs to be heard.

Name: Jan Hancock
Date: July 23, 2018
Subject: public comments: health insurers' rate hikes 2019

Thank you for receiving public comment on the proposed rate hikes. To say I'm against them seems obvious, but maybe context helps.

I work for a small non-profit organization where I have health insurance through BC/BS. While I'm grateful to have it, the huge deductible for the plan I can afford would be financially overwhelming if I were not a healthy single person. Needless to say, my under-100-non-profit cannot pay well and any health cost increases will be passed on to me.

My job puts me in daily contact with families whose children of all ages have special health needs that are costly in every area of life. We try to help families navigate healthcare and educational systems while they are emotionally and physically drained themselves.

Parenting is a full-time job, which is in addition to parents' juggling several work schedules to keep health insurance, managing doctor and school appts. and hospital stays, and researching what accommodations and equipment their child needs.....and then they're figuring out all the paperwork needed to appeal the usual insurance denials. Add financial hardship with piecing all this together, and there are extremely stressed families facing more barriers to healthcare.

Please consider the families who don't have the time or energy to advocate for themselves in a public forum.

Thank you,
Jan Hancock
Burlington resident

Name: n/a
Date: July 23, 2018
Subject: Premium Increase

It has, disturbingly, come to my attention that the windfall from the unaffordable care act of the Obama administration is not enough for the insurance companies and that they are now seeking more money. Blue Cross Blue Shield of Vermont is asking to increase premium prices by 7.5%, on average, for 2019. MVP Health Care is asking to increase premium prices by 10.9% on average. I can't imagine that you don't see this as utterly ridiculous on every level, economic and moral. Please do not approve any premium increases for the these two insurance companies. In addition, please work towards opening Vermont up to all markets as opposed to blocking our freedom of choice and start advocating for Single Payer so we can get the bloated insurance companies out of our state and country. Thank you for your diligence and response to the will of the people.

Name: Paul Wagenhofer
Date: July 23, 2018
Subject: BCBSVT proposed premium increases

Dear board members,

I am retired and on a fixed monthly income. I have Parkinson's disease and it is progressively getting worse. Currently I can just afford the premiums I pay for the coverage I'm getting through the Vermont Exchange with BCBS, and I would much prefer that the status quo be maintained. Please vote against any proposals to increase premiums by 7.5%.

Sincerely,
Paul Wagenhofer

Name: Debra Behm
Date: July 23, 2018
Subject: Health insurance rate increases

Hello,

I have Blue Cross/Blue Shield and do not purchase it through Vermont Health Connect since I don't qualify for a subsidy. I own a small business and I pay all my health insurance premiums myself. I hope very much that the 2019 rates will not increase by over 7%. The rates have gone up every year in excess of the inflation rate and have become difficult to pay. Last year I increased my already high deductible to keep the monthly premiums down and am very concerned about yet another large increase. I never thought I would be glad I'm getting close to age 65 when I can Medicare coverage. Thanks for listening.

Debra Behm
South Burlington, VT

Name: Gil Mathys
Date: July 23, 2018
Subject: Health insurance rate increases

The proposed rate increases which you are considering are, in my opinion, inflationary and unaffordable.

Thank you for your efforts in keeping healthcare affordable in Vermont.

Name: Cathy Stevens Pratt
Date: July 23, 2018
Subject: Health Insurance comment

We are a family of 3 in FAyston, VT. My husband has bare-bones insurance thru his employer. I am self employed and purchase BCBS Silver plan insurance for me and my 12 year old son.

Please DO NOT RAISE our insurance rates.

We are one of those families that falls in the middle income that is just enough to not receive subsidies. I pay \$1082.77 every month as my premium. This is a large percentage of our income. The co-pays increased from \$35 to \$75 recently and that really challenges us. We have had to make decisions to NOT go for care because we couldn't afford it, even on a nice income.

I am not sure we can afford any insurance if the prices rise more.

Many thanks for your time,

cathy stevens pratt

Name: Sarita Khan
Date: July 23, 2018

Subject: Health Insurance comment

I find the cost of health insurance in this state, indeed the country to be outrageous. In part this is because of the astronomical salaries the executives make. According to this Times Argus article the CEO of Blue Cross Blue Shield of Vermont makes over \$700K per year plus perks. <https://www.timesargus.com/articles/obscene-salaries/> Equally, it is way past that we need to have a single payer system of universal health care. Health care should not be based on profit. Drug costs need to come down. More coverage is needed for alternative health care options for wellness to reduce major medical outcomes.

Sarita Khan

Name: Tina Helzer

Date: July 23, 2018

Subject: VTBCBS Premium Rate Increases

Dear GMC Board,

My husband and I left our jobs and benefits (ie health insurance) to open a restaurant in Shelburne VT. We put \$150k into rehabbing a 125 year old historic building, now employ 20 people and are filling a much needed void in the Shelburne food/drink scene. We were able to do this because purchasing individual health care plans thru BCBS was "relatively" affordable. This increase will financially weigh heavily on us. We cannot increase food/drink costs by 10% as we would loose all our customers so please don't let insurance companies do the same leaving us with no options! The buck needs to stop with them not the small business owner.

Thanks,

Tina Helzer

Name: Amy Ludwin

Date: July 23, 2018

Subject: Vermont health insurance price hikes

Dear GMC Board,

Increase of reasonable premiums should be considered only when the context in which they are requested is reasonable. Requests made from an unfair basis, and those going well beyond inflation should not allowed. I believe the current requests are well beyond inflation and made from an unfair basis.

If the role of the GMC Board is to ensure that our health care system provides quality, affordable health care to all Vermonters while reducing waste and controlling costs, this request is neither affordable, nor will it not reduce waste, or control costs.

Speaking of affordable, and reductions of waste and costs.... while we are waiting for universal health care to arrive, can you lead the way for reforms in controlling costs via monitoring and mandating reductions in the rates of executive compensation in balance to sustainable consumer premiums. To quote John Wagner in the Times Argus, salaries are: Obscene!

<https://www.timesargus.com/articles/obscene-salaries/>

1. Could a fair wage for a CEO relate to the wages of the lowest earning employee in health insurance companies in Vermont?

We wouldn't have to go as far Ben & Jerry's in the old days of 5 to 1 /CEO to lowest wage earner.

2. What would be a reasonable and fair formula for executive compensation in relation to consumer premiums?

Surely you could come up with a more fair system than we are living with now.

In light of the vast disparity between elite CEO's packages and the prices everyday consumers are facing , I urge you to say No to any rate hike until you address this topic. Once we have realistic changes enacted to executive compensation packages, then let's look at what consumer prices are actually needed, and address reasonable cost of living increases.

Sincerely,

Amy Ludwin LCMHC
Burlington, VT.

Small business, self employed BCBS of Vermont policy holder

"Standard Plan" current monthly premium for 2 adults: \$ 984.44 monthly Deductible of: "\$5,250 deductible doubled for 2 person and family plans"

"\$6,550.00 out of pocket maximum is doubled for 2-person and family plans"

Info can be seen online in PDF: "Blue Cross and Blue Shield of Vermont 2018 plans and premiums Qualified Health Plans"

Name: Lauren Koumjian

Date: July 23, 2018

Town: Williston

Comment: My husband and I have BC/BS coverage we pay for out of pocket. A 7.5% increase will increase our premium by \$1000 per year. Nothing has increased that much to justify such a large increase in our premium. And we are getting less coverage because our children have aged out despite not being fully employed. Many independent thinkers, healthy individuals, and farm families in Vermont are taking the gamble and going without insurance, paying for services as they go. Others are opting for non-traditional medicine not covered by insurers. There are choices for the consumer. A

7.5% increase is burdensome to all.

Name: Mimi Buttenheim

Date: July 23, 2018

Town: Waitsfield

Comment: I am a Blue Cross plan holder. At an increase of 7.5%, my health insurance will cost over \$600 per month just for me! And that is with a high deductible plan. I work for a small company (10 employees) that is unable (because of cost) to provide health insurance, so I am on my own. My health insurance is my single biggest cost beside my property taxes and mortgage! I am a healthy person who has had sport related injuries so I keep a good insurance plan just in case. I hate the idea that I may have to trade down to a less robust plan and risk serious financial consequences in the case of an accident. Why don't the insurance companies add a catastrophic plan for people over 30, and also a plan that doesn't pay for a lot of maintenance but will cover diagnostic and hospital stays. The plans are not very versatile- there are a lot of healthy people in VT who want coverage for ski and sport related injuries but aren't treated for chronic conditions or drug protocols.

The rates keep going up 5% or more a year- when will it stop? I don't get a 5% raise every year.

Name: Emily Virzi

Date: July 23, 2018

Affiliation, if applicable: Concerned Citizen

Town: Warren

Comment:

Hello,

I work for a small business who already can not afford to provide healthcare to its employees. I have MVP though green mountain care, and can barely afford my current premiums. I have to supplement my diet with food that has been thrown away in order to pay all the bills. Please consider doing everything in your power to keep the premiums where they are. We are drowning out here and you can save us, please do the right thing for the people of this state! Patients before profits! Thank you!

Name: Thomas Hengelsberg

Date: July 23, 2018

Town: Charlotte

Comment: My current insurer is Cigna, but it could just as easily be BC or MVP. My employer has been know to switch then switch back, chasing the lowest rate.

1. Short term, enough is ENOUGH! Rates cannot keep going up while the quality of the insurance keeps getting worse and worse. We have a high deductible catastrophic plan at this point. I've only ever hit the deductible once. What we have is not worth the money, and unsustainable!!

Make it stop!!!

2. Take the rate hike out of the DISGUSTING BLOATED SALARIES of the executives. Really!! How much is enough for these people?? Clearly they have no sense of proportion or decency.

3. Long term, we need publicly financed single-payer health care. We need to start working toward that. Rip the band aid off and just make the jump.

Thanks for listening.

Name: Laura Bailey

Date: July 23, 2018

Town: Fayston

Comment: My family and I have MVP Bronze plan through VT Health Connect since 2015. The premiums have gone up 11% since then, and my employer has not increased my pay to reflect any of those changes. I have not received a cost of living adjustment, and if so, this would not cover the health care increases. I hope health care can remain affordable with little to no premium increases each year, and with more of a tiered ATC incentive as well, if a family is on the cusp of the ATC it's a steep drop off of providing 1/2 monthly premium coverage to no coverage.

Name: Joan Kahn

Date: July 23, 2018

Town: Montpelier

Comment: It seems like the insurance rates continue to climb, and yet each year less and less of my medical care is actually covered by insurance. I end up paying out of pocket for everything - the insurance is just there for dire emergencies. And even if I had an emergency it would still only pay a small portion of the costs. I know that there are a lot of issues with our current health care system, but I don't think rate hikes are the solution. At this point I would be better off with no insurance at all, rather than the amount I am paying each month.

Name: Ezra Lebowitz

Date: July 23, 2018

Town: Burlington

Comment: I currently have BCBS through my employer, Age Well, a local area agency on aging committed to helping older adults age the way they want. I have a great plan and can afford it. My wife is self employed, she pays over \$400 a month for a bronze level catastrophic plan through BCBS. I can't even begin to tell you how stressful her high insurance premiums are. I would put her on my plan but that would be even more expensive b/c they do not provide assistance for families. I beg of you to not increase insurance premiums. We talk constantly about leaving Vermont and moving to a more

affordable state and the high cost of insurance is a top concern. I am 27 and she is 30 we are newly married and love it here but if we are faced with insurance rate hikes I genuinely fear that we will have to leave Vermont.

Name: Susan Andrew

Date: July 23, 2018

Town: Warren

Comment: The proposed rate increases by BCBS VT are very disturbing to me and my husband. We are retired at age 61 and pay about a \$1000 a month for a bronze plan and have to pay the first \$13k of medical costs out of our pockets. How is that 'affordable health care'? Give me a break. Rate increases are only one aspect of the costs. What are going to happen to copays and deductibles? The sum of all the changes is what we really need to know. I'm not a Trump fan, but he did say the current ACA health insurance was too expensive to use, and he is right. Retirees before age 65 are being hit hard. How about extending Medicare to unemployed seniors age 60 and up?

