African Service Committee ○ Children's Defense Fund-New York
Coalition for Asian American Children + Families ○ Community Service Society of New York
Consumers Empire Justice Center ○ Entertainment Community Fund ○ Hispanic Federation
The Legal Aid Society ○ Make the Road New York ○ Medicare Rights Center
Metro New York Health Care for All Campaign ○ New Yorkers for Accessible Health Coverage
New York Immigration Coalition ○ Public Policy and Education Fund of New York/Citizen Action of New York
Raising Women's Voices-New York ○ Schuyler Center for Analysis and Advocacy
South Asian Council for Social Services ○ Young Invincibles

August 6, 2025

Adrienne A. Harris, Superintendent
Alice McKenney, Deputy Superintendent for Health
Frank Horn, Chief Actuary - Health
NYS Department of Financial Services
One Commerce Plaza
Albany, NY 12257

RE: Individual and Small Group Consumer Comments - 2026 Benefit Year

Dear Superintendent Harris, Assistant Deputy McKenney, and Chief Actuary Horn:

Health Care For All New York (HCFANY) is a statewide coalition of over 170 organizations dedicated to achieving quality, affordable health coverage for all New Yorkers. We respectfully ask that you accept this supplemental submission of selected individual consumer comments, by carrier, to our June 25, 2025 comments. In past years, HCFANY has been able to incorporate individual consumer comments into its carrier-specific comments. Unfortunately, this year the individual comments were posted on the Department's website a week ago, which was well after the 30-day time frame for public comments.

On June 25, 2025, HCFANY submitted rate review comments to the Department for each carrier on the individual market. Below are summaries of these letters, accompanied by enrollees' comments, separated by carrier. Please refer to HCFANY's full comments for a more detailed explanation of its carrier-specific findings.

A. IHBC

Independent Health Benefits Corporation (IHBC) is a non-profit health insurer that offers EPO plans in the Buffalo region. Despite 25 percent rate increases for the past two years, IHBC now asks for the highest rate request of all carriers – 38.4 percent. If approved, IHBC members will have seen their average premiums skyrocket from \$469 per member per month in 2022 to \$1,033 per member per month in 2026. HCFANY recommends that the Department reduce the following components of IHBC's rate request: expense ratio, annual claim trend, profit adjustment, and claimed miscellaneous adjustments. Given the size of IHBC's requested increase, the Department should also consider requiring it to set a higher MLR goal to avoid rate increases that would likely drive its members away.

Health Care For All New York
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We urge the Department to consider the concerns of Independent Health's enrollees, who have voiced their objection to its proposed rate increase:

- "The current plan, before subsidies, is currently $636.19 per month., and the 2026 proposed rate increases to $899.94 - thats a $3,165.00 annual increase (263.00 per month) for virtually no additional benefits! My regular annual medical expenses will not come close to reaching the deductable in 2025- which means I am paying out of pocket for 95% of medical care anyways. … So, between premiums and deductable, I will have had to spend $14,500 of my own money before Independent Health will begin to pay. That accounts for 25% of my take-home pay!!!!! What relatively healthy NYS resident can afford to pay 25% of their take-home pay for something they'll likely see no benefit of with the exception the unlikely event of a hospital stay? … But, between high taxes, high student loan payments that I can't get out from under, and now even higher health insurance premiums, and the ever increasing daily cost of living, I can't afford to buy a home. I can't afford to save for my future or invest in my retirement. I can't afford to pay ahead on my student loans so I stop getting burried in interest. There's a point in time where I must weigh the risks vs the benefits when trying to budget, and it won't be much longer before health insurance is the expense that needs to get eliminated from my budget."

B. United

UnitedHealthcare is a for-profit HMO that serves the Mid-Hudson, New York, and Long Island regions. United seeks a 36.6 percent rate increase, the second-highest rate request in the individual market. Should the Department approve United's rate increase request, its members would be asked to pay over $5,200 more a year in premiums. HCFANY recommends that the Department consider reducing the following components of United's rate request: profit ratio adjustment, annual claim trend, and claimed miscellaneous adjustments.

