Dept. of Commerce LTCI Complaints Log & Summary June 2018 to February 2022

PH= policyholder; HHC= Home health care; ALF= Assisted Living Facility

No.	Refrc. #	DATE	COMPANY	COMPLAINT
1.	r_50876	6/4/2018	Transamerica	Claim payment 28 days late despite numerous FU calls and erroneous information given to PH re when it was sent out.
2.	r_51807	3/27/2018	Brighthouse	Claim denied; PH in memory care, then fell with hospital/ surgery- then transitional memory care, back to memory care at senior living facility; LTC paid rent <i>only</i> , no nursing services paid during transitional memory care; LTC rescinded payment of senior living during transitional care.
3.	r_53930	8/21/2018	Transamerica	Claim denied; HHC benefit; home modifications and devices with receipts, photos, doctor's orders, and home inspection by LTCclaims denied.
4.	r_55174	11/10/2018	Transamerica	Claim denied for home health services at ALF; paid rent only.
5.	r_55359	11/27/2018	Transamerica	Claim denied; home health and community care.
6.	r_55462	11/30/2018	Bankers Life	PH in ALF 4 mos, met eligibility and claim was paid after elim period met. Last 2 weeks of care, transferred to hospice; BL requested docs; claimed not to receive them; numerous miscommunications, errors, and failures by BL to receive docs from PH, hospice, providers, etc.
7.	r_55709	12/28/2018	Transamerica	Dispute re HHC claims; TA claimed to not receive docs from HHC provider over and over; reoccurring communication failures; reoccurring nonpayment due to claims of not receiving documents. HHC provider confirmed paperwork sent.
8.	r_55717	12/28/2018	Transamerica	PH repeatedly sends documents, but TA claimed no receipt; faxes, emails, phone calls, etc. Provider and PH faxed in documents numerous times to various fax numbers; HIPAA violation by communication with non POA; claims not paid due to non-receipt, but PH and providers sent documents.
9.	r_56004	9/5/2018	Prudential	PH eligible due to Alzheimer's but claims denied, cited no ongoing assistance with ADLs or Severe Cognitive Impairment; PH has impairment per assessments; Alzheimer'swon't improve, incapable of living alone. PH qualified before and has the same diagnosis and medical records; must be in secure facility.
10.	r_56148	1/25/2019	CNA	HHC; erroneous payments made to wrong providers; denial of payment for one of two caregivers.
11.	r_56185	1/29/2019	Transamerica	PH lives in ALF due to macular degeneration; doctor, eye doctor, ALF all agree he needs to be in ALF and help with ADLs; TA denied claim, keeps asking for more info, gives different responses, run-around; they've given all information necessary.
12.	r_56187	1/29/2019	Transamerica	Claim denied, states ALF licensing doesn't meet requirements; memory care wing prescribed by DR; TA has agreed verbally that she meets eligibility; denying the room coverage.
13.	r_56243	2/4/2019	Senior Health of PA/SHIP	LTC keeps requesting forms, information, documents which they have already been provided; no claims paid in 2 years.

No.	Refrc. #	DATE	COMPANY	COMPLAINT
14.	r_56331	2/8/2019	Continental General	No payments for ALF; delay in claim; no attachment as noted.
15.	r_56425	2/15/2019	SHIP	Both independent and insurance assessment concurred both parties need assistance; HHC benefits denied; policy language indicates coverage; appealed, and LTC then approved, but CSR denied the claim citing a mistake in approval.
16.	r_56581	2/26/2019	Transamerica	PH no longer qualifies for coverage; had past trouble with TA, resolved with MN DOC assistance; LTC evaluation, then stopped payment after receiving benefits, cited survey from doctor; form filled out ONLY info from PH, not info from ALF/childrenanswers were incorrect; assistance with meals, incontinence, bathing, falls/mobility, medication; gave TA 3 different doctor letters citing cog. issues; TA states under review, getting run around.
17.	r_56605	2/25/2019	Unum	"overpayment?" [no other notes/description].
18.	r_56954	2/24/2019	Transamerica	"Claim denied, claim dispute/delay" [no other notes].
19.	r_57217	4/5/2019	Transamerica	PH found eligible by TA nurse assessment; satisfied 60 day elim; TA gave notice no longer waiving premium and required payment to bring policy current; TA rep cited that nurse assessment found no longer meets eligibility, but refused to provide details. Neither parent has improved.