That would be closer to affordable care.

Name: Elisha Johnson

Date: July 23, 2018

Town: Burlington

Comment: Hello! I would like to let you know that I am opposed to the increases to health insurance. This increase is added to the long list of everything else that keeps increasing in Vermont, EXCEPT for wages. It is increasingly difficult to remain living here in Vermont as we see costs rise. I happen to fall within a monetary range where I do not qualify for subsidies of any kind. I work full time while going to, and paying for, school in hopes to further my education to make a better life for myself. I receive no assistance. The increase in health insurance premiums will take more money away from my education. Please think of the others like me that barely get by, who need all the savings they can, as subsidies do not apply to us.

Name: Kai Forlie

Date: July 23, 2018

Town: Burlington

Comment: I am writing to express my total dismay over the recent proposal by BCSB and MVP to raise premiums by an average of 7.5% and 10.9%, respectively.

This is pure insanity. Regular people cannot be asked over and over, year in and year out, to pad the bottom lines of these out-of-control corporations.

Something has to give! If there was ever an example of how much our society needs a universally available, government-funded healthcare system in conjunction with the removal of profit from healthcare delivery, it's proposals like these. Shame on these two companies for expecting society to

continue along as if nothing is wrong. Shame on them for working against efforts to bring a Medicare-For-All system into being. I urge the GMCB to deny these proposed increases and to deny any and all future increases. This system has to change!

Name: Lorraine Roberge

Date: July 23, 2018

Town: Winooski

Comment: I am insured with BCBSVT as well as through Medicare. I do get help from the state for my Plan D prescriptions. I find it hard to justify insurances raising their rates by that much considering those of us on Social Security only get a 1 or 2 percent increase a year....IF that. There have been years when SS didn't increase at all. It feels to me like we're being taken advantage of. That tiny COL increase in my monthly check doesn't even begin to cover the insurance increases they have yearly. Enough is enough. It's expensive enough living in Chittenden County without them wanting that much of an increase.

Name: Laura Hale

Date: July 23, 2018

Town: Burlington

Comment: I am writing to ask you, the Green Mountain Care Board, to please push back on rate increases from MVP. We get our insurance through my wife's job, where she has faced day in and day out discrimination because she is a trans woman, but has stayed so that we have access to healthcare. It's been brutal. The costs keep going up and we can barely afford the coverage we have, which still has a deductible that's nearly bankrupted us. I paid \$1120 out of pocket for a mammogram, ultrasound, and blood tests in May, and am supposed to go for a follow up in November that I'm not going to be able to go to because, frankly, I can't afford it. My wife has surgery coming up at the end of the year and we have been selling our belongings for months to try to save enough to pay for it. This is not how healthcare should work. We both work full time and live a very modest life. We track every single penny we earn and spend. And this is where we are in 2018 as we are both on the verge of turning 40, working 50 - 70 hours a week and barely able to pay for basic medical treatment. If the MVP premiums go up, I don't honestly know what we'll do.

Name: John Eckerson

Date: July 23, 2018

Town: Westford

Comment: My spouse and I are retired school teachers who depend upon BC/BS supplemental coverage to our Medicare plans. Although we receive increases in our Vermont State Teachers Retirement pensions and our Social Security benefits, they are nowhere comparable to that asked by BC/BS. The proposed rate increase will either force us to reduce or drop our current health coverage or make up the difference elsewhere such as in heating fuel, food, or other necessities. Neither prospect is acceptable.

Name: Barbara Forauer
Date: July 23, 2018
Affiliation, if applicable: retired teacher
Town: Hinesburg

Comment:
Dear board members,

As a 30 year teacher now retired, I am finding it more difficult to meet all our expenses. We are basically healthy and make minimal use of our health insurance. It is expensive and since we are on pensions and social security which do not change so any increase will impact our ability to continue our quality of life. Please do not allow any increase in Blue Cross Blue Sheild rates. Our economy in VT is so fragile as is, so any impact will stress it even more. Thank you for listening.

Name: Katrina VanTyne
Date: July 23, 2018
Town: Waterbury

Comment: I'm writing in the hopes to persuade you not to increase insurance costs for 2019. I am a single person who owns a home and though I make a decent salary, my costs have gone up significantly in the last couple of years and keep on rising. I live paycheck to paycheck as it is and budget every dollar. And even if I get a raise this year it will not even come close to the 7-10% increase that you're proposing. Please help to keep health care affordable for working people like me. Thank you in advance.

Name: Suzanne McCoy
Date: July 23, 2018
Town: Hinesburg

Comment: I am insured by BCBSVT & Delta Dental through VHC. As a single (divorced), healthy woman, age 57 on NO prescription meds, my premiums are already outrageous. I understand why some folks opt to forego insurance. I'm fortunate enough to be able to make my payments but certainly see how others would struggle greatly at current prices. It costs me \$75 to walk in the door of a "specialist", so I have reduced my visits to my dermatologist from every 6 months to once a year, even though I have very light skin, lots of moles, and have had atypical moles removed in the past. I don't see nay reason to increase insurance rates. The entire system is an industry and needs to be overhauled! Affordable health care for ALL!

Name: john wetzel
Date: July 23, 2018
Town: Middlebury

Comment: My family of 4 have health coverage with MVP through Vermont Health Connect.

My wife and I are both self employed, and are in the process of building up our businesses. Also, our kids are getting older, and requiring more financial commitments. We are all active members of our community, and essentially raising our health care costs will directly force us to cut into our expenditures on a local level. We will need to save more money to pay for our health care, rather than spend it in Vermont. This is why we do not recommend raising rates.
thankyou for your time.

john Wetzel

Name: Samantha
Date: July 23, 2018
Affiliation, if applicable: Small business owner
Town: Middlebury

Comment: I have been a small business owner in Vermont for 10 years. Being self employed is rewarding and a privilege. We have 2 children and my husband is also a small business owner. An increase of health care that already feels exorbitant would be very challenging for us. What we offer brings diversity and well being to our community. It would be nice if the state would consider the hard work of small business, extra expenses involved including paying employees. Please reconsider raising the health insurance rates...we want to be able to have access like many others without it being a major stress.

Thank you.

Name: Ruth Miller
Date: July 23, 2018
Town: RICHMOND

Comment: I am on VT Health Connect through BCBS, and work for a non-profit which cannot afford to give me FT hours, or health insurance. I get a 3% COL raise annually. My premium has been raised every year so far. I just paid half of a double biopsy for a pre-cancerous melanoma, along with a \$40 co-pay. I'm single and have no other means of coverage. I will be in financial straits if BCBS's rate is increased by more than 3%. Although I'm grateful to have access to any coverage by BCBS, if rates continue to raise faster than the COL, I will soon be priced-out.

Name: Rejeanne Jalbert
Date: July 23, 2018
Town: Westford

Comment: As usual, the health insurance companies continue to be overly greedy. The salaries in the State of Vermont cannot support these outrageous increases unless you're an executive of some sort. I have consistently received 2% salary increases or none within the past twenty years so these outrageous increases by health insurance companies are not sustainable for me as well as many other Vermonters. I will most likely be living in poverty in my golden years because of our health care system. I'm with Bernie Sanders on "universal health care".

Name: Susan McCormack
Date: July 23, 2018
Town: Essex Junction

Comment: Hello - I am writing to express my concern about the rate increase being requested by Blue Cross and Blue Shield of Vermont. My spouse and I are both self-employed and rely on the Affordable Care Act for our insurance coverage. Our rates continue to go up each year (we are paying over \$900 a month for the most barebones plan available). With a \$13,000 deductible, it has been a hardship paying for medical expenses for the past several years, in addition to coming up with the monthly premium. As I write this we are anxiously awaiting some bills from the hospital for an urgent care visit and a series of x-rays following a bad fall I had earlier this summer. If the premiums continue to go up, we are going to have to drop out of the system and set aside the premiums we have been paying to cover medical expenses, and hope that we don't encounter any major accidents or illnesses. My spouse and I are both doing work we love, and through our work, contributing to the quality of life for Vermonters. It is no fun to live with the anxiety of knowing that a serious illness would make it next to impossible to continue to pay our current monthly health insurance, let alone an increased rate. We hope you will keep this in mind when considering the rate increase requested by Blue Cross and Blue Shield of Vermont. If this increase is allowed to go through, I believe you will see many people like us drop our coverage, which will make the cost sharing problem worse costing all Vermonters more money, and costing some of us our lives. Thanks for considering this request.
Best, Sue

Name: Diana Sheltra
Date: July 23, 2018
Town: Essex Junction

Comment: Vermont Health Connect was set up for the Affordable Care Act. Because BCBS and MVP are the two primary health insurance companies they can just keep raising the rates. There is no competition. They will price Vermonters right out of the market. The middle class will not have any coverage soon. The ones who decide to stay home and collect unemployment will continue to get it for free. Stop the greediness. Just because we work does not mean we can continue on health insurance. It is quite unaffordable. We need to get rid of Vermont Health Connect they are useless. Open up the market for other carriers. Just say no to another hike in price. The average family pays \$1,200 to \$1,500 per month.

Name: Mary Doud
Date: July 23, 2018
Town: Northfield Falls

Comment:
Blue Cross/Blue Shield thru Vermont Health Connect

Premium costs (individual plan) have increased substantially every year since I enrolled in BC/BS. I am self-employed and have Not Increased My Prices in *4 * Years! I Can Still Get By!! It's not getting any easier, however. We all know premiums, pharmacy, co-pays, etc. are Never going down. Try to get longer contracts, like must hold pricing for a 2,3,4,5 year period.

Name: Joyce Dicianna
Date: July 23, 2018
Town: Williston
Topic: Other

Comment: Let Mike Fisher testify!

Name: Wayne Maceyka
Date: July 23, 2018
Town: Hinesburg
Topic: Health Insurance Rate Review

Comment:
Hello;

Please be sure to allow public advocate Mike Fisher to testify on health insurance rates in Vermont.

It's come to my attention that certain insurance companies are seeking to block his testimony. It's critical that we allow those with relevant information to share their comments.

- Wayne Maceyke

Name: Meghan Dewald
Date: July 23, 2018
Town: Burlington
Topic: Health Insurance Rate Review

Comment: Please allow public advocate Mike Fisher to be allowed to testify on health insurance rates in Vermont. Vermont Blue Cross/ Blue Shield and MVP have filed motions with the GMCB, in an attempt to block his testimony, and I would very much like to see his testimony admitted. The rate increases are a hardship for all Vermonters, and unwarranted; we keep seeing rate hikes and decreased services.

Name: Paul Gustafson
Date: July 23, 2018
Town: South Burlington, VT
Topic: Other

Comment: Please allow Michael Fisher to testify regarding BCBSVT's request for a rate increase. High health care costs are placing huge burdens on individuals and families. I believe that it is critical to have all opinions and perspectives on the issue voiced and would like to have Mr. Fisher's voice added to the conversation.

Name: Chris Tall
Date: July 23, 2018
Town: Essex Junction
Topic: Health Insurance Rate Review

Comment: Please allow Mike Fisher to testify regarding BCBSVT rates.

Name: Robert Oeser
Date: July 23, 2018
Town: Brattleboro
Topic: Health Insurance Rate Review

Comment: It is my understanding that a Rate Review Hearing will take place on Tuesday, July 24. Further, I understand that one of the parties, BCBSVT has moved to exclude a witness prior to his testimony. I speak against this motion.

Mike Fisher is a Health Care Advocate and should be allowed to testify. To foreclose his testimony in advance works an injustice on the process and raises questions of the fairness and openness of the process itself.

Objections to his testimony, if there are any, should be ruled upon, fairly and impartially, during the proceeding.

Thank you for considering this public comment.

Name: Jo Sabel Courtney
Date: July 23, 2018
Subject: NO RATE INCREASES

For those of us who are facing retirement, or are retired, every penny counts if we expect to have a well-earned decent quality of life. I have BCBSVT gap insurance as a Medicare recipient, and defiantly oppose any rate increases for an industry that MAKES MASSIVE AMOUNTS OF MONEY. Rant over, please don't raise rates. Vermont is tough enough to live in financially.