We urge the Department to consider the concerns of United's enrollees, who have voiced their objection to its proposed rate increase:

- "We currently pay $2,724.88 per month for a policy for just my husband and I. That is $32,698.56 per year not including deductibles or co-pays. It is already crushing financially. My husband and I both have had cancer so we cannot afford to go without health insurance. If UHC's outrageous request is approved, our monthly premium will rise to $4,534.20 which equates to $54,410.40 per year. There is no way we can afford that. We are already skipping on other things to afford United Health Care's premiums. In addition, UHC does whatever they can to reject claims including by saying we have other insurance which we do not. … If it is approved, they will effectively forcing many New Yorkers go uninsured."

- "A 35% increase is outrageous. For one person, that's nearly $500 more per month—on top of already unsustainable premiums. I've already been forced to remove my child from my plan because it was simply unaffordable. Now you're asking even more from individuals who are already stretched thin? The cost of basic care—medications, doctor visits, preventive screenings—is already sky-high. If this hike goes into effect, I will have no choice but to find a new insurance provider. This is not just a financial burden—it's a threat to the health and stability of people like me. I'm a working mother and a sole business owner."

- "We are on a fixed income and the insurance premium is still more than our mortgage. Last year we did receive a reduction of .02 cent so our premium went from $1,695.71 to $1,695.69. We definitely cannot afford an increase for 66.4% to the insurance premium. This is double of the 33% requested last year. This is insane and so unfair when you are seniors trying to survive in today's economy. Home owner's insurance went up this year. We've been in our home for 28 years which has never been considered to be in the flood zone area. Well, they re-configured the flood zone area and we must now live 75 miles from the water front area, the flood zone. So what do we do, have our house moved or do we move, or do we stay and try to pay the increases to our home owner insurance policy and our mortgage, do we not continue with our medications and continue to cut our grocery bill? How do we survive? What happened to our golden years, are they just a myth, a thing of the past? Can we breathe? What do we do now? We need help more now than ever before."

C. Excellus

Excellus is a non-profit insurer that offers EPO plans in the individual market and serves the Albany, Buffalo, Mid-Hudson, Rochester, Syracuse, and Utica/Watertown rating regions. Excellus is requesting a 24.8 percent average rate increase in 2026. Granting it in full would mean an average premium of $998 per month in 2026, which would be an average annual premium increase of $2,378 for its members. HCFANY recommends that the Department consider reducing the following components of Excellus's rate request: annual claim trend and profit ratio adjustment.

We urge the Department to consider the concerns of Excellus's enrollees, who have voiced their objection to its proposed rate increase:

- "A 25%+ increase in premiums is absurd. Please, we can barely afford the health insurance now. My premiums will be going from $634/mo. to $794/mo. That is almost $800/month... and this plan isn't considered HSA-eligible. In addition to paying rent, this figure is simply not affordable."

- "We cannot handle a rate hike like this. We are stretched thin already. I've taken a part time job on top of everything else to help cover increased expenses across the board: food, electric, heating, car repairs, house repairs, medications. We are not making enough money to put into savings for ourselves or our child."

- "Based on what I pay now, a 21% increase would make my monthly healthy insurance premium bigger than my monthly mortgage payment. It would force me to go uninsured."

D. Highmark

Highmark Western and Northeastern NY, formerly HealthNow/BCBS Western NY/BCBS Northeastern NY, is a non-profit carrier that offers EPO plans and serves the Albany, Buffalo, and Utica/Watertown regions. Highmark seeks a 23.9 percent average rate increase for 2026, the fourth highest request of all carriers and significantly higher than the weighted market-wide average request of 13 percent. If approved in full, this would mean its average premium will increase from $884 per member per month to $1,096 in 2026. HCFANY recommends that the Department consider reducing the following components of Highmark's rate request: annual claim trend, profit ratio adjustment, and claimed miscellaneous adjustments.

We urge the Department to consider the concerns of Highmark's enrollees, who have voiced their objection to its proposed rate increase:

- "The proposed increase would send my premium north of $1100/month. This would be life altering and force me to make choices between quality of life and health care."

- "I'm writing to oppose the proposed 27.1% increase to my NYS Marketplace - Highmark Blue Access EX Standard Bronze plan. This would raise my premium from $2,300 to nearly $2,900 per month — or almost $35,000 a year — for the most basic coverage. To be clear: my health insurance is now more expensive than the mortgage on my 5,000 sq ft home. That should not be possible. This plan offers high deductibles and minimal benefits, yet it's treated like a luxury product."

