

Dear Chair Holvey and members of the House Business and Labor Committee,

I'm writing in support of HB2858, which would establish a clear and efficient process to resolve Consumer Complaints about violations of the Insurance Code.

Through this email, I would like to share my experience regarding a Consumer Complaint that we submitted to the Insurance Division back in 2012 as UHC denied to provide ABA coverage to our daughter in Autism Spectrum. Here is how this went:

- The complaint was initially filed with the Insurance Division on September 29, 2012. I received a telephone call from the Insurance Division suggesting an appeal to External Review. However, since the denial was on contractual grounds rather than medical necessity, no appeal to External Review was possible.
- After resubmitting the complaint by e-mail, we received a letter dated October 5, 2012, acknowledging the original complaint and stating that it would take up to 60 days to respond.
- The Insurance Division apparently received a response from the insurer on October 25, 2012, but didn't send it to us. It was sent to the Attorney General for review instead.
- On December 10, 2012, after contacting the Insurance Division for a status update, we received a telephone call informing us that the Division was reviewing the case with the Attorney General and hoped to have a response by the end of December.
- On February 6, 2013, we sent an inquiry to the Insurance Division requesting an update.
- On February 27, 2013, we received a written reply from the Insurance Division. For the first time, this included a copy of the insurer's response to the complaint, which responded only to the concerns about ABA coverage and not to the concerns about other apparently illegal clauses in the contract. The letter advised us that the Insurance Division considered the law about coverage of ABA therapy to be unclear, and suggested we consult with an attorney about private legal action.
- I had to purchase another insurance policy to provide the coverage that I needed for my daughter.
- In November 2014 – two years after we filed our complaint – the Insurance Division published a bulletin confirming that the ABA exclusion in your plan really was illegal all along
- But, even though we now all agree that the denial was illegal, there still hasn't been any enforcement or compensation for our extra costs
- 4 and a half years later, our complaint is still under investigation.

Several supporting documents attached.

Regards,

Uday Das