Thanks,
Jo

Jo Sabel Courtney
Sabel PR/Events/Promotions

Name: Rheanne Fiske
Date: July 23, 2018
Subject: BC/BC 7.5%

Dear ladies and Gentlemen,

My husband and I are retired and live on a fixed income. No State or Federal program subsidies. Held jobs at age 16, worked our way through college..no loans, built our own home, raised 2 productive tax paying children...who returned to Vermont despite earning losses to raise children close to family.

My husband and I have a BC/BS policy and Medicare. Our total MONTHLY PREMIUMS as of this date:
BC/BS-----\$470.00
Medicare Part B \$260.00
Total-----\$730.00

Well you can just stick us with a fork on this increase, as we are just about done.
Our income will not increase by 7.5%.

Our Property Taxes will not decrease by 7.5%. In fact just received 2018/ 2019 Property Tax Bill and...no surprise here..increase!

And now the Medical Insurance folks want an increase in 2019...:(!

My husband and I continue an active and healthy lifestyle. The plan is to be around quite a bit longer. Instead of paying into State and Federal pockets and Medical Insurance Plans all our life thus far, and being Vermonters raised to be industrious, inventive, economical and a responsible asset to our communities, perhaps it is time to shift gears and become a burden on at least the State. The conversation at senior luncheons would rock the hallowed corridors of Montpelier and Washington! This is what is facing your ever going senior population...of which Ladies and Gentlemen if you are not already a member, you will be.

As is well publicized in reputable information venues, Vermont is among the most expensive states to live.

The expectation that the current "younger generation" is healthier and will pay into Vermont Medical Insurance Premium pools is false. Whether healthy or not the fact is not enough young tax paying citizens, generous pay jobs, or qualified workforce, are in Vermont to float the boat so to speak. And it is not going to get better anytime soon....TOO EXPENSIVE! So up the costs will soar like an SOS flare over the Northern Atlantic c.1912 (the ship is definitely sinking).

We are not in favor of a 7,5% increase.
We vote orally...nay.
We nod our head from side to side...nay.
We hold our hand up...nay.
We are marking the box...nay

Yours truly,

Rheanne M. Fiske

Name: Elise Eaton
Date: July 22, 2018
Town: Burlington

Comment: I am outraged. Once again the state's insurance almost-duopoly has their proverbial hands out to extort yet more money from ratepayers. This, as the salaries of their top paid administrators are in the multi-millions of dollars, as they squander money contributing to their pet community causes/projects <http://www.bcbsvt.com/wps/wcm/connect/a13e6d4a-437c-493c-b83f-3b68e98c6a1a/2017-contributions.pdf?MOD=AJPERES> and receive in the hundreds of thousands of dollars funding annually from the State of Vermont. In other words, from taxpayers like ME. Two aspects of the Green Mountain Care Board's stated vision is "Monitoring and exerting downward pressure on overall health care spending" and "Enhancing system transparency and consumer involvement." Please rigorously explore and challenge Blue Cross Blue Shield of Vermont's and MVP's chronic failure to keep their budget at least level-funded.

Name: Jonathan Ebbers
Date: July 22, 2018
Town: South Burlington

Comment:
I think that it is unacceptable for MVP and BCBS to raise their rates again. They asked for an ENORMOUS rate increase last year - something like 12% (if I remember correctly). The GMCB lowered that to a "mere" 9% (heavy sarcasm - BCBS still got a massive increase).

And now they want to do it again.

GMCB - please listen: stop this madness. Stop allowing these crazy rate increases. Or for every % of rate increase that you allow, you should require both BCBS/MVP and providers (UVM Health Network) to show savings/efficiencies.

Name: Damon Lane
Date: July 22, 2018
Town: Burlington

Comment: The proposed increases are large, and the latest in a long line of health care spending increases far exceeding wages or other costs. The UVMHC has been expanding, renovating, and paying an increasing number of administrators and increasing amounts of money. As far as I know, they have no plan to stop and reverse the cost increases. Neither do I believe this Board or Legislature to have such a plan. When people go bankrupt from medical bills, go without needed medical services, and we spend more on health care than any other country despite not having the best care, we have an

untenable problem. Sometimes, when projects or departments are having cost and performance problems, the people in charge hold on any payment increases until problems are sorted out. I propose that the Board task the two large insurance companies with developing plans to hold health care costs steady with inflation (even generous allowing them to keep the extraordinarily high costs of today!) If they can not or will not, the Board and/or Legislature can then impose significant changes, and that will be the companies' incentive. Do something anyway! I get health care through my employer who generously pays for nearly all of it, so I will probably not be personally affected by these changes, but this is one of the biggest challenges facing the US and I think it's ludicrous since we have other models in other nations and can very easily follow their blueprint if not for the greed of the insurance and pharmaceutical companies. It's not rocket science, it's regulation.

Name: C. Gonda

Date: July 22, 2018

Town: Middletown Springs

Comment: I have health insurance through MVP this year through Vermont Health Connect, and while my family household income qualifies me for significant subsidies to lower the premium cost, it is still difficult to pay the \$219 monthly premium for my plan. Overall, the MVP Silver plan I have chosen so far has worked out for me (my health is excellent, I eat healthy foods, exercise, and I've never needed any prescription drugs); but if any major health issue developed, I am not sure how we would pay the applicable costs.

My husband, also retired, qualifies for Medicare and also has a Medicare Advantage plan. Our healthcare costs, EVEN with the subsidies I receive, amount to about 12% of our gross income (which, of course, after federal and state taxes, the percentage is much higher). While my husband and I live simply, an increase of the proposed 10.9% for my MVP health care premiums would be very difficult for us.

Name: Benjamin Wang

Date: July 22, 2018

Town: Burlington

Comment: I get my insurance through Vermont Commons School, where I am a teacher. As a very small non-profit school, a projected 10+% increase in premiums for MVP would impact the school's ability to deliver a quality education and/or compensate us fairly. I ask that you scrutinize the proposed increases and push back as hard as you reasonably can. In addition, I urge you to support the state's Healthcare Advocate as much as possible. Consumers and citizens need to have a fair chance against the interests of the insurance corporations. Thank you for your work in safeguarding the health of all Vermonters.

Name: Benjamin R Beatty-Owens

Date: July 22, 2018

Town: Burlington

Comment: These health insurers need to feel pressure to contain costs, that will translate to more bargaining with hospitals. Our dysfunctional system is already far too expensive for rate payers in this state and it is unfair to ask our employers and rate payers to fork over more of their hard earned money. Make an inflation matching increase.

Name: Neil Landry

Date: July 22, 2018

Town: williston

Comment: average raise with VT employers is 2.5% = insurance companies should not look for more than that!

Name: Alan Hunton

Date: July 22, 2018

Town: South Burlington

Comment: The higher you raise the rates the greater the public outcry will be. Many of us life long native Vermonters are looking for other states to move to. Don't give us another reason to target health insurers.

Name: Robert Pittala

Date: July 22, 2018

Town: Westford

Comment: Vermont is becoming a state that the wealthy can only live in. If you work off the tax dollars or have a good college education you can stay in Vermont. Every one else has to go South. Between real estate taxes, healthcare and rents say goodbye to the local person.

Name: Sam Jordan

Date: July 22, 2018

Comment: The large increase in health care rates are unreasonable. Most of us pay for all or most of our own health insurance, on top of the high medical fees that are not covered by insurance. (\$10,000 deductible is not unusual for a two person or family plan.) We do not receive 7.5% to 11% increase in our wages each year. I suggest the two primary insurance companies find ways to cut their costs instead

of passing them on to consumers. If they need help in finding ways to trim costs, I am sure you can find volunteers to review their personnel and expenses. Thank you for listening.

Name: Tom Joslin
Date: July 22, 2018
Affiliation, if applicable: Citizen
Town: Jericho

Comment: I believe that public advocate Mike Fisher should be allowed to testify to the GMCB on health insurance rates. Unbalanced testimony that does not include public advocacy is unfair and unacceptable.

Name: Gillian Randall
Date: July 22, 2018
Town: Charlotte

Comment: I am writing to ask you to allow public advocate Mike Fisher to testify on health insurance rates. Vermont Blue Cross/ Blue Shield and MVP have filed motions with the GMCB, seeking to block Fisher's testimony.

These insurance companies' request is inappropriate and not in the public's best interest. I hope you will do the right thing and deny the request.

Thank you.

Name: Darcie Thorburn
Date: July 22, 2018
Town: Hinesburg

Comment: I have BCBS of VT health insurance through my employer of 30 years. I have not had a monetary raise in my paycheck for the past FOUR years because they said they are putting our raises into paying the premium increases for our BCBS of VT insurance!!!
Therefore, my other bills and the cost of food, gas, etc. has increased over the past four years, and I am still paying for those things with my salary from 2014!

Please do not increase the BCBS or MVP premiums any more!

Thank you,
Darcie Thorburn

Name: Amanda Calder
Date: July 22, 2018
Town: Winooski

Comment: I wanted to weigh in on the requests by BCBS and MVP to raise their individual and small business insurance rates. I recently was on an MVP plan through the VT Health Exchange for a period of time, and found the premiums to be already high enough, even with subsidies. My employer offers health insurance to full-time employees and I am now covered, but if I was working full time for an employer who did not offer insurance or if I was self-employed, the VT Health Connect plans are already unaffordable, especially if you include the deductibles and other out of pocket costs. Increasing the premiums more will lead to even fewer people opting to have insurance because of the expense, and more people choosing to pay the penalty. We can't afford to pay more and we shouldn't have to. These two insurance companies are still making big profits. They can afford to keep the rates where they are or only increase a small amount to keep up with inflation. Please be fair, the system needs to work for regular people.

Thank you.

Name: Francis Swasey
Date: July 22, 2018
Town: Burlington

Comment: I am against allowing BCBS and MVP raise their rates. If their rates are held in check they might have more incentive to actually drive the cost of prescription drugs down instead of playing along with the drug companies to make American's prices the highest in the world.

Name: James B
Date: July 22, 2018
Town: Middlebury

Comment: The constant annual increases in health insurance, with no additional services or benefits offered, is not sustainable. Like many Vermonters, I do not work for the State, or a hospital, or a teacher, and, as such, like many Vermonters with morals and values, who are self employed or work for business with less than 50 employees, have to purchase my own insurance. The only plans that offer any reasonable coverage in VT are those under the "silver" and "platinum" levels - the "bronze" levels are described as junk in online reviews, and shown to cost more in premiums than the typical subscriber will ever use. Currently, for any reasonable insurance, we are paying \$650+/month (and the junk "bronze" plans are around \$500) - this is crazy!. I live alone and make \$60,000/year, but after putting away a little each month for retirement, insanely high property taxes (to pay teachers health care and retirement) and car payment, and utilities, etc, I can no longer afford to pay my own health insurance and thus have canceled it a few months ago, I beg you to keep health insurance increases to the annual cost of living increase, or, at very minimum, allow Vermonters to buy into plans outside of Vermont so there is some competition. Or, perhaps, let the average Vermonter buy into the state employee plans via paying a premium to partake. The current system of constant insurance price increases, with no increase in our average pay, with no alternatives but 2 companies, is not sustainable. It is well known that the insurance companies are charging those of us full price is doing so to maintain profit and cover the many Vermonters using Medicaid free insurance. This must stop as it is not sustainable. I am no

longer buying health insurance , and more will follow my lead soon (I do not receive tax returns each year, so any “penalty” does not bother me). Give us some alternatives...PLEASE for gods sake.

Name: Kathleen B Bruce
Date: July 22, 2018
Town: Hinesburg

Comment: Second comment. In light of the fact that nurses in Vermont, specifically the UVM Med Center, cannot get a raise, or a decent contract with realistic raises aimed at hard working professionals, it is obscene for these insurers to raise rates well past the increases that people get in raises, etc... for retirees, we have no raises...and so this is purely avaricious on the part of BCBS of VT and MVP. I VOTE NO.