E. Oscar

Oscar is a for-profit EPO serving the New York City and Long Island regions. Oscar seeks a 17 percent rate increase for 2026, well above the market-wide weighted average of 13.1 percent. Should the Department approve Oscar's request, its new premiums would increase from $969.37 to $1,134.42 per member per month. HCFANY recommends the Department consider reducing the following components of Oscar's rate request: expense ratio, profit adjustment and annual claim trend. The Department should also consider requiring Oscar to set a higher MLR goal.

We urge the Department to consider the concerns of Oscar's enrollees, who have voiced their objection to its proposed rate increase:

- "As a self-employed individual, I already shoulder the full cost of my health insurance. These back-to-back increases are not only unsustainable, they're alarming. In fact, if the proposed change goes through, my plan's premium will have increased by 51.48% since 2023—and a staggering 110.75% since 2019. My income hasn't doubled in that time. Like many others, I'm facing higher costs across the board—housing, groceries, childcare. This level of rate escalation puts people like me in an impossible position: choosing between essential coverage and financial stability. I urge you to reconsider the scale of this increase and take into account the real-world impact on individuals and families trying to stay afloat."

- "It's inexcusable to have health care plans at this metal level cost almost as much as my monthly rent. This would be a severe hardship, especially since my doctors don't take most plans offered through NY Health insurance marketplace, and switching plans is therefore incredibly hard to do. Please don't allow Oscar to go forward with this plan-- $880/month is already incredibly high and should frankly be much lower than that. I'm a self-employed author, so some years my income is low enough that I receive tax credits/ help with my health premium, but because of how advances are structured, other years I'm barely priced out. This makes price variability in plans, especially big increases in price like this one, especially hard to handle."

F. **Healthfirst**

Healthfirst PHSP is a not-for-profit insurer that offers HMO plans in New York's individual market and serves the New York City and Long Island rating regions. Healthfirst is requesting a 14.3 percent rate increase for 2026, which falls above the weighted average request for the market. If approved in full, members would see an average $1,380 increase in their annual premiums. HCFANY recommends the Department consider reducing the following components of Healthfirst's rate request: annual claim trend, high GLP-1 adjustment, expense ratio, and profit adjustment.

We urge the Department to consider the concerns of Healthfirst's enrollees, who have voiced their objection to its proposed rate increase:

- "I humbly request that you consider not approving the Proposed Premium Increase Rate for 2026 of 15.5%. I understand that prices of everything are going up, but I don't know if my husband and I can still swing it with the said increase rate, as we are going through a lot for all the medications and cancer treatments. Please do not grant Healthfirst request change of rate so I may have some sort of hospitalization health plan. I truly appreciate your understanding."

- "I have and take an expensive medication, so I have no choice but to be on a Silver plan that will cover my medications. Both the premium and deductible have gone up significantly over the years, such that I spend close to $10,000 on health costs annually. The APTC has helped in recent years, but given that it is likely to disappear for middle income people like me after December, this rate change would increase my premium to about $1,000 per month. Even if the

$2,100 deductible stayed the same, I'm looking at spending $14,000 per year on health costs just for myself. (I also have full-pay Child Health Plus, at $278 per month.) These costs will drive me out of New York City. It is unconscionable that working people like me are expected to bear such a high burden of medical costs. Please deny this rate change."

G. <u>CDPHP</u>

CDPHP is a non-profit health insurer that offers individual HMO plans in the Albany, Mid-Hudson, Syracuse, and Utica/Watertown regions. CDPHP seeks a 13.7 percent average rate increase for 2026, and if approved, average premiums would be $1,017 per member per month—<u>requiring its members to pay on average $1,467 more annually.</u> HCFANY recommends the Department consider reducing the following components of CDPHP's rate request: annual claim trend and expense ratio.

We urge the Department to consider the concerns of CDPHP's enrollees, who have voiced their objection to its proposed rate increase:

- "I pay personally for my health insurance and every year I struggle to cover my health care costs. Each year the rate increases and I am forced to cut out other necessary things in my budget in order to pay for health insurance. At this point there is no room in my budget for an increase of this nature. With the cost of food and daily life expenses rising I do not know how I will be able to pay for an increase, I am paying almost $2000 a month already for health insurance. If a rate increase of this magnitude is approved I will need to choose lower quality health insurance and this will directly affect my health needs."