20.	r_57548	4/28/2019	Transamerica	Stalling to pay; multiple requests for same info; unwilling to allow PH to talk to claims dept; denial arrived 102 days after claim filed; LTC ignored letter from TA CEO overriding denial; Alzheimer's, memory care, nurse assessment; never could get a definite answer or speak with anyone.
21.	r_57549	4/28/2019	NA	Met 100 day waiting period (paid OOP); ADLs, cognitive, LTC stated until insured is being fed by a spoon, they will not pay.
22.	r_57587	4/30/2019	Senior Health of PA/SHIP	Company changed ownership many times; has not paid LTC claims despite all premiums paid and letter of recertification; have not received any explanation of delay or denial of payment.
23.	r_57638	5/5/2019	Transamerica	Alzheimer's in ALF; denied based on lack of medical documentation despite in range on MoCA; appeal with comprehensive eval submitted; told response in 15 days; no response; called 15 days later and TA claimed they just received it.
24.	r_57650	No date	Transamerica	ALF; claim submitted, TA sent RN to assess; after 90 elim period, TA paid \$50.00 per day consistently from 5/2015 to 12/2018, then stated ineligibility; ALF changed ownership, new documenting system, some ADLs weren't transferred; RN from TA came back to reassess; PH not improved in any way; appealed with corrected service plan; TA claimed more info needed; TA delayed decision despite comprehensive information; only way to contact is by phone, wait times are excessive, no return phone calls, etc.
25.	r_57765	5/13/2019	Transamerica	Appeal in March, TA confirmed received 03/18; it's now been 40 business days TA received; been trying to resolve since October 2018; can't get resolution.

No.	Refrc. #	DATE	COMPANY	COMPLAINT
26.	r_57895	5/20/2019	Transamerica	Not been reimbursed for over 4 mos.; battle from first day to collect payments; in-home care and nursing home care coverage; met waiting period, applied to get hospital bed, took 4 mos. to get reimbursed (TA lost the check/didn't mail it); unpaid since Jan. 2018, mom just passed away.
27.	r_57971	5/24/2019	BCBS of MN	Contractual timeframe for deciding claims (30 days after receipt); claims were approved, then reprocessed and reversed after the 30 day decision period.
28.	r_57987	5/25/2019	CNA	Used policy once for 1 yr in ALF, then moved in with daughter; went into LTC in Jan 2019 and Medicare paid until Feb. 2019; submitted a claim from that day until she died, March 2019; CNA denied; different people give different info; continually stating didn't receive info needed, but PH had fax confirmation.
29.	r_8105	5/29/2019	Allianz	Alzheimer's; denied request for in-home care; PH has neuro determination and letter supporting Alzheimer's.
30.	r_58128	6/5/2019	Transamerica	ALF; TA refusing to pay final balance; not aware of the reason.
31.	r_58189	6/10/2019	Transamerica	Fall and injuries, nursing home and rehab, from there into ALF; then back to hospital and rehab, then back to ALF, 90 day elim, TA started covering; TA sent evaluators twice, then denied services based on the evaluation; evals are erroneousPH cannot do 5/6 of criteria from eval.
32.	r_58227	No date	Not specified	Sent letter from doctor re cognitive impairment; approved; one day later denial letter came; cited missing docs; provider sent everything, 3 wks later LTC claimed they didn't get everything, provider confirmed they sent everything.
33.	r_58300	6/11/2019	Transamerica	TA denying month of Dec. stating Medicare should have covered; Medicare did not cover because does not cover Federal employees; TA denied twice; nursing home since May 2018 and getting \$6200 per month since August (after 3 mos. elim).
34.	r_58434	6/21/2019	Cigna	LTD insurance; claim approval, insured called to find out when checks would arrive, no call back; another attempttold waiting for paystubs from employer, who has proof of sending; tried to contact supervisor, no response; thinks Cigna is stalling until SSDI is determined; PTSD.
35.	r_58581	6/27/2019	Thrivent Financial	Admitted to hospital, treated and released to rehab, social worker then stated moving home not an option; cognitive impairment, unable to care for self without help and supervision; Thrivent denied.
36.	r_58604	7/2/2019	Transamerica	2014 PH placed in ALF due to cognitive impairment; TA found met eligibility for benefits. Then in Oct. 2018 PH assessed; notified in April 2019 that PH became ineligible effective Feb. 2019never got a denial letter; told to appeal; they did, with doctor letter, run around ever since; continual insistence that docs haven't been sent when they were, delays, no return calls, can't get any help; now 4 mos no payment.