Name: Sophia Donforth
Date: July 22, 2018
Town: Burlington

Comment: I am writing to ask you to keep rate increases for health insurance more reasonable than the proposed 7.5% hike for Blue Cross Blue Shield. Living expenses continue to go up, but I can think of no reason why insurance rates should so vastly outpace general inflation. Health care should be available to all, and insurance should not make it unattainable.

I am particularly concerned as a board member of a Burlington non-profit organization, whose staff do not have benefits through work. While providing such access is a priority of the board, we cannot run at capacity and offer benefits to our employees. The more these insurance companies raise their rates, the more health care is out of reach for small businesses and their employees, even when everyone involved is ready to make it a priority.

Name: Kenneth Millman
Date: July 22, 2018
Affiliation, if applicable: Spike Advertising
Town: Alburgh

Comment: My personal earnings and company's profits are not keeping pace with the continuous increases in health insurance costs, and this is a major factor influencing my future in Vermont. The increases are unsustainable for me, and I am seriously considering a move out of State.

Name: Kathleen Lehn
Date: July 22, 2018
Affiliation, if applicable: Licensed Independent Clinical Social Worker
Town: South Burlington

Comment: As a provider of psychotherapy and counseling, and a Medicaid and Medicare provider, I have concerns about insurance premium rates being raised. Many of my clients are already living on limited incomes, and increased premiums will further financially squeeze them.

Name: Gloria DeSousa

Date: July 22, 2018

Town: Burlington

Comment: Please keep the rates as is or make them lower. NOT HIGHER. I have Blue Cross Blue Shield of Vermont through Vermont Health Connect. I pay \$607 per month for premiums and have a maximum out of pocket of \$2450 if I am remembering correctly (I don't have my info with me). I just came back from Kinney Drugs where I left one of my prescriptions. Why? Because I used to pay something like \$18. With the new plan that I am enrolled in, the pharmacist warned me that it was expensive - \$284.33. I left it there. It's for Estrace estradiol cream. I will squeeze all I can of the tube I have left before I spend that kind of money even if I am using my Health Savings Account. If you ever had the feeling of shards of glass in your vagina and bled as a result, you will empathize with my request to stop this incredible lack of control over the insurance companies. They have us by the Vagina - you can keep your balls - and you allow them to do so!!!

Name: Marcantonio Rendino

Date: July 22, 2018

Town: Hinesburg

Comment: The failed experiment, of running healthcare like a business, has gone too far already - it is neither health, nor care. Not one penny more to the rapacious executive class, which is draining much-needed resources, from critical healthcare needs.

Name: Susan Sykas Lang

Date: July 22, 2018

Subject: Health Insurance premium increase proposals

Greetings GMCB members,

I am writing in regard to the proposed premium increases requested by BCBS of VT and MVP. My husband and I are retired from 2 major employers in VT and have fixed income. And, while we planned for increases in the cost of the services we pay for, we did not anticipate increases of the magnitude that BCBS of VT and MVP are currently requesting. Since my retirement in 2008 there has already been an

increase of almost 20% for my healthcare coverage. In closing we'd like the board not to approve these large increase due to the hardship they would cause for retired people in VT.

Sincerely,
Susan

Susan S. Lang

Name: Laurinda Hulce
Date: July 22, 2018
Subject: Potential Rate increases

Dear Green Mountain Care Board Members,

I am writing to you to ask that you deny the request by BCBS and MVP to raise individual and small business health insurance rates. I have BCBS through my employer - UVM MC and expect, at most a 2-3 % raise this year which is what I received last year, which was eaten up by increases in the cost of my health care plan. If I were attempting to survive on my salary alone without a partner I wouldn't be able to afford health insurance at all.

The insurance companies are not in danger of losing money and are doing quite well financially. Raising rates on people who are already stretched to the limit will result in more people going without health insurance and damaging the overall health of our population. I want Vermont to show the rest of the country that we care about our people and want a healthy population that is able to reach their potential. This requires access to healthcare.

If we aren't going to transition to single payer/Medicare for all then we should be supporting access to the system we currently have. Raising rates 7.5 -10.9% does not accomplish this.

Thanks for listening.

Laurinda Hulce
South Burlington, VT

Name: Megan Emch
Date: July 22, 2018
Subject: Blue cross rate increases

Dear green mountain board,

This is a plea from my family to not allow anymore rate increases for bc/bs, mvp or UVM medical center.

My husband is a self employed carpenter and I am a part time office worker who is trying to stay home with our children as much as possible. Health care costs are killing us. We purchase a plan through

bc/bs that we pay for every month that basically offers no coverage we have a \$10,000 deductible. My family would be better off saving our monthly premium to pay for our health care. UVM is also charging WAY too much for all services and spending and wasting too much on upper management and administrative costs. I am asking you the board to help families like mine by making these insurance companies and hospitals provide the health care we are paying for and stop ripping off hard working Vermonters.

Do the right thing and cap all there salaries and what they can charge consumers and make them provide health coverage not high deductible plans.

Thank you
Megan Emch

Name: Paul Turnley
Date: July 22, 2018
Subject: Shame on you if you let Blue Cross and MVP bully you into denying Fisher's testimony

They are dealing with abstract numbers. He is dealing with the lives, illnesses and hardships of real people...and that is about what Health CARE is suppose to be.

I am helping a 80 year old single woman parishioner who is facing colon cancer surgery Thursday and the Advocates have been incredible in helping navigate the treacherous maelstroms of health care reimbursement. This is the type of input your board needs...yes, granted balanced with the rising cost of health care which your board to some extent controls. But you need a reality check with people to counteract the barrage of numbers.

Paul Turnley
182 Heatherington Road
West Pawlet, Vermont 05775

Do not fret or worry, but in everything, by prayer and petition, with thanksgiving, make your requests known to God. Then the peace of God that surpasses all understanding will guard your hearts and minds in Christ Jesus. Phil 4: 6-7

Name: Rite St. Germain
Date: July 22, 2018
Subject: BC/BS Health Care insurance rate hikes

Are they crazy? SS income doesn't go up as high as their proposed rate hikes.
Please keep my health care costs more reasonable.
Fixed income is just that.
Thank you for considering ratepayers opinions.

Rita St Germain

Underhill, VT

Name: Helena WU
Date: July 22, 2018
Subject: Increase in premiums

Hello!

I would not like to see premiums increase. I can barely afford insurance as it is. Please do not approve this increase.

I am in favor of universal health care and including alternative/CAM modalities.

Helena Wu
Middletown Springs, VT 05757
Mama Wu's Good Medicine!
Herbs, Flower Essences, Reiki, Classes & Consultations

Name: Lois Whitmore
Date: July 22, 2018
Subject: testimony from Mike Fisher needed

Dear Chairman Mullins,

The information gathered through Vermont Legal aid from medical consumers is absolutely essential for the GMCB as a consideration of regulating health insurers in Vermont. As a regulatory organization, GMCB must be a factfinding agency first, and an adjudicating agency second, as your independence in protecting Vermonters depends on your ability to weigh relevant information from past, current, and potential consumers, as well as providers..

While the issue appears to be about health access, the regulatory aspects before you are more appropriately considered as a consumer rights issue. In the case of health insurance, the consumer product is not automobiles, or real estate, but medical care. And the implications of those purchases are a great deal more existential.

The insurance companies, Blue Cross and MVP, (or any other company which chooses to sell its product in Vermont,) are not operating out of noblesse oblige; consumers have little choice when it comes to taking their business elsewhere or purchasing their pediatrician, or oncologist, or emergency room, or xray online.

The experiences documented by Vermont Legal Aid and the Office of the Health Care Advocate, like recent testimony before the legislative committees, must balance, in a real way, the balances that show up on insurer's spreadsheets. No question that health care is costly. But insurance companies are not physicians, and they do not deliver that care themselves. But consumers--medical consumers--through their insurance purchases do pay for it. And whether insurer's products are flawed, or the prices

artificially inflated, or misrepresented, or the warranties(denied coverage) not honored-- you, the Green Mountain Care board, need to know.

Sincerely,

Lois Whitmore
Essex Junction

Name: John Handrick
Date: July 22, 2018
Subject: Vermont resident – input on proposed health insurance rate increase.

Dear members of the board,

I will keep it short.

The health insurance rates in this state are already too high for too little in return. Please do not let them raise rates again. I also cannot believe these insurance companies have the gall to try and silence the health care advocate for the state. Please show these companies they cannot railroad their rate increases on the public that is already straining to keep up with health care's rising cost and diminished results. While we are asking questions, can we ask why UVM Health Network CEO Dr John Brumsted is making \$2.19 million a year? Ask him to pay the increase.

John Handrik

Name: Leona L La Berge
Date: July 22, 2018
Subject: Increase of health insurance premiums requested by BC-BS and MVP

I'd like to give my opinion of the exorbitant increases again being requested by BC-BS and now by MVP. While I don't recall MVP requesting this high an increase in the past, they may have and I just don't remember it. In any event, a request, or continued requests of this type (as in the case of BC-BS) really are beginning to lead the public (at least the ones I've spoken with) to have little credibility in BC-BS and their ability to continue to service their customers and stay in business!

Given the fact the general public ABSOLUTELY CANNOT AFFORD AN INCREASE IN PREMIUM anywhere near the figures being requested, it's my opinion the carriers are well aware of this fact, it's also my opinion the carriers believe if they request these foolish amounts of increase they will receive a much lower increase-closer to what they wanted to begin with.

Given their ridiculous requests, it is my opinion they should be allowed NO increase, not just for this year but for the following 4 years as well. And an increase of NO more then 2% each year for each of the 10 years after that.

Working class employees are lucky if they get a 1-2% increase in pay in any given year! Social Security recipients are lucky to receive 1-2% increase as well.

And the Big insurance carriers want 7.5% and 10.9% respectively?

I say ABSOLUTELY NOT!!

Give them Nothing!

If they continue to get their big premiums, you may as well roll us little guys into the gutter. Because that's the only place we'll be able to afford to live since health insurance is required! And as I understand it, since I get SSDI, I have no choice but to have premiums taken out of those benefits. And while VT Health Connect assists me with Medicare Part D, I have to literally jump through hoops to get that assistance.

So that's my opinion, for what it's worth, which I hope will be something. Thank you for hearing the voices of the people.

Leona L La Berge

Name: Patricia Duncan

Date: July 22, 2018

Subject: Rate increases

Please help Vermonters to have affordable health care. None of us can keep up with the price of the premiums and deductibles and copays. Insurance costs are out of control. I try to avoid the doctor at all costs and that is not the way it should be. I am putting off a bone density test due to the cost. I did not get a raise this year. People do not get 7-11 percent raises generally how do they expect us to pay for those types of increases.

Thank you,
Patricia Duncan
Georgia, Vt

Name: Sandi MacLeod

Date: July 22, 2018

Subject: Blue Cross Blue Shield increase request

I'm a retired teacher living on my pension and social security. I understand that BC/BS has requested an average increase of 7.5% for 2019. My own income has not risen by that amount so it will become difficult to shoulder an increase that significant. All costs for utilities and general living expenses including food and gas for the car continue to raise as well. I do have choices about purchasing food, driving my car, and even how high to set the thermostat in winter or use the air conditioner in summer to help control rising costs. BC/BS fees are not something over which I will have control.

Please consider a much more moderate increase if an increase is necessary.

Sandi MacLeod

Name: n/a
Date: July 22, 2018
Subject: Insurance premiums

I have received an email from a friend who has bcbs and her premium has increased over \$200.00 a month I have Medicare so this does not affect me directly However I am a registered nurse and I understand the burden these increases put on people I realize our goverment now has little concern re health care costs and how these costs affect the general population the burden is now on insurance carriers but it would be nice if you could absorb some of these costs and take less of a profit

Name: n/a
Date: July 22, 2018
Subject: Rate increases

Health insurance is already unaffordable and the UVM monopoly is just making matters worse. Please don't approve bcbs's 7.5%rate increase.

Name: Molly Holland
Date: July 22, 2018
Subject: Health insurance rates

Hi.. please do not allow private insurances to raise their rates!!! Or agree to a 2% increase max. Insurances already make a huge profit and I know from my professional experience that they say "no" first to things that patients request totally because of cost. The board's job is to advocate for Vermonters, not side with big insurance. Thank you for standing up for Vermonters .
Molly Holland,
Williston, vt

Name: Kathleen Rohde
Date: July 21, 2018

Comment: Please do not allow further rate increases.. I can barely afford the cost of insurance now.