- "I've had this same plan for five years now, and it's exponentially increased in price. Two years ago, I paid $572.88 per month. Now I pay $743.10 (that's a 29% increase in two years!), and the proposed increase is 12%. That would make it a 41% increase, almost double. That SO far outpaces inflation, it's ridiculous. How is this allowed? This makes health insurance absolutely unaffordable, especially for single people. There has been no corresponding increased coverage to offset this, so I'm just gonna pay twice as much for the same insurance."

H. <u>Anthem</u>

Anthem HP, formerly Empire, is a for-profit health insurer that offers individual HMO plans in the Albany, Long Island, Mid-Hudson, New York City, and Upstate (Clinton and Essex) regions. For 2026, Anthem HP seeks a 10.3 percent rate increase. If approved, the weighted premiums would be $983 per member per month—<u>an average increase of $1,102 in member's annual cost of insurance.</u> HCFANY recommends that the Department consider reducing the following components of Anthem's rate request: annual claim trend, profit adjustment, and adjustment for grace period factor.

We urge the Department to consider the concerns of Anthem's enrollees, who have voiced their objection to its proposed rate increase:

- “I currently earn around $50,000 a year before taxes, and I pay for my health insurance entirely out-of-pocket. If this increase is approved, my monthly premium will rise to $1,040, or $12,480 annually—which would consume over 30% of my take-home income. This isn’t sustainable. Like many self-employed New Yorkers, I don’t have an employer sharing the cost. I’m responsible for every cent. After taxes, rent, food, transportation, and basic living expenses, there’s almost nothing left. Health insurance at this price point becomes more of a financial threat than a source of protection. Approving this rate hike would force people like me to consider going without coverage - not because we want to, but because we simply can’t afford it. … A 10% increase might look small on paper, but for those of us living close to the edge, it’s devastating.”

- “My husband and I were shocked today to receive the letter stating that our premium could go AGAIN, after it just went up significantly EACH of the last TWO years! An increase of 10.3% for 2026 is outrageous! We have been working hard to start a company for four years. We are hopeful that over the next year, we could be more successful but, in the meanwhile, we are already struggling to pay the monstrous premiums of OVER $2000 per month. We are using up our 401K just to pay our expenses and this premium is a significant portion of those expenses.”

- “My current monthly premium ($769.90) is barely affordable and I feel like this plan is above market rate. Honestly, I am struggling to pay my rent due to the high cost of insurance. I am trying to find staff work to get the insurance premium off my personal expenses because it is such a huge lift each month - and also, most doctors don't take this plan. And when they do take it, I still get extra bills due to high out of pocket deductibles.”

I. <u>MetroPlus</u>

The New York City-sponsored MetroPlus is a non-profit HMO that serves the New York City rating region. MetroPlus is requesting a 10.1 percent rate increase for 2026, which is slightly lower than the weighted average request of 13.1 percent. If approved, <u>its average premiums would be $1,115 per month before subsidies</u>, an increase of over $93 a month. HCFANY recommends that the Department consider reducing the following components of MetroPlus’s rate request: annual claim trend, expense ratio, and profit adjustment. The Department should also require it to set a higher MLR goal.

We urge the Department to consider the concerns of MetroPlus’s enrollees, who have voiced their objection to its proposed rate increase:

- “I am writing to express my concern regarding MetroPlus Health Plan’s request to increase my health insurance premium from $1,583.41 to $1,654.60 for the 2026 plan year. As a policyholder, I find the current premium rate already places a significant financial burden on my family. The proposed 4.5% increase would further strain our budget, making it unaffordable to maintain this essential coverage. While I understand that rising healthcare costs may necessitate adjustments, I respectfully urge the DFS to carefully review MetroPlus Health Plan's rate increase application to ensure it is justified and not excessive. Affordable access to quality healthcare is critical for New York families, and I am concerned that this increase could force us to seek less comprehensive coverage or forgo insurance altogether, which would have serious consequences for our health and financial stability."

- "I am living from pay check to pay check, I have my rent to pay and other living expence include my food and transportation expence. I have medical condition and I have to stop going to the doctor's because I am finding it difficult to pay my copay and then the deduckable bill plus my monthly premium. This increase will cost me half my monthly expensive. Please I simple cannot afford to pay a higher premium. I already made the ultimate sacrifice not to seek medical help, due to out of pocket payment. Thank you for your time to consider this matter."