37.	r_58627	7/4/2019	Transamerica	PH sent all required paperwork numerous times, only to be told they need something more or more time to review; was told they had everything and would have decision on 07/01; when

No.	Refrc. #	DATE	COMPANY	COMPLAINT
				insured called 1st 2nd 3rdwas told no decision made; delaying processing claim.
38.	r_58940	7/22/2019	Genworth	Misrepresented progress on claim; disingenuous with dates, multiple requests for same documentation; delaying progress of claim.
39.	r_58946	7/23/2019	Guarantee Trust Life	Company dragging feet on paying monthly bills; care facility since 10/23/18; after 90 elim; every month payment comes later and laterpremiums always paid on time, why shouldn't claims be paid within a certain amount of time?
40.	r_59032	No date	Transamerica	Denial of ALF claims; has paid on policy since 2000; process long, inefficient, snail mail, faxes repeatedly reported missing, delays, rep. changes with every phone calls; TA did nursing assessment; more delays, claim denied due to 2/6 ADLs not met; never received denial letter until they called, then received it immediately; did appeal with assistance from the ALF and support letters/POC; TA indicated they turned appeal over to third party Consumer Affairs Deptno contact information provided.
41.	r_59167	8/5/2019	Transamerica	Diagnosed with Inclusion Body Myasitis (progressive muscle disease); requires 24 hour care; qualified for HHC in 2017 and 2018, but in 2019 TA decided she only meets 1 ADL; has fallen many times and could not live alone.
42.	r_59270	8/12/2019	Transamerica	HHC: shower, meals, laundry, house cleaning, 2x/wk; okayed by LTC; 90 day requirement fulfilled in 2018; TA has paid nothing.
43.	r_59699	9/6/2019	Transamerica	Nursing home for a year; claims filed monthly; insurance is supposed to reimburse; July and August have not been paid; TA states they are being processed; not processed in timely fashion, creating financial difficulties to pay for care.
44.	r_59704	9/8/2019	Transamerica	Premiums paid timely for 18 years; policy states monthly benefit payments will be made promptly; each month the reimbursement comes later and later; processing times reaching over 28 days; facility must be paid on time, benefits reimbursements should be made on time.
45.	r_59964	9/23/2019	Transamerica	Discharge from hospital to care center, then to memory care unit; 90 day elimination period ended; called many times and always gets runaround; TA always requesting more information despite providing it numerous times.
46.	r_60190	10/5/2019	Transamerica	HHC claim made to TA; TA stalling on payments; requesting irrelevant data: Admission nursing assessment, outcome and assessment information sent, daily visit notes; told varying deadlines for completing (21, 35, 10 days) or claim closed as incomplete; called claims, told they are waiting for health docs, HHC sends everything, but they are not receiving nursing assistance; now claim is under review; no payments have been made.
47.	r_60265	10/15/2019	LTCG	Submitted all required paperwork and LTC creates fictional hurdles to paying out benefit; has been eligible since 05/01/19 but have only been paid \$4500/\$21,000; reps never give

No.	Refrc. #	DATE	COMPANY	COMPLAINT
				accurate information and often state they don't know why the claims haven't been paid; repeatedly request more paperwork to fax and emails, and repeatedly claim to not receive it.
48.	r_60309	10/20/2019	Transamerica	Care facility resident in between hospital stays; has received no payments; should get 30% nursing home bed hold for hospitals days; has 0 elimination period; should start at day 1.
49.	r_60344	10/22/19	Brighthouse	When in TX BH paid HHC claims in full. Now in MN, continued HHC; BH has not reimbursed despite promptly providing invoices; multiple calls with BH and written requests, \$4,000 owed; BH requests docs provided, numerous confirmations received; now moved into care facility, BH deposited money into bank account, but no explanation or itemization as to what the amount covers.
50.	r_60450	10/25/2019	SHIP	Initiated claim; received phone call mom qualified and started elim period; SHIP didn't count 34 days spent in TCU and HHC prior; rep said not consecutive, but policy doesn't state consecutive; never received anything in writing; asked SHIP to review records from TCU; then PH went back to hospital and TCU, was told that SHIP not notified within 6 mos of loss so they won't count those days; 90 elim period should have been up; SHIP owes \$12,000 and increasing by \$90 per day.