Name: Kathleen Bushey
Date: July 21, 2018
Town: Monkton

Comment:
I receive some of my insurance premium from Vt Teacher Retirement and the carrier is BC/BS. A rate increase will definitely affect me. My retirement allowance is not huge and I work to augment it. Friends are not as fortunate.

It is indeed unfortunate and mean spirited and inequitable and regressive for such a wealthy country to not offer an affordable health care policy. I will be disappointed in you if you don't come up with something to help all of us Vermonters out. Speak out against inequality and the present administration for our sakes and the betterment of all.

Name: Stephanie Davies
Date: July 21, 2018
Town: Hinesburg

Comment: Enough is enough. Insurance companies keep demanding higher rates, but provide coverage for less care. Don't raise the rate.

Name: Shannon Lashu
Date: July 21, 2018
Town: Williston

Comment: Prices for health coverage are already out of control. I'm sure we are not the only family being slowly suffocated to death by the medical debt that piles up each year. At this point an increase will mean many families like mine will have to give up on insurance. There must be some way to fix this colossal problem!

Name: Stephen Kiely
July 21, 2018
Town: Bristol

Comment: Price increases for health insurance should rise at the rate of inflation and not at a rate that is higher. Additionally, rates are rising quicker than inflation rates because there is no competition to Blue Cross in the state of Vermont. The State of Vermont is just as liable for rate increases that exceed inflation rates as are the board members and executives at Blue Cross and Blue Shield because of the arrangement made between the two entities.

There is a prevalent notion among people who run government that people will continue to absorb increases (beyond their increases in salaries) in food, gasoline, education, clothing house hold goods and services, taxes and healthcare premiums by making do with less. Just how far do you think this solution to inefficient and bloated government bureaucracy(and its private sector partners) will go before people can no longer tighten their belts? If government is there to help society in general, how does the lack of help in containing its own costs (heath care premiums being part of the equation) help society? What concrete initiative does the state have in mind to contain health care costs? It appears that there are none if the health board is considering a 7.5% increase in health care premiums.

Name: Dechen Rheault
Date: July 21, 2018
Subject: Price increase

To the board

I am appalled to here that the local insurance companies want to raise their prices, given the economy and these very uncertain times we live in.

It is a known fact insurance companies make billions of dollars off our premiums.

I want to encourage this board to do what is right...consider people over profits and if they offer you a percentage for saying yes, I again implore you to make a decision for the poor, the middle class and anyone else who will struggle financially with these rate increases...

Shame on these insurance companies and anyone who thinks this is a good idea.

Thank you for hearing my thoughts...

May your good conscious guide you to do the right thing.

Many Blessings,
Rev Dechen Rheault

Name: Charlene Van Sleet

Date: July 21, 2018

Subject: Rate Increases

I work as a care giver and pay for my own insurance. I don't qualify for any subsidies. I can not afford another increase in the price of my insurance. Please keep in mind the high salaries the CEO's of these insurance companies are making at the expense of people who don't make a lot of money. Not many people get a 7-10% raise to cover the increased rates. Thank you.

Name: Rachel Foxx

Date: July 20, 2018

Subject: Insurance premiums

Dear Green Mountain Care Board,

As an employee at the University of Vermont Medical Center, I am concerned to learn that BCBS is asking to increase their premium prices by an average of 7.5%.

I have been a nurse at UVMCMC for the past 10 years, and in that time have had VERY minimal increases in wages each year, less than COLA, as I'm sure you're aware.

If the hospital is unwilling to negotiate a fair contract, with fair wages, so that we can afford the increased premium in health insurance, as well as the increased cost of living in Vermont, many nurses and employees at the hospital will be faced with the decision about how to pay their bills. I include myself in that group of employees.

Since the GMCB does have oversight of insurance premium increases, as well as executive salaries, and in an indirect manner, nurses salaries, please encourage the hospital to offer a fair, safe-staffing, wage increase, and don't allow the insurance companies to increase their premiums to a rate that is unaffordable for employees.

Thank you for your time,
Rachel Foxx

--

Rachel Foxx, BA, RN, IBCLC
University of Vermont Medical Center, Maternity Nurse, Lactation Consultant
Pediatric Medicine, Nurse, Lactation Consultant

"We have a secret in this culture, and it's not that birth is painful. It's that women are strong" ~Laura Stavoe Harm~

Name: Val Hanson
Date: July 20, 2018
Subject: Rate increase

Due to a reduction in my work hours I have recently purchased health care through VT Health Connect. I implore you to deny their request for these huge rate increases. As a Vermonter I have worked hard my whole life and I simply can barely afford to pay the exorbitant costs as they are I can't take on more. I simply won't have health care. I know that this is not unique to me so again please please say no.

Valerie Hanson
Bristol, Vermont

Name: Cynthia Huard
Date: July 20, 2018
Subject: Health insurance increases

The premiums have increased every year, maintaining profit margins for companies. The percentage requested this year is by far more than the percentage most Vermonter incomes increase. Therefore the increase puts the 'insurance product' into a luxury item for the class of people with disposable income.

A choice for many, including me, will be to gamble on acute health problems and to ignore chronic issues.

That's not Health Care.

Cynthia Huard

Name: Jim Peabody Sr
Date: July 20, 2018
Subject: Premium increases

Okay folks, the requested increases do look high and I'm sure that you will receive the usual "outrageous increase" comments.

But, I have confidence that you were appointed to this board because you know a hell-of-a-lot more about the background numbers than I do. So, do your "due diligence" and decide. You have my backing.

Jim Peabody, Sr
Bristol, VT

Name: Mike Block
Date: July 20, 2018
Subject: Health insurance premium increases

TWIMC,

I am currently employed by an out of state corporation that handles government contracts. My premiums are \$1600/month for my family. It's insane.

I was formerly employed by an 11-person company in South Burlington. I loved the company, and the atmosphere was very friendly and we all had a very good time working together. Unfortunately, the company didn't have the means to fully insure us and we ended up using Health Connect. My premiums were nearly as costly as they are now. I had to leave the company because I wasn't making enough money to support my family, pay my mortgage, pay for gas to get to work, and cover my health insurance premiums.

As prohibitive as they still are with this out-of-state company, I'm being paid far more, but I'm still living paycheck-to-paycheck. At least I'm not tapping into my savings when a health crisis pops up.

PLEASE don't raise the premiums for small to mid-sized businesses. You will put some businesses out of business, or force their labor force to seek employment elsewhere.

If I could afford it, I would sacrifice 15% of my salary to go back to my old company, provided the health care was affordable. This would keep more money in state and ensure that a generation of employees can afford to live and be treated here. This is a beautiful state and no one should have to leave because of high health care costs.

If we put more effort into education, there wouldn't even BE a health care crisis.

Thank you in advance for your attention.

Mike Block
Starksboro, VT

Name: Jane Kast
Date: July 20, 2018
Subject: rise in premiums

I have an individual BC/BS Standard Gold Plan. As a result of losing State Premium Assistance (\$58.51) and Advanced Premium Tax Credit (\$145.87) last month my premiums have increased from \$452.77 to \$657.15.

I am sure that recent federal policies have had similar effects on other Vermont residents. My preference would be to ask Blue Cross Blue Shield to absorb some of the pain!

Thank you,

Jane Kast
Montpelier, VT

Name: Samantha Langevin
Date: July 20, 2018
Town: Bristol

Comment:
Hello,

I currently have insurance through MVP, via VT health connect. Though I work an hourly job, I receive very little in Federal subsidies, and do not qualify for Medicaid. All that said, I currently pay 25% of my monthly wages in health insurance, and that is just premiums. I often do not even go to the doctor because of the high out of pocket cost for a visit to my GP. The proposed date increases would make insurance completely unaffordable for me.

I want to have health insurance, but also need to pay my mortgage, and eat, and I know I am not alone in this position - VT had an incredibly high cost of living. PLEASE do not allow for health insurance to get more expensive.

Thanks.

Name: James Brown
Date: July 20, 2018
Town: Lincoln

Comment: I vehemently oppose a rate increase that is any greater than COLA. I don't want ANY increase as health insurance costs are outrageous already. What I would like to see is legislation that prohibits the criminally high profits for drug companies, C.E.O.s, etc.

Name: Harland Wendel
Date: July 20, 2018
Town: Bristol

Comment:
Dear Board Members

I would ask that you don't grant Blue Cross or MVP their requested increases. If you do, please don't give the amount they are looking for.

My wife and I currently have MVP's bronze HSA plan and cost us \$858 dollars a month. We also put an additional \$300 in our HSA. I have prostate cancer and decided to wait until I'm on Medicare next year to have two procedures my doctor wanted me to have this fall. But, the cost was around \$7300 out of pocket. Our insurance would not cover any of this until we satisfied the \$13000 family deductible. Here's an estimate of our overall medical expenses this year. Dental. \$3000, Eyecare. \$1000, expected HSA deposits. \$5000, and finally our Insurance premium for 2018 \$10260. I do understand that our dental and eyecare will be paid for by our HSA. But, \$15,000.00 dollars out of pocket is a bit much. It would have been closer to \$22,000.00 if I you include the two procedures I mentioned earlier.

Regards, Hal Wendel

Name: Risa
Date: July 20, 2018
Town: So Burlington

Comment: I feel that raising the cost of Health Care Insurance places an increasing burden on most families and feel it is inappropriate to continue increasing fees along with decreasing services available and covered by the insurance.

Name: Barbara Rainville
Date: July 20, 2018
Town: Lincoln

Comment: Commenting on Health Insurance rate increases:

I am a MVP insurance holder. Their proposed rate increase, along with BCBS's proposal is out of bounds for what I any many, many other Vermonters can continue to afford. I was raised to be responsible with my health and have always carried insurance but when I have to buy home heating fuel, pay the mortgage or even buy groceries. I work full time but I too consider myself on a fixed income - I don't

have negotiated pay increases every year and tax increases from other parts of the government make things tighter and tighter every year.

Please consider thoughtfully the full import of your decisions on the proposed rate increases.

Name: Kathleen B Bruce

Date: July 20, 2018

Town: Hinesburg

Comment: I think that the insurers such as Blue Cross Blue Shield, etc, should NOT be allowed to raise prices. They will undeniably bolster their CEO's HUGE mega salaries, and give insureds less service-wise. I am tired of insurance companies calling the shots and walking away with huge salaries. It's obnoxious. As a nurse, doing home care visits privately for breastfeeding moms, they did not give us a raise on our home visits EVER.

they keep the prices low for services by making the remuneration for services artificially low, and then they keep it there , essentially preventing free trade amongst home care Lactation nurses. (IBCLC). It is revolting.

Name: Maureen Dougherty

Date: July 20, 2018

Comment: These increase requests are outrageous! What person is getting a 7 or 10% increase in their wages to cover it? No one! Health insurance is already way too expensive for many. And don't even get me started on VHC!

They are nearly impossible to deal with and don't understand their own program when you call. MVP even worse in terms of dealing with them. The whole health insurance thing is such a sham and they don't care at all about the patient.

Name: Theresa Zittritsch

Date: July 20, 2018

Town: Williston

Comment: There can be no justification for such a large increase. Please deny the increase to no more than inflation.

Name: Elizabeth M Parker

Date: July 20, 2018

Town: Montpelier

Comment: I ask the Green Mountain Care Board not to grant increases to the BCBSVT and MVP. The rates are already a challenge for too many people.

Please ask for ways that these companies can conserve, by working to standardize the rates of procedures so that insurance and cash clients are paying comparable prices, trimming management, and sincerely working with hospitals and medical professionals on how to stabilize health care costs. Health care costs are high and constrain a great portion of the population from spending money in other areas fo their life. Sadly for the elderly and working parents who are just over the low income Green Mountain Care threshold this means having to choose health care OR food, heat, and transportation. Please do not rubber stamp these requests for increases.

Thank you for reading my comment.

