1. The Background of my statement:

In 2020 due to the pandemic, I lost all employment and was only able to make a scant amount of money due to the government mandated shut down. I consulted Medicaid through JAFS and they enrolled me in Caresource for "affordable or no cost health insurance" during the year it was necessary to get coverage. I as on Caresource for approximately a year. I was called back to work at the end of approximately a year. I then requested and was successfully removed from Caresource via the JAFS. At no time was I aware that I had accrued a large balance.

## 2. What happened next:

Through Bob Weldon I learned that I might possibly have a recovery to pay back upon my death that I was unaware of.

I wrote to Dalton David to find out what the said balance was, if there was one. He connected me with Heather Wagner in the Ohio State Department of Medicaid.

3. Through Heather, I learned that during this period of time I had accrued over a \$15,000.00 balance. It was explained to me that it was collectible upon my death, basically leaving this burden on my family. I am and was in good health during the year I was on this plan. I think I maybe had 2 tele-health wellness checks as you couldn't go into a Dr's office and 2 - 3 bottles Levothyroxine which is about \$9 a bottle. I later found out for this service, I was being charged between 1200 and 1500 a month. I've carried health insurance my entire life. I have never

experienced a premium such as this for a person who is in good health.

4. My Issue with this: The complete lack of transparency. At no time, verbally or within any documentation, was it made transparent to me that this premium was being charged and expected to be paid back later. \$1200 to \$1500 a month for a healthy person is point blank, inflated and, if I may say so, quite suspect.

I've never bought any insurance policy in my life, that the premiums were obvious, revealed to me and after being reviewed were or were not agreed upon. With insurance, that simply doesn't happen.

The coverage was neither affordable NOR low cost. I'm not sure how they even arrived at that definition as it is beyond misleading.

Had I ever been presented with a plan that was costing me a premium such as the above mentioned premium, I would have flatly declined and looked in to ANY other option but that one.

After seeing this shocking balance, I requested documentation from Heather showing me that there were invoices/statements/running balances sent to me, either paperless, or paper. None were provided. I never saw one piece of evidence that this was happening while on Caresource.

I was informed via email that Estate Recovery was "not new" and had been in place since 1/1/1995. I was also

told that that information (the premium transparency) "wasn't a part of the enrollment process when I enrolled, but is now."

Again, at NO time would I ever have agreed to such a plan. I couldn't afford that when I DID have a job, let alone when I didn't.

Sincerely, Gayla Smith

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