51.	r_60566	10/27/2019	John Hancock	Paid over \$55,000 in premiums over 25 years; mom in independent living facility but required HHC through the facility; JH requested info about her needs, which she sent; after approx 3 mos. she called on status, they said they'd contact soon. Continued to call over next couple months, same response; during that time, she was paying full cost out of pocket; waiting almost one full year to get payments.
52.	r_60597	11/4/2019	Transamerica	Was approved to LTC on 09/17/18; TA then sent letter 07/19/19 that mother was re-evaluated and no longer qualifies; TA has not provided assessment; TA acknowledged the appeal, but has done nothing.
53.	r_60903	11/4/2019	CNA	Provided requested info only to be told they did not have it, or lost it; had to resend multiple times; Alzheimer's and dementia; they mailed, then re-mailed with tracking, then emailed documents. CNA continues to deny receipt, then later claims to have found it when presented with tracking information; have continued stalling to make payments.
54.	r_60932	12/2/2019	Not specified	LTCI repeatedly citing things missing or not received despite documents having been submitted and proofs of transmission; home health care, nursing home, and now assisted living; heath problems and dementia.
55.	r_61194	12/18/2019	Allianz	Policy purchased in 1996; delayed at every point in communication; hold times unreasonable, can't speak to a live person or receive timely answers to questions or clarifications on any questions, without putting it in writing and waiting for form response back; took over 11 weeks to notify no coverage of room and board; hospice care; policy is vaguely written.
56.	r_61470	1/10/2020	Not specified	ALF since July 2019; called Sept. Nov. Jan.; only received form

No.	Refrc. #	DATE	COMPANY	COMPLAINT
				letters stating need more time to process claim; bills for July-November have been submitted, and the rep. verified that; delays in payments and processing claim.
57.	r_61482	1/10/2020	CNA	Policy purchased 1988; moving into ALF, CNA denied, claiming ALF not licensed as skilled nursing facility (only nursing homes under 144A or certified as intermediate care facility covered); granddaughter asked CNA beforehand whether ALFs were covered under the policy and was told they were; director of ALF has never heard of a denial of their facility based on nursing facility wording.
58.	r_61543	1/15/2020	Penn Treaty	Independent living, recently evaluated for HHC, started receiving Oct. 2019; PT indicated will only cover services started in Oct. under assisted living potion of contract, family feels it should be covered as home care services because she does not reside in assisted living area of facility; supposed to have 1 year coverage for home care, 3 years coverage for assisted living; PT cited 144D.015 as basis.
59.	r_61908	1/29/2020	Continental General	Sent documentation of 30 day stay at nursing facility prior the hospice stay; since then, when they call CG for status, get a different person each time, calls are dropped, continually ask for more documents of cause of death (provided death certificate); elimination period was fulfilled.
60.	r_62719	3/11/2020	Transamerica	Called several times since Dec. 2019 to see why benefits not paid; TA says they are looking into it. No response from anyone.
61.	r_63085	4/13/2020	Transamerica	ALF; 94 years old; paid policy for 20 years; claim filed Nov. 2019; provided company with all requested documents; satisfied 90 day elim; no payment to date or word on resolution or why taking so long; called TA repeatedly, they say resolution coming soon; now saying internal discussion about claim; no time frame given for decision; over 5 mos
62.	r_63240	4/21/2020	Brighthouse	Parkinson's hospitalized, rehab, TCU followed by HHC each time; BH requested massive amounts of paperwork indicating they would satisfy claim 30 days after review; then fall at home and brain surgery, admitted to LTC memory unit; have sent everything requested; despite receiving paperwork, BH insists on obtaining directly from providers, but providers never received requests; providers tried faxing, BH never responded; docs have been sent multiple times in various manners; still not processed and paid; \$31,000 paid out of pocket with no reimbursement; no communication/response from BH.
63.	r_63346	4/28/2020	Thrivent Financial	Timely manner, no attempt to contact provider for clarification of diagnosis, unfairly delaying payment of claim, did not report lack of care to ALF; moderate to severe Alzheimer's, steady decline in cognition and physical; assessment confirmed need for care; Thrivent cited inaccurate and conflicting information from ALF; Thrivent continued to delay and give run around.
64.	r_63381	5/5/2020	Transamerica	Adult day care facility denied, facility not eligible; getting runaround, told different things.