J. <u>Fidelis</u>

New York Quality Healthcare Corporation, commonly known as "Fidelis," is a for-profit health insurer that offers HMO plans in New York's individual market, and serves all of New York's insurance rating regions. In 2025, Fidelis offers the lowest priced product in the State ($700 a month on average). <u>For the 2026 plan year, Fidelis seeks an 8.1 percent rate increase.</u> HCFANY recommends that the Department consider reducing the following components of Fidelis's rate request: administrative expense ratio, profit adjustment, and annual claim trend.

We urge the Department to consider the concerns of Fidelis's enrollees, who have voiced their objection to its proposed rate increase:

- "My annual income is approximately $32,000, and nearly one-fifth of that goes toward this insurance—and still leaves me with out of pocket expenses. I've already had to seriously consider going without insurance due to the high cost. An additional $41.28 per month makes it much more likely that I will no longer be able to afford coverage at all. This plan is supposed to be part of an affordable system, yet the cost is anything but—especially for those of us with modest incomes."

- "As someone living with a difficult, incurable chronic pain condition, this increase feels not only unaffordable but dangerous. I rely on consistent medical treatment to manage my symptoms and maintain any quality of life—and rising premiums threaten my ability to stay insured. I already pay a significant portion of my income for health coverage. This proposed increase of over 10% comes at a time when wages are stagnant and the cost of living, especially housing, is rising across the board. I'm doing everything I can to remain self-sufficient, but increases like this put stable healthcare access at risk. Healthcare is not a luxury for me—it is a basic necessity."

K. MVP

MVP is a non-profit health insurer that offers HMO and POS plans in New York's individual market, and serves the Albany, Buffalo, Mid-Hudson, New York City, Rochester, Syracuse, and Utica/Watertown regions. MVP seeks an 8 percent rate increase, the second lowest request sought by the individual carriers for 2026. Nonetheless, should the Department approve MVP's rate request, <u>its premiums would increase from $815 to $881 per member per month before subsidies</u>. HCFANY recommends the Department consider reducing the following components of MVP's rate request: claimed miscellaneous adjustments, annual claim trend, and profit adjustment.

We urge the Department to consider the concerns of MVP's enrollees, who have voiced their objection to its proposed rate increase:

- "Having health insurance is my single biggest monthly expense in the state of NY - more than rent, food, car payment... It is unconscionable that MVP is requesting a 3.6% increase in my premium. … you are doing this to the people who have no other means to obtain healthcare or have it subsidized. This is outrageous and should not be approved."

- "We celebrated the Affordable Health Care act when it went in place, because it gave us the opportunity to have proper health insurance at affordable rates. Since that enrollment, rates have continued to rise and rise fast. We are paying over $1,500 per month for 2 people with a Silver MVP plan. We had Platinum at one time and have reduced plans to try to save money. Now MVP is asking for yet another rate increase. I pay more for health insurance then I do for my Mortgage, Car and ALL my home utilities. I ask you to not only deny their increase, but someone has to look into a reduction of health care cost. Thank you."

- "I am the caretaker for 2 disabled siblings and have my own health issues. At this time of extreme economic uncertainty and the rise in cost of living it would be fair and appropriate to restrict any further increases to the cost of health care at this time. It is a necessity for basic living and is already unaffordable and causing extreme strain. Please consider my input."

L. Emblem

Emblem is a non-profit HMO health plan serving the Albany, Syracuse, Long Island, Mid-Hudson, New York City, and Utica/Watertown regions. In 2025, <u>Emblem charges consumers the highest premiums in the individual market at $1,556.68 per month</u>. Emblem is requesting a 0.9 percent average rate increase for 2026, the lowest of any carrier. HCFANY recommends the Department imposes a negative rate adjustment on Emblem, which can be achieved in the following areas: administrative expense ratio, annual claim trend, and claimed miscellaneous adjustments. The Department should also require it to set a higher MLR goal.

Emblem did not have any consumer comments posted for the 2026 plan year, likely due to its low rate request of 0.9 percent. However, this dearth may also indicate the impact its past rate hikes have had on membership and member engagement.

Thank you for your consideration of our concerns.

Very truly yours,

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