Name: Jane Kast
Date: July 20, 2018
Subject: rise in premiums

I have an individual BC/BS Standard Gold Plan. As a result of losing State Premium Assistance (\$58.51) and Advanced Premium Tax Credit (\$145.87) last month my premiums have increased from \$452.77 to \$657.15.

I am sure that recent federal policies have had similar effects on other Vermont residents. My preference would be to ask Blue Cross Blue Shield to absorb some of the pain!

Thank you,

Jane Kast
Montpelier, VT

Name: Tammy Monk
Date: July 20, 2018
Town: Montpelier

Comment: This is absolutely absurd. Our healthcare premiums are already way too high especially when items covered continues to decline. Vermont is already an expensive place to live. Such an increase would only add to the cost of living which is why so many people are leaving the state.

Name: Beth Merrill
Date: July 20, 2018
Town: Montpelier

Comment: Our MVP premium already feels too high this year, after a big spike last year forced us to switch from Blue Cross to MVP. If they do increase by more than 10%, I doubt we will continue to purchase health care insurance and have no other option but to go uninsured.

Name: Monica Martinet
Date: July 20, 2018
Town: Morrisville

Comment: I cannot afford a rate increase on my insurance! If my health insurance goes up I will be forced to cancel. Please don't let the increase happen!

I think that you should be looking at how much the CEO's of these insurance companies make. If the insurance companies "need" more money they should look into the deep pockets of those at the top before bankrupting the middle class into the poverty class.

Thank you.
Monica Martinet

Name: Eli K Coughlin-Galbraith
Date: July 19, 2018
Town: BRATTLEBORO

Comment: My wife and I are self-employed, owners of our own business, and insured by BCBS under VHC. It's too expensive for us; after this year, we'll have to downgrade our plan. We're considering delaying having a child due to the cost of health insurance.

Don't let them raise prices again, if you can possibly help it. Please.

Name: Tracie Harris
Date: July 14, 2018
Subject: Proposed BCBS and MVP Premium Increases

Jul 14, 2018

Green Mountain Care Board

To Care Board,

I am writing to comment on the proposed premium increases for Vermont Health Connect plans from Blue Cross Blue Shield and MVP Health Care.

I urge the Board to cut these increases so health insurance coverage does not become less affordable for Vermonters.

Premiums continue to grow far faster than wages. Increasing these costs even more will put affordable health care out of reach for too many Vermonters.

Please cut these proposed rate increases so Vermonters can afford the coverage we need.

Sincerely,

Tracie Harris

Name: Marie Fontaine
Date: July 16, 2018
Subject: Public Comment

The increase in blue cross blue shield is unacceptable high .. most people are premium poor . Can not afford to go to doctors after paying such high premiums . If they decrease the need for redundant paperwork they could save money .

If the state had a better handle on Medicaid fraud that would be helpful to the health care crisis as well

Name: Bram Kleppner
Date: June 28, 2018

Please hold the increase in the cost of health insurance to the consumer price index. It's bad for the economy, bad for Vermont's businesses, bad for Vermonters' health, and fundamentally unfair to expect the Vermont businesses who offer health insurance to their employees to subsidize care for the uninsured and to fund the gap between the cost of caring for Medicaid patients and how much Medicaid pays. Because our business can't afford to pay the full amount of the increases, our employees, some of whom aren't making a lot of money, are paying for other people's health care when they can barely afford their own.

Thanks,

Bram Kleppner, CEO
Danforth Pewter

Name: Caitlin Frauton
Date: June 28, 2018

Health care in Vermont is already unaffordable. My husband and I are welcoming our first child in October, and our monthly out-of-pocket insurance as a family will be over \$1,029/month with our

employer contribution. The Vermont Health Connect tool classifies this as "unaffordable" at our household income level, but our household income level does not qualify us for a subsidy. This type of monthly expense is practically impossible for us financially as is and the proposed rate increases will only make health care more unaffordable. We really want to make sure everyone in our family is insured, but health care costs are not realistic for middle class families and at the current cost. Our options seem to be 1) pay for health care, accumulate debt, and stop saving for retirement or 2) consider not insuring everyone in our family.

Name: Kimberly Corley

Date: June 10, 2018

Comment:

Director of Health Care Policy
Green Mountain Care Board
89 Main Street, 3rd Floor
Montpelier, VT 05620

Dear Director of Health Care Policy,

I am writing to provide public comment on requests for health care increases. Again, the only two insurance companies available to people who have to buy Vermont Health Connect health insurance plans are asking for huge rate increases. Simply put, I cannot afford another rate hike. I already cannot afford the current rates. Approximately 11,200 Vermonters purchase individual market health insurance plans and pay the full rates; I am one of those Vermonters. I am solidly middle-class and do not make anywhere near an upper-middle class salary and yet, between premium and deductible amounts, I am paying \$835 per month for an individual plan. This is outrageous and there are no alternative options.

People without employer-sponsored health insurance are forced to buy the plans available on Vermont Health Connect and there are only two insurance companies to choose from. The majority of people in the state that have health insurance get subsidies one way or another, while the remaining people are left to choose between having no health care or paying rates that are absurdly unaffordable. One reason that these rates are unaffordable is because they are funding the cost-shift that is an unfair burden on a small percentage of entrapped Vermonters. To add insult to injury, I am a mental health care provider and I make significantly less now than I did fifteen years ago because insurance reimbursement rates are seldom increased for mental health providers. Meanwhile, my expenses go up and up each year.

Others fare better. For example, teachers have gone on strike in recent years over wage increases and health care contributions, while those of us paying full prices on Vermont Health Connect do not have a union to represent our interests nor do the majority of health care providers who have unfairly gone decades without receiving adequate cost of living increases. I can attest that the past increases in health insurance rates on consumers have not lead to providers receiving fair reimbursement rates.

Where is the money going? One obvious beneficiary is the University of Vermont Medical Center (UVMCMC) that is becoming a monopoly supported by the Green Mountain Care Board. The UVMCMC also reduces/forgives deductibles and copayments for those who apply and make under a certain income. This is yet another subsidy for people with lower incomes that ultimately produces more of a cost shift.

Decisions in Montpelier could have been made this year for the UVMMC's large monetary surplus to have been given back to the people who are paying full price premiums and deductibles via the Vermont Health Connect plans. Instead, the UVMMC was given approval to expand with new buildings and projects. Even if these projects are worthy, it is completely unjust to fund them on the backs of the people who are already overpaying for Vermont Health Connect plans and then expect these same people to absorb another increase. The entire Vermont Health Connect structure includes a large tax/fee on a small group of Vermonters who are forced to buy these insurance plans! Enough is enough!!! Oh, but what is a person to do when hog tied? I can go without health insurance all together; I can pay unaffordable rates that seriously financially compromise me; or I can move to another state. These are the only options available because of the decisions made in Montpelier to date.

For many years now, I have known middle class families who move out of state. Recently, there has been an increase in people whom I know personally who are planning to leave. Unaffordable health care, high state taxes and the overall high cost of living in Vermont are the primary reasons. I also regularly hear about health care providers who are leaving the state. Quality health care providers leave when they feel demoralized by the health care system/policies and are not fairly financially compensated for their education, training and experience levels. The current trajectory plans in the state for healthcare such as all-payer will only increase the existing problems. Vermont Health Connect insurance rates are unaffordable and any increase in rates will leave many people in financially unstable positions or to become uninsured. Keep in mind that if people cannot afford insurance rates, the health insurance mandate will not suddenly make that money appear. The premium and out-of-pocket expense rates have to be realistically affordable if the goal is for people to purchase health insurance.

Sincerely,

Kimberly Corley

Cc. Governor Phil Scott
Senator Tim Ashe
Senator Philip Baruth
Senator Virginia Lyons
Senator Debbie Ingram
Senator Christopher Pearson
Senator Michael Sirotkin
Representative Maida Townsend

Submitted by Brita Fisher- July 24, 2018 Public Hearing

2018 Insurance Rate Hike Hearing
Green Mountain Care Board

Testimony:

Over the last 2 years that I've been working in Vermont I have been on a Blue Cross Blue Shield plan. I have been able to afford the rate hikes. I come from a background of privilege through absolutely no merit of my own, or anyone else's for that matter, by virtue of a financial system that exploits, dispossesses, slashes and burns. On a personal level I am working to redistribute the resources to which I have access. It is abundantly clear to me that the healthcare system is complicit in the ever-increasing economic divide. The system does not work for all and is not affordable if those with access to wealth are the only ones who can afford care. As I work to redistribute the wealth I've been given in pursuit of a more just and equitable world, I also fight to hold agencies like the Green Mountain Care Board accountable to creating a system that cares for all people. Under a publicly funded plan, I believe I would pay more than I currently do, but I would be paying into a system that took care of everyone in Vermont equitably, not one that sought profits from regressive hikes designed to make more money for the insurance companies at the direct expense of peoples' lives. It is uncomfortable for me to talk about this because of my own family's complicity in the current economic system, but I believe it is crucial to acknowledge that privilege comes at the cost of poverty.

I ask the Board today to consider the factors driving up rates. It's a simple question: what is more important, growing the profits of the insurance companies or the health of Vermonters? Under Governor Shumlin's own plan we saw there was enough money to fund healthcare for all.

This choice before you is a moral one, make no mistake. The function of the Board is to ensure the adequate provision of healthcare in Vermont and to ensure the transition to publicly funded universal healthcare.

We sit here today in a room far away from the hospitals where nurses fight for safe staffing against the same profit based system (and the GMCB should be as dedicated as they are to fighting for Vermonters' right to equitable care: it's your responsibility, in fact). We are far from people actively receiving care, but we are not far from folks sacrificing everything to fight for their lives; you've heard several of their stories tonight.

Human lives lived in dignity. That's what healthcare is. That's the consequence of your decision in these hearings, the cost of your financial choices to put profits, not people, first. It is YOUR decision whether my friend can afford the vital therapy needed to prevent long-term damage, YOUR decision if someone close to me will spring for a potentially life-saving test because the premium on the Blue Cross Blue Shield Vermont's bronze-level plan is already so expensive, despite it's high deductible. The impetus should not be on individuals to hope they know someone who can help pay for care. It is on you to scaffold a system where we all rely on each other, where we pay what

we can and get what we need, where we put taking care of each other as the highest priority. We all know that's not the system we have right now.

I unequivocally oppose the insurance rate hikes. If private insurance is not affordable for all, and it is not, then it is not affordable, full stop. Healthcare should be a right and public good, not a commodity. We can quibble about the exact definition of the word "affordable," and indeed the insurance companies' lawyers would like us to do so. But, I hope we can all recognize that when healthcare costs are the number one reason for personal bankruptcy filings in the US, when so many have to choose between care or medication and other necessities like food, rent, and electricity, something is deeply wrong.

Perhaps all of this seems to you a theater of pathos compared to the logos and ethos provided by the testimonies of the insurance companies. Maybe it's easy to dismiss personal accounts on the basis of being emotional. I assure you that I do speak with emotion and I hope you, too, are affected by the gravity of the stories you hear today. I ask you to pull down any barrier in yourselves that you might have erected to differentiate yourselves from us. Who among you has never needed healthcare? Who among you has never worried about the health of a family member or friend? But I also want to ask: Who paid for that care, and where did the funding come from? If the answer is private insurance, what factors made it affordable, and are those factors accessible to all? And, who among you can produce the numbers to claim that the profits of citizens are rising at the same level as the profits of the insurance companies?

You continue to ACTIVELY protect rate hikes at a level that you know has nothing to do with the fluctuations of salaries in Vermont. As the lowest-rate plans become more expensive and cover fewer and fewer services, it is all of our responsibilities to step in and ask questions. That's what we're doing today, that's what your role should be too. Where does the money go? Who receives protections and profits? If you believe that acquiescing to the insurance companies' demands and their false narrative of "increased hospital utilization" and denials of complicity in rising pharmaceutical costs makes you protectors of the care Vermont citizens receive, think again: I've seen your track record at these hearings. Shaving off a fraction of the hikes they request does not absolve or redeem you.