No.	Refrc. #	DATE	COMPANY	COMPLAINT
65.	r_63411	5/7/2020	Transamerica	Filed claim, numerous calls since then; told 2/6 ADLs or cognitive impairment; qualified under incontinence and bathingverbally approved; told to have nursing assessment (6-8wk process), PH requested to be notified and present during evalTA did neither; after eval, TA had everything but delayed longer; then told was denied, gave different reasons; did an appeal, but not confident on response.
66.	r_63453	3/13/2020	Brighthouse	Two letters sent asking why they haven't received payment; have not received response; 4 monthly invoices submitted, but no payments processed.
67.	r_63642	5/27/2020	Thrivent Financial	Cognitive issues, memory care, TF insisting he leave his ALF for another Dr. visit after the completion of recent cognitive rests, declining rapidly; 95 years old, worried about covid exposure.
68.	r_63917	6/19/2020	Transamerica	Receiving payment on policy, but initiated new claim as care changed; multiple conversations with TA and LTCG attempting to file the claim; advised by TA claim reviewed and policy requirements met; then contacted by LTCG and told they were reviewing; TA said refusing claim until in person interview; ALF refusing to allow anyone to enter facility due to COVID; TA has all information but refuses to process claim.
69.	r_64046	7/1/2020	CNA	89 wheelchair bound vet, needs all ADLs assistance; paperwork submitted, CNA claimed they didn't get it; ALF submitted again; they were told they should see payment in 7-10 days; a week later told they needed a date added, ALF submitted again; after many FU calls, CNA said not sure why payment hadn't gone through; continually say they're working on it; \$50,000 paying out of pocket.
70.	r_64047	7/1/2020	Transamerica	In care facility; TA asking for who paid for care facility during 90 day elim (on 3rd facility due to care needs).
71.	r_64095	7/7/2020	Transamerica	Hospice benefits; TA requesting they refund due to overpayment, due to Medicare coverage, but nothing changed within the care period; was in hospice, hospital, with daughter, ALF, and nursing home; was on continuous hospice care with no elimination period; TA denying hospice benefits for nursing home stay until death.
72.	r_64231	7/9/2020	Transamerica	Colon cancer, surgery, pneumonia, unable to return home to care for self; representative interviewed and said qualified on ADLs; claim was denied.
73.	r_64337	7/23/2020	SHIP	Unable to get payments for 3 months; told checks returned undeliverableuntrue as all other correspondence and prior payments have been delivered to ALF; was told checks being resent, but almost 3 wks later, no checks; cannot get any help or response, on hold for hours, constant battle, stalling, saying paperwork not received, despite receipts.
74.	r_64569	8/7/2020	Brighthouse	Stopped paying for invoices at ALF; no explanation given, no response to inquiries; manager of ALF confirmed BH receipt of invoices, but no payment on either; first four mos paid; income depends on regular and prompt payment; repeated stress, 88

No.	Refrc. #	DATE	COMPANY	COMPLAINT
				years old.
75.	r_64719	8/13/2020	SHIP	Fighting with SHIP for months, finally started making regular payments after DOC grievance; now SHIP concluded mom no longer qualifies for benefits; cognitive impairment was main reason for qualifying, but SHIP qualified on ADLs; now mom is not receiving as much ADL assistance, but she does qualify on cognitive; has had several cog. assessments indicating moderate to severe.
76.	r_64755	8/11/2020	Bankers Life	Rcvd letter confirming qualification of benefits through the date of his passing; never received any benefits payments for nursing home; called Bankers, to find out why and got varying responses.
77.	r_64898	8/31/2020	American Heritage Life Insurance Co.	Receiving daily benefits for ALF; policy waives premiums once benefits are paid; policy indicates premium waiver is for time confined to nursing care facility; AHI claims that since it also meets def. of ALF, premium waiver does not apply.
78.	r_65009	9/8/2020	Mutual of Omaha	Agent disappeared abruptly after asking for help submitting claim Parkinson's and needed to find ALF; MOA said she couldn't have a new agent since he was her agent and has been for 25 years; she cannot get a hold of him, or get any help from him; tried submitting claim herself, it took over 7 mos and much stress to complete.
79.	r_65280	9/30/2020	Transamerica	2nd complaint; TA made one payment after 1st DOC complaint; refused since then; claims continually pending, under review.
80.	r_65343	10/4/2020	Transamerica	92 year old PH, in ALF; paid premiums over 35 years; cognitive assessment done, apartment, meals, falls checks, meds; submitted loads of paperwork, TA reimbursed for a portion of the first 6 mos; telephone interview to determine cog. ability; most questions answers inaccurately; score 4/10; TA stopped reimbursement due to no formal diagnosis of cog. impairment; after that, OT updated ADL evaldetermined more care needed; mental condition declining.
