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Family's Medicare fight lingers

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"It's not over" - that's what Jessica Kulas said after another week of attempting to fix her parents' insurance nightmare -- one that she was told would be resolved Monday.

"Here we go once again. I'm afraid this is never going to end," said Kulas, the daughter of David, 83, and Florence Reed, 79, who live in a Spartanburg retirement community.

Her parents' saga of being dropped from Medicare coverage was chronicled last week in the Herald-Journal, prompting dozens of people to contact the paper with similar stories.

For the Reeds and Kulas, their helper, their story is still unresolved.

After taking four days off work and spending several hours on the phone, Kulas last week was assured her parents were re-enrolled in Humana's Gold Choice plan, one of the insurance providers for Medicare programs.

On Monday, both parents were finally given the correct Jan. 1 effective date.

That should have guaranteed their medical and prescription drug bills from that date forward would be paid.

But this week Kulas found herself in another battle with the insurance company over billing issues.

The Reeds have 22 unpaid claims, and Humana told Kulas that she had to call each physician's office and have them resubmit the bill, and also submit more payments for premiums.

Humana spokesman Jim Turner said the process should have been much simpler.

"This is the first time that I have learned of something like this happening," Turner said. "We will see how we can make sure that can't happen again."

More customers

Turner said Humana went from having 500,000 customers in 2005 to 3.4 million this year.

The company also added thousands of new employees to handle the changes in Medicare and the increased customer load, and it continues to hire more each month.

"We did our best to estimate (how many employees Humana would need). The volume (of new customers) exceeded our expectations," Turner said.

Now that enrollment for Medicare's Part D prescription drug plan is over, Turner said, Humana representatives are able to spend more time servicing customers.

"Most of those issues are getting resolved," Turner said.

But Humana customers Mabel Hayes of Woodruff and Joe and Julia Phillips of Cowpens still have complaints.

Hayes, 69, tried to cancel her Humana coverage in December and is still unsure whether it has been done.

Her daughter, Debbie Lambert, has been helping her for the last few months because Hayes has become so frustrated and embarrassed by what's happening.

"She won't go to the doctor because when she's there, they tell her that her insurance is messed up," Lambert said.

"It's just a mess. Total, total chaos."

Humana spokeswoman Mary Sellars said oftentimes there is a lag time between when someone requests a cancellation and when it goes into effect.

The Phillips were supposed to receive Humana coverage beginning Jan. 1, but then Joe, 77, received a letter that referred to him as a "former Humana member."

Julie, 65, spent several hours on the phone to get him reinstated.

She was told that she and Joe had two insurance companies -- one for medical, and another for prescription -- and that they should only have one.

She called Medicare to have both covered by Humana and was told that she was allowed to have separate companies. Julie called Humana and spoke to another representative who agreed and assured her that everything had been resolved.

"I'm just waiting and hoping," Julie said.

Other complaints

Humana isn't the only insurance provider that has had complaints.

Evelyn Morrow of Inman enrolled her husband, Lawrence, with Aetna in December because he has

trouble hearing and wasn't able to do it for himself.

Two weeks later, they received a prescription drug card in her name and not his.

She called Aetna and was told to call Medicare.

Medicare told her that Aetna made the mistake.

She called Aetna back, and they pointed the finger back at Medicare.

She called Medicare again and instead of trying to fix the problem, she asked if they could remove her husband from her plan and start one of his own.

Her husband finally received his own card, and they have been able to fill his prescriptions without any problems.

Seeking help

Many of those people seek help from other senior agencies like the Lieutenant Governor's Office on Aging in Columbia.

Spokesman David Lucas said his office has had fewer callers since the enrollment period ended.

Before, there were between 80 and 100 calls a day, and now there are between 24 and 40 a day.

U.S. Rep. Bob Inglis, R-S.C., said he's aware of all the problems seniors are facing right now.

"This is a new system that was instantly populated with millions of people," Inglis said.

"We would expect some startup problems, but there have been more than should have occurred."

Inglis said he expects problems to decrease as the people working for the agencies providing coverage for seniors become more experienced and less overwhelmed.

"It should not take intervention by a congressional office," Inglis said. "But we are happy to help."

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