I want to emphasize what someone else mentioned: the level of empathy, accountability, and responsibility you would feel for a loved one who couldn't make ends meet because of healthcare costs, or who became seriously ill because they couldn't afford care, should be the same standard with which you consider the cases of every person in Vermont. That is what you've been entrusted to do, that is what we are entrusting you to do. The insurance companies are betting you won't. Look carefully at the choices you make: whose interests are you protecting? Who will YOU put first?

Sometimes it feels like we are powerless as individuals to change the course of things. But, as you go home tonight, as you consider what you've heard today, remember that you have the power here to make an active choice. Indeed any course of action you take will be a choice, and it is no hyperbole to ask: will you choose to protect the very lives of the people of Vermont, or the fiscal interests of companies (BC/BS VT, MVP, UVM Health Network, the pharmaceutical companies) who continue to compete to see who can make the largest profits off of the people who can least afford it?

July 24, 2018

Nancy Detra
1118 Green River Road
Guilford, Vermont 05301
ndetra53@gmail.com
802-254-4762

I'm Nancy Detra, from Guilford Vermont. I live with depression, and, with good care on my part and the part of my doctor, have been mostly healthy.

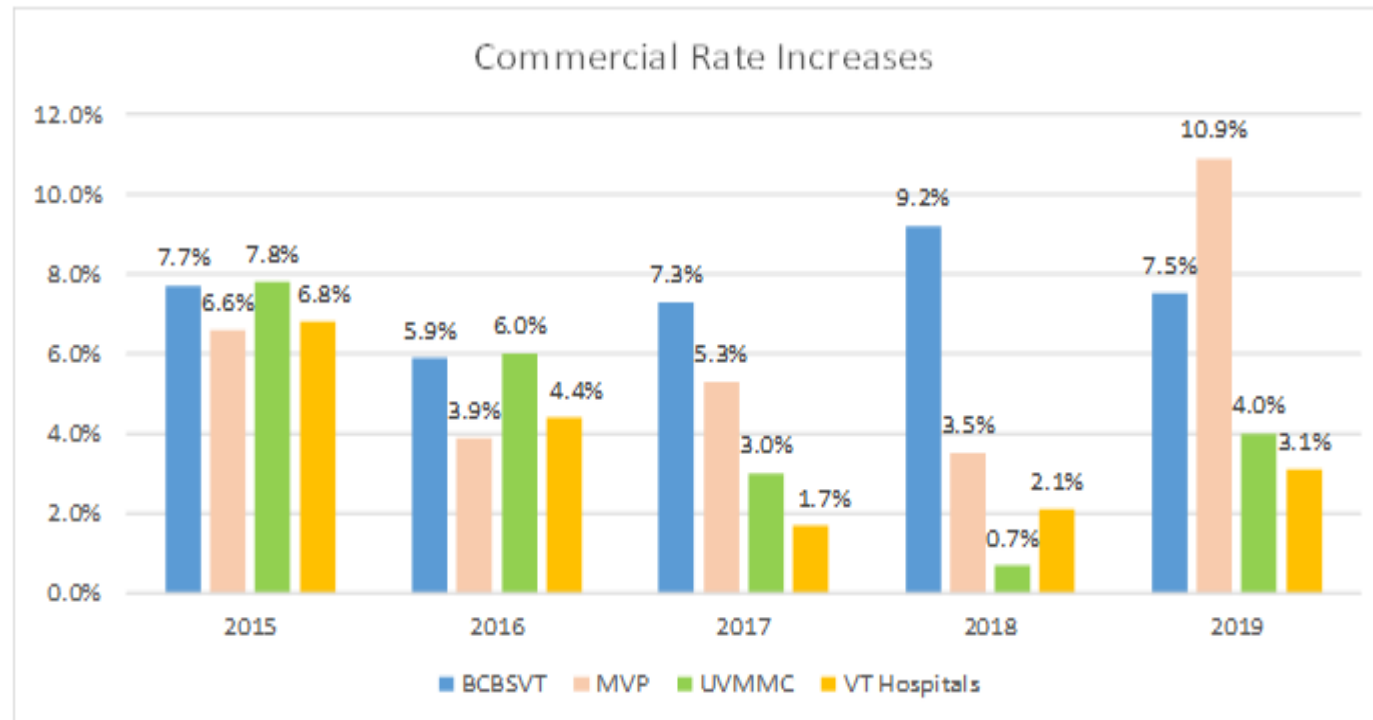
Last summer I fell into a deep depression. I was taking two antidepressants which together had kept me stable for a long time, but I found that those medicines no longer held the depression at bay, even when my psychiatrist adjusted the dosages. She then suggested I try transcranial magnetic stimulation, or tms, to control the illness. She believed it was my best shot at regaining my health.

I had Blue Cross Blue Shield as my health insurance provider through Vermont Health Connects, until I was told that it would not pay for tms; then I switched to MVP, which would pay for it, but only after I had proved that I had reached rock bottom in my depression. I had to get worse before they would pay to help me get better. What should have been a decision between me and my doctor was dictated by the insurance company.

When I finally got to have the treatment, I did get better, and maintenance treatments, which MVP approved, have kept me healthy. But, when I turned 65 in June, I went on Medicare, parts A and B, Medicare part D through Humana, and a supplemental insurance through, again, Blue Cross/Blue Shield. In total I am paying \$338 per month for health insurance. Because Medicare will not pay for maintenance tms, I am paying an additional \$600 per month for treatments every other week. If BC/BS rates go up I won't be able to afford both the insurance and the tms maintenance treatments. I can almost guarantee I'll reach a personal health crisis; it's just a question of when.

This is not healthcare. It's a lottery, and a very expensive one. I urge the Green Mountain Care Board to deny rate increases and move to a universal care system as outlined in Act 48.

Connecting the Dots



Backdrop for the This Conversation

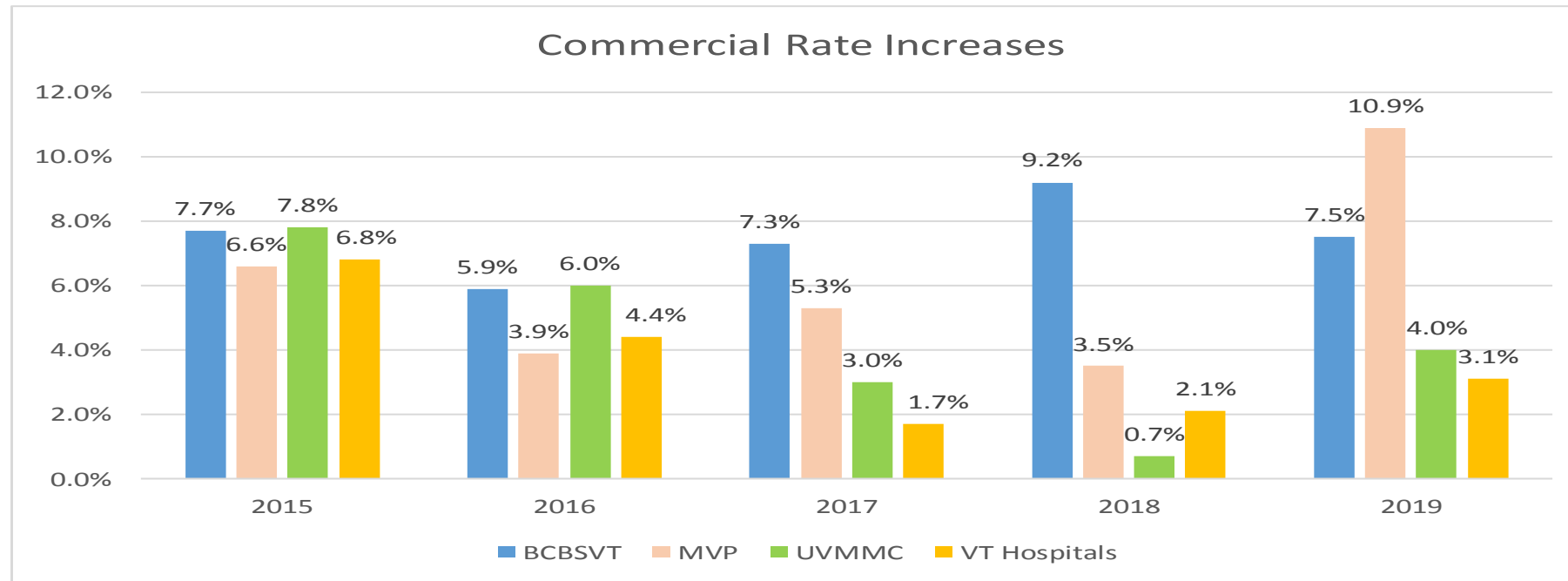
- The intent of this presentation is to serve as a starting point to share initial observations and thought to engage in a conversation on how we may work together to better understand the relationship between VT Hospital rate increases and those approved for Commercial Insurers
- Used the best data available, it may not be perfect in all cases
- Where initial observations can be drawn they should be viewed as directional at this point
- There are questions and/or opportunities to better align data elements which may require more in-depth understandings of data points and references
- To truly understand how the commercial insurer rates requests align and where it makes sense that may not align with the GMCB Hospital Budget Review process will most likely require more time, effort, and collaboration between the GMCB, VT Hospitals, & the Commercial Insurers

Where to Start: Focused on 4 areas to start

- What question(s) or information points are we trying to connect between the Hospitals Budget review process and Commercial Insurer Rate setting process?
- Where to start: identify the differences between GMCB hospital budget review and commercial insurer rate setting process
 - 1) Timing for each review process
 - 2) Base evaluation period (starting point) to calculate % change to understand true growth/decline rates
 - 3) Core data definitions
 - 4) To what extent are items outside the GMCB hospital budget review processes driving rate increases in commercial insurers premium rates which are then passed on to Employers and other Premium Payers
- Share initial observations on each of the 4 items above :
 - Identify areas where data sets are not aligned or may be applied differently
 - Opportunities to draw better correlation between the two processes
 - Identify data sets which cannot or shouldn't correlate between the two processes
 - Areas where more time and work effort necessary to understand if there is opportunity to better align the two process
- What's possible for the 2019 review process?

What Is Driving the Difference Between Hospital Approved Rates and Commercial Insurers Approved Rates?

Approved commercial rate increases between VT Hospitals and Commercial Insurers were in similar ranges through 2016. Beginning in 2017 there began to be noticeable difference between VT Hospitals' approved rates and Commercial Insurers' approved rates, which subsequently get passed on to VT Employers and Individuals.



Notes:

1. BCBSVT & MVP rate increases are representative of VT Health Connect PMPM increases
2. BCBSVT & MVP 2019 rates not yet approved by GMCB; all other rates are representative of GMCB approvals and do not capture differences in submitted rates
3. UVMC rate is shown as submitted with its FY2019 which has not been approved yet by GMCB.
4. BCBSVT 2019 rate of 7.5% reflects their initial filing, an updated filing request was submitted to GMCB sometime the week of 7/16/18 of 6.9%.