81.	r_65396	10/6/2020	Transamerica	Parents need ALF; citing incomplete documentation to delay paying claim, no way to determine what has been received or what is needed; ALF has submitted but TA saying received none; repeatedly gets reassigned to new person, conflicting information, told care provider doesn't exist; TA non-responsive.
82.	r_65465	10/13/2020	Transamerica	Falling, needs walker, unable to complete ADLs; TA has not approved claim; provided all documentation as requested and timely, every time call to check, they give conflicting information, cite documentation missing.
83.	r_65523	10/19/2020	Transamerica	90 day satisfied; company has not been paying; stalling; continually told to call back for status and payment; TA continues to say under review.
84.	r_65717	No date	Thrivent Financial	Decline of cognitive ability; moved to AFL; claim denied because facility not providing cognitive cues, no clinical evidence of cognitive impairment; amnesiac v. cognitively impaired; doctor has updated code to cognitively impaired, then

No.	Refrc. #	DATE	COMPANY	COMPLAINT
				they implemented 90 day waiting period; mom is cognitively impaired, dad is not, they are living together at the facility and dad is helping some.
85.	r_65723	11/3/2020	Continental General	Taking more time to process claims; continual late reimbursements; CGI stated insured rep must call to make sure they have all info, but do not reach out when there is info needed; CGI does not contact facility for FU or insured rep with issues.
86.	r_65796	11/8/2020	Prudential	Going in circles, not been paid; hospitalized then ALF and still need to prove care needed.
87.	r_65842	11/12/2020	Genworth	Not willing to accept paid invoice for proof of payment for home modification walk in shower; mom has dementia; many phone calls have been made with no acceptance or denial of claim.
88.	r_65949	11/3/2020	Transamerica	ALF claims denials on both parents; doctors and staff worked to provide docs, very clear need on ADLs; after months, mom granted coverage until death, then they asked for coverage on dad; denied twice and informed 90 day waiting period and go through assessment; early onset dementia; elim period already satisfied; care needs have not changed and now he has go through the whole process againcognitive symptoms have only worsened.
89.	r_66053	11/23/2020	Bankers Life	Submitting paper claims for 6 mos; received documents indicating approval, but no claims paid
90.	r_66055	11/17/2020	Unknown	ALF, 94 yr old; needs assistance but not quite nursing home level; hearing impaired, fall risk, med assistance, heart high risk, can't live alone, incontinence; appealing denial based on assisted living criteria versus nursing home criteria
91.	r_66242	12/8/2020	Allianz	Started claim process before parent moved into ALF; told by Alliance claim not considered until they moved in; went to reactivate claim, Allianz lost all info and had to start over with dr. statements and paperwork; drag feet on claims process; now denied.
92.	r_66251	12/11/2020	Transamerica	Alzheimer's dementia; moved in to ALF; claim submitted; weekly calls to TA to check status; different answer each time, timelines continually extended, requests for more information which was already provided, long call wait times; no way to communicate with TA; claims processing delays.
93.	r_66437	12/14/2020	Bankers Life	Delay, poor communication, overwhelming to 90 year old father; excuses and 3 mo delay, over \$20,000 owed; nurse assessment done; delays on processing/completion of report; level of disability should have gone back further for coverage.
94.	r_66455	12/5/2020	CNA	CNA made error on date of death; submitted death certificate; CNA requested return of \$1500; called to clarify error and told not to make the payment; CNA continually sends request for pay back; continuous calls to clarify and correct error, and told matter is cleared, but they continue to get new requests.
95.	r_66522	1/4/2021	Bankers Life	PH went into hospice care; have to call every day to find out what's going on and gets incorrect information; mis-processing as LTC instead of hospice (elim period difference); they say

No.	Refrc. #	DATE	COMPANY	COMPLAINT
				they have received everything needed, then they haven't; saying payment will start 30 days after approval after already stating hospice was approved after first phone call.
96.	r_66578	1/6/2021	John Hancock	PH receiving monthly benefits from LTC policy; now benefits denied as she needed a new assessment, but no notification of needing new assessment was given; called to address and told would escalate because 3rd party was supposed to have contacted for assessment over 30 days ago; no notice ever provided; claims processing held up for incurred ALF expenses.
97.	r_66747	1/19/2021	Transamerica	Recertification issue; TA says they will not make a determination until 2-3 weeks after, but they started the process late and only when called on the issue; called the 3rd Party nurse company, told to talk directly to the nurse.
98.	r_66847	1/25/2021	Tri Plus Services	Facility submitted invoice and verification, Tri Plus stating unacceptable documentation and requesting more; insured is being charged premiums still, but she's been in facility for over 2+ years
99.	r_66897	1/28/2021	Genworth	denied eligibility; ALF; diagnoses 3 years ago with Alzheimer's; neuro administered exam and diagnosis.
100.	r_67181	2/13/2021	John Hancock	HHC for mom and dad; dad has dementia, so HHC co. decided mom should be called the client since she maintains schedule, issues, checks, etc. JH will not pay claims because mom's name is on them; HHC is providing respite care to mom; they switched the invoices to have both names, JH will not consider those either; put Dad only onapproved for 90 day elim; hired two new non-licensed caregiversJH denied due to non-licensed, despite policy language.
101.	r_67299	2/19/2021	Transamerica	Claim appeal; nonpayment by TA; annual health assessment by phone during pandemic, was asked a number of questions he misunderstood; had been quarantined for 6 mos; TA requested information from ALF and physicianit was submitted two or three times; now on mo 5 and still delayed.
102.	r_67391	2/18/2021	Transamerica	Dealing with TA for 18 months; TA has not paid final claims after insured's death; TA doesn't answer calls; admin at ALF changes and don't know father or how to provide the right docs; TA requires enormous amt of paperwork, mis-routed documents, claims they don't have them despite multiple submissions; father was blind and qualified for benefits; care plan did not change over the course of his stay; TA has everything they need but still delayed.
103.	r_67429	2/27/2021	Transamerica	Claim denied; appeal with additional docs including discharge/testing result and psych letter indicating rec for LTC; TA states waiting to review records from PCP, who hasn't treated in quite some time and has no knowledge of rapid cognitive decline; was assured TA had the required records upon multiple contacts, then informed they had NO records and had to be gathered and submitted again.
104.	r_67517	3/3/2021	Transamerica	Move to ALF; has fallen a few times, resulting in injuries, instability walking, uses walker, needs help with meds,

No.	Refrc. #	DATE	COMPANY	COMPLAINT
				dressing, bathing; TA denying saying not chronically ill.
105.	r_67546	03/04/21	Bankers Life	BL issues check for LTC reimbursement; insured rep deposited into insured's account; BL put a stop payment on the check and amt was removed from PH's account; when PH called BL, they said could not see anything on the claim, no notes to indicate reason and would check back; mother has been receiving benefits since 2015—they always submit documentation on time and the company always makes them wait for the check; there is no reason for the stopped check, \$9,405.71.
106.	r_67795	1/30/2021	Transamerica	Rcvd letter of approved benefits for ALF; 10 day later, EOB showing not approved due to being paid by Medicare, but Medicare did not pay; called TA 7 times to figure it out, but gets different answer each time; has not received any info on why denied; also requested at least twice that TA stop sending mail to PH address after death, as this adds to the delay, but TA continues to send mail to wrong place.
107.		3/19/2021	American Heritage Life Insurance Co.	Paid more than \$50,000 in premiums over 20 years; added home health care services and moved into nursing home, initiated claim; continuous contacts through mail, fax, telephone; company claims information not received, despite sending many times; continually requesting documents already provided.
108.	r_67599	3/27/2021	Transamerica	Many claims submitted since 2013, many interviews; approved claim, but have not reimbursed for invoices; they paid for services out of personal account; no follow through from TA.
109.	r_68029	4/2/2021	Transamerica	Trying to use days in adult day care as part of 90 elim satisfaction; TA will not accept documentation as proof of services; staff from facility have spent over an hour on phone trying to get issue resolved.
110.	r_68081	unknown	Bankers Life	BL refusing claims, asserting submissions are photocopies of signatures; submitted claims are in fact original signatures; spoke with customer service and rep recognized original sigs, but other reps continued to state photocopies; escalated to manager who maintains photocopies; BL refuses payment and requiring more submission; insured thinks they are using stalling tactics.
111.	r_68161	unknown	Transamerica	90 yo; moved from ILF to ALF; filed claim, sent in all required docs, including care plan, service agreement, med list, and invoices; denied based on phone eval for not meeting requirements with 2 ADLs; claim was closed, had to submit appeal to reopen; TA requested 2 years med records; insured rep submitted; TA requested docs already provided, but facility sent again; TA continues to cite waiting for docs despite multiple submissions and certified mail; TA again closed claim as incomplete even though received everything.
112.	r_68719	5/20/2021	Transamerica	3 separate policies; denied on basis that she doesn't need help; 87, memory issues, can't dress, can't do stairs, can't clean herself, cannot live in home.

No.	Refrc. #	DATE	COMPANY	COMPLAINT
113.	r_68759	5/25/2021	CNA	Refusing to pay claim; make up reasons why they won't pay; they have all paperwork requested.
114.	r_68773	5/25/2021	Transamerica	Extremely lengthy time to evaluate claim; parents are running out of money and financial situation dire.
115.	r_69327	7/8/2021	Transamerica	Hospice in ALF; paid into policy for 60+ years; TA paid part of ALF beginning about 5 years ago; TA did reassessment without presence of family or facility staff, claimed PH no longer qualified; family appealed and requested new assessment and TA did so and reinstated; then TA did a 3rd assessment without knowledge of family and ALF again, TA again cancelled payment; they appealed and requested assessment be done with family and staffno word from TA 3 wks following appeal and request. Impossible that PH has improved his condition and abilities; now on hospice.
116.	r_69614	7/25/2021	Transamerica	TA disputing clause in policy stating if one spouse dies, the other is not required to pay premiums, and clause stating no premiums after 60 day nursing home; policy cancelled due to non-payment; insured still in ALF with Alzheimer's needing full time care; refusing to process claim, TA comes up with different reasons for non-payment, requesting different documents.
117.	r_69922	8/9/2021	MN LTC Partnership/Henn epin Co. DHS	Rider: assets up to amount of which LTC plan has remitted \$220,679 for care are protected assets; asset cannot be used to repay the State for Medical assistance for LTC care when the person dies, up to the protected asset limit; assets at death were \$30,000, therefore the amount the county spent on care is non-recoverable
118.	r_70019	unknown	River Source	Denying claims for nursing home benefits due to licensing as assisted living facility; mother's move to memory care; definition of nursing home benefit met; policy does not delineate how a facility must be licensed; dementia and cognitive decline patients need assistance AND nursing care; policy purchased in 1996only 2 benefit options existed and ALF not addressed back then; LTCI was paying under at home care, and now that she is in a locked memory care facilitynot providing nursing home benefit.
119.	r_70458	9/27/2021	CNA	ALF, primarily dementia; after 30 day waiting period, filed claimdenied based on 3 minute conversation with nurse who had just started working with insured that week; filed appeal, CNA using delay tactics; sent all medical records; CNA continues to request more docs, which they already have; delay months and months; don't return calls, don't receive docs; numerous attempts to resolve; abuse of power; will have to pull PH out and care for her at home because they can't afford to keep her at AFF, she paid on the policy for 30+ years.
120.	r_70705	10/12/2021	Transamerica	LTC policy: home health, assisted living, nursing home; purchased 20 years ago; stroke with mild cog impairment/memory loss, continued to decline, filed HHC claim; contacted TA for statuscontinually told waiting for info, did not receive info (even after receipt confirmed), incomplete forms,

No.	Refrc. #	DATE	COMPANY	COMPLAINT
				etc; denied HHC claim; now there are 2-3 pending claims 1-2 HHC, 1 ALF, 1 appeal; contact TA 2-3 x mo and get varying responses; lack of clarity, requesting one thing at a time; considerable hardship on insured.
121.	r_70712	10/7/2021	Transamerica	Called 3 times asking for release forms to HHC; TA hasn't sent; has satisfied elimination period 90 days in HHC and nursing home stays; no payment on the remaining 27.
122.	r_71609	12/14/2021	CNA	Premiums increased; father offered CNFO which he took; mother requested CNFO, but denied based on age; eligible for CNFO after 20 years; when 20 years lapsed, they requested CNFO and they sent paperwork to her to terminate the policy and that CNFO would only be available with another rate increase; every time they talk to CNA they get a different story; delay correspondence, only respond in writing and takes considerable to send that; they keep changing the parameters; premiums should be refunded.
123.	r_71986	1/6/2022	Transamerica	ALF, late onset Alzheimer's; received 2 reimbursement checks, but 3rd and 4th have been delayed with no actions started on the process; TA requesting resