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Brackbill, Robert

From: Brackbill, Robert
Sent: Wednesday, October 10, 2012 10:09 AM
To: 'ronald.chronister@bipc.com'
Subject: UPE/Highmark Form A Filing: Public Comment Received from Ms. Bittner

Mr. Chronister,

The following public comment pertaining to the subject filing is being forwarded to you for appropriate response.

Robert E. Brackbill, Jr. | PIR | Chief, Company Licensing Division
Insurance Department | Office of Corporate and Financial Regulation
1345 Strawberry Square | Harrisburg, PA 17120
Phone: 717.783.2143 | Fax: 717.787.8557
www.insurance.pa.gov | www.chipcoverspakids.com

From: pearlreapaf@comcast.net [mailto:pearlreapaf@comcast.net]
Sent: Tuesday, October 09, 2012 7:33 PM
To: Brackbill, Robert
Subject: The latest in the media and the home front

Good Morning Bob,

It has been awhile since I contacted you. But then again, on the home front here life and Highmark has been quiet. Too bad it can't be said about them and the public.Both worlds are entwined and Highmark used to be customer focused. That is now in the history books.

Every since Highmark decided to "cut costs by laying off employees so the corporation would be in compliant with the new health care law" back in 2010, life has not been smooth sailing in the health care area for all who were let go. There was a consistence in information when asked by these people to those who posed as being in charged, There was always revisions done and no two waves of terminations were treated the same way, There wasn't a definite separation of the groups terminated in 2011 verses 2012. Just that has created major administrative problems on both sides with the majority on the members. shoulders.

I was lead to believe from CONEXIS who Highmark turned over the COBRA business to just as they were beginning to terminate people. I was told my COBRA coverage was in effect for 18 months. At the time of my exit interview at Highmark it was never discussed, never pointed out, never confirmed that I knew about it, That is the number one reason I had contacted CONEXIS at the very begininng. It was not until the first of September that I was notified by Highmark that my coverage was termed and I had until August 31st to select a new one according to the letter I received after Labor Day. Being that I was going on vacation in a few days and was out of one of my maintenance medications that I can not stop taking suddenly I had to move fast. I had worked with the a gentleman at CONEXIS who explained in detail about my COBRA and how it all worked. Something I did not know until that day. Where was HIghmark? working on their next deal that's where. The gentleman from CONEXIS was able to enroll me in a new plan but it was going to take over a week for my new id cards to reach me. He assured me that if any claims came in that they would be honored under the new group number.

Well, once I got home from my vacation I went to the HIghmark website to get my new group

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number to have it until the id card arrived. I noticed that Highmark still had my old group number listed and showing as active but had the term date as 9-1-12. The same claims dated **after** 9-1-12 were under the new group number where they belonged. When I inquired about this, Highmark replied that I had to submit a "formal" request" to term my previous coverage. Now, I worked in Highmark's membership department and dealt with situations like this for years. What went on between me and the gentleman from CONEXIS would be considered the "formal" notification and CONEXIS would either have direct access to the membership files or send Highmark an activity report on a scheduled basis. I did follow their instructions and contacted CONEXIS again,

I did receive my new ID card complete with new group number all fine and in good order. Then a few weeks later I received an explanation of benefits for services after the ID card was issued and the claim was processed under the old number. Today I received an explanation of benefits with neither, all it had was HIM363 instead of a the standard group number that they list on all the other explanation of benefits.

Now if this kind of red tape and inept handling of a retiree's health coverage is going on within the company, how can anyone think they could do a better job with peoples lives that they do not even know? West Penn Allegheny made the right decision about pulling out of the agreement once they heard about the bankruptcy plan. That idea should have been out on the table a long time ago. That and the plans of what Highmark has after the approval was granted. West Penn Allegheny has opened itself up down to their very soul for Highmark, yet Highmark is holding some very important information back from them. What kind of relationship is built on that? A not compatible one kind. There is no way that Highmark has the management in place to be able to do all that they have forecasted into the future.with or without an anchor hospital.

The first thing on Highmark's list if they get into West Penn Allegheny is to get rid of the union. They do not like them, never had them , never wanted them.

Please, it is bad enough for all who are still working for Highmark stateside currently, do not have more people be forced to joint the mass of horror. No one should work like that.

This job creation is not a good thing, it is a monster creation that no cape crusader could beat.

Peg Bittner
2351 Brownsville Rd
South Park PA 15129
412-854-3472
pearlreapaf@comcast.net

a person makes a title a title does not make a person. I respect a person