Connecting the GMCB Hospital Budget review Process & the Commercial Insurer Rating Filing Process

- Where to even start?
 - There's so much data: what's meaningful and what's not?
 - Where are there clear connectives?
 - Where are there clear disconnects?
 - What disconnects are understandable?
 - Where could there be opportunities to better connect?
 - Is there groundwork which would be established today and expanded on in future cycles to provide more transparency of what factors/areas driving changes in rates?
 - Without truly understanding what the key factors are, is it difficult to determine where, how, and with whom to establish better review/control processes

Connecting the GMCB Hospital Budget review Process & the Commercial Insurer Rating Filing Process

- Each process has a very established review processes
- Data review elements are very well known to each individual process
- Over time processes have served each individual functional purpose very well
- Consumers demand and deserve more transparency on connection
- Better understanding is a must
- It complicated
- Where/how to even start to see where there could be connectivity:
 - needed three years of rate filing data (slide 14)

1) Timing of Respective Process

Month:	July	August	September	October	November	December	January	February	March	April	May	June	July	August	September	October	November	December	
Commercial Insurer Rate Review Process	GMCB Rate Review / Approval		Market Plans & Open Enrollment for Employers/Plans			Implement Rates with Providers	Plan Year: 2019 Calendar Year Rates												
Hospital Budget Review	GMCB Budget Review / Approval		Hospital Fiscal Year 2019																
Commercial Insurers and Hospitals Negotiate Rate Schedule for 2019 Plan Year					Commercial Insurers and Hospitals Negotiate Rates		Implement Rate Schedules in System	Plan Year											

Initial Observations: Timing Differences

- Hospitals work on a fiscal year, October – September and Commercial insurance plans work on a calendar January – December.
- This does cause some challenges with connecting the two processes:
 - For example with the hospital's fiscal year starting in October and most commercial insurers new rates taking effect in January, the effective commercial impact on a hospital's fiscal year is 75% of the actual commercial rate lift in January. (i.e. a 4.0% commercial rate lift for a hospital is actually a 3.0% effective impact on a hospital fiscal year basis)
- To better align these timing differences the hospitals would have to change their fiscal year to January – December calendar. There would be many more complexities to consider before a chance such as this could even start be a possible consideration.
 - A chance for such as this would be highly unlikely

2) Initial Observations: Base Evaluation Periods

- Commercial insurance process uses Actual-to-Actual, adding and subtracting various trend factors and other adjustments to determine what's necessary in their rate filing
- Hospital Budget Review process uses Budget-to-Budget to express change and limit growth
- There is definite opportunity to better align these processes today which can be and developed more in the future
 - Establishing the base period on actual in the hospital budget review process similar to the commercial rate filing process is a possibility

3) Definitions of Core Data Elements

Commercial Insurer Review Process:

- A. Total Actual Claims & Other Expense experience with future trend factor projections
- B. Total Member Months
- C. Calculate Per Member Per Month (PMPM) cost = A / B

Hospital Budget Review Process

- A. Total Patient Revenue: Prior Year Budget + approved reconciliation items
- B. Total Patient Revenue: Submitted Budget
- C. GMCB Budget Guidance: Revenue Cap % Δ from Budget to Budget = $(B-A) / A$

Initial Observations: Definitions of Core Data Elements

- Commercial insurance process uses PMPM
 - APM also uses PMPM
- Hospital Budget Review process uses Total Patient Revenue
- Comparing these two definitions are apples and oranges
 - Processes need to migrate toward more comparable approaches
- Budget Review process needs to start to transition to some PMPM or per patient calculations
 - Even if Board and hospitals are willing, it will take some time and require multiple years of focused effort to get hospital reporting and budget review process reporting systems in place as this metric is not easily available for each hospital.
 - FY2020 process: is there an initial place to start this change?

4) To what extent are items outside the GMCB hospital budget review processes driving rate increases in commercial insurers premium rates which are then passed on to Employers and other Premium Payers

Commercial Insurer Review Process:

- A. Total Actual Claims experience with future trend factor projections
 - 2019 Rates = +/- adjustments 2017 actual claims compared to prior two year's rate filings
 - +/- adjustments from 2018 rate filing
 - +/- 2019 rate filing trends/projections
- B. Cost or Savings related to items outside the medical expense trend
- C. Total Rate Change = A+B
 - This information related on a PMPM basis

Hospital Budget Review Process

- A. Only one component of item A under the Commercial Insurer Review process is part of Hospital Budget Review Process.

Initial Observations: To what extent are items outside the GMCB hospital budget review processes driving rate increases in commercial insurers premium rates which are then passed on to Employers and other Premium Payers

- Commercial Insurance evaluation process is inclusive of all medical claims experience and trends regardless of where the point of service is. It also includes other adjustments which are outside the medical claims experience.
- Hospital Budget Review process only reviews a portion of the medical expense experience which is included in the Commercial Insurance Rate Filings.
 - According to BCBS rating filing, approximately 53% of medical costs are related to facilities impacted by GMCB’s Hospital Budget Review process
- Commercial Rating Filing process needs to summarize and more clearly articulate what is driving the % change in both total claims and PMPM in the following manner:

VT Facilities and Providers impacted by GMCB Hospital Budget Review process	Facilities and Providers <u>Outside</u> the GMCB Hospital Budget Review process	Other Rate Adjustment Factors which are Not Included as Part of the Medical Expense Claim Experience
	VT Facilities and Providers Dartmouth Hitchcock Medical Center Other Out-of-State Providers RX - Pharmacy	Administrative Costs Contribution to Reserves Changes in Taxes & Fees Other

- This may be possible in the 2019 rate filing?

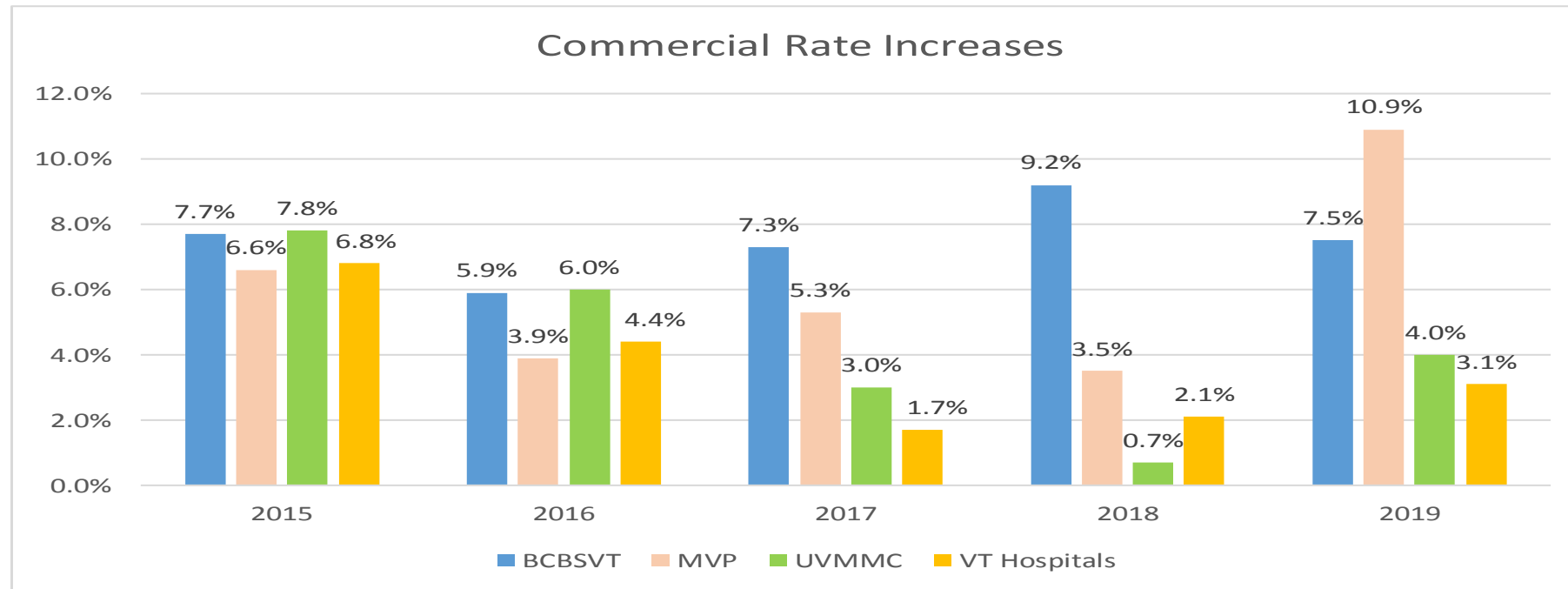
L&E Actuaries: BCBS VT Health Connect Rate Review Filing				Is there Opportunity to Correlate item to Hospital Budget Review Process?			
Rate Year	2017	2018	2019	Yes	No	Maybe?	
Item	Plan	VT Hlth Connect	VT Hlth Connect	VT Hlth Connect			
1	Actual to Projected Claims Experience difference	2015 0.4%	2016 1.1%	2017 0.9%			X
2	Difference in trend from:	2015 to 2016 -1.6%	2016 to 2017 0.0%	2017 to 2018 1.2%	X		
3	Trend For New Plan Year (Medical & Pharmacy): unit cost & Utilization/Intensity	2016 to 2017 5.3%	2017 to 2018 5.4%	2018 to 2019 5.9%			
	<i>Total Medical Trend:</i>	4.3%	4.7%	4.1%	X		
	<i>Unit Cost</i>	3.3%	2.6%	2.7%	X		
	<i>Utilization/Intensity</i>	1.0%	2.0%	1.4%			
	<i>Total Pharmacy Trend:</i>	10.2%	8.9%	13.3%	X		
	<i>Unit Cost</i>	9.7%	8.4%	11.0%	X		
	<i>Utilization/Intensity</i>	0.5%	0.5%	2.1%			
4	Changes to Population Morbidity Adjustments	3.6%	0.7%	2.9%			X
5	Changes to Other Factors	-4.7%	2.6%	0.4%			X
	<i>Removal of Penalty for the Individual Mandate</i>	0.0%	0.0%	2.0%			X
	<i>Demographics (avg age-gender): aging population</i>	0.6%	1.0%	0% ¹	X		
	<i>Change in Pharmacy Contract: pharmacy benefits manager premiums</i>	-0.9%	-0.3%	-0.9%		X	
	<i>Impact of selection</i>	1.0%	2.0%	-0.7%			X
	<i>Other</i>	0.5%	0.0%	0.0%			X
6	Changes to Manual Rating Adjustment	0.0%	0.0%	0.0%			X
7	Changes to Risk Adjustment	0.6%	0.3%	-2.5%			X
8	Changes to Federal Transitional Reinsurance Recoveries	2.6%	0.0%	0.2%		X	
9	Changes in Administrative Costs	0.5%	-0.4%	0.2%		X	
10	Changes in Contribution to Reserves	1.4%	-0.1%	1.0%		X	
11	Changes in Taxes & Fees	-2.9%	3.2%	-2.8%		X	
12	Changes in Single Contract Conversion Factor	-0.4%	0.9%	0.0%			X
12	Changes in Actuarial Value	3.6%	-1.5%	1.6%			X
Summary Total (sums items 1-12)		8.40%	12.20%	7.60%			
BCBS Proposed Avg. Rate Increase over Prior Yr Premium Levels		8.20%	12.70%	7.5% ²			
<i>Effective Increase after accounting for Advance premium tax credits</i>		n/a	n/a	n/a			
<i>Range</i>		5.2%-9.5%	5.8%-14.6%	5.8%-14.6%			
GMCB Approved Rate Increase		7.30%	9.20%	n/a			
Notes:							
1) The impact of an aging population is 1%. The projected impact for the change in demographics matches the projected impact in last years filing, so this assumption does not have an impact.							
2) BCBSVT 2019 rate of 7.5% reflects their initial filing, an updated filing request was submitted to GMCB sometime the week of 7/16/18 of 6.9%							

What Other Analysis Maybe a Possibility for the 2019 review process?

- The information is readily available from the FY2019 Hospital Budget review process and the 2019 Commercial Insurance Rate filing to perform the following analysis as a % of change.
 - GMCB Budget Review Process
 - Identify possible categories for comparison
 - Calculate the % change from FY2017 Actual to FY2019 Budget Submission
 - FY2017 actual is the closest information available to the Commercial Rate filing bases point of actual claims experience in 2017
 - Then compare those % changes to each of the relevant items and the correspond growth or decline factors from the 2018 & 2019 Commercial Rate filings

Take the Time to Truly Understand and Clearly Articulate What are the Factors Truly Driving the Change in Commercial Insurer Rates for Vermont Individual and Employer Premiums

What's Driving the Difference Between Hospital Approved Rates and Commercial Insurers Approved Rates?



Notes:

1. BCBSVT & MVP rate increases are representative of VT Health Connect PMPM increases
2. BCBSVT & MVP 2019 rates not yet approved by GMCB; all other rates are representative of GMCB approvals and do not capture differences in submitted rates
3. UVMC rate is shown as submitted with its FY2019 which has not been approved yet by GMCB.
4. BCBSVT 2019 rate of 7.5% reflects their initial filing, an updated filing request was submitted to GMCB sometime the week of 7/16/18 of 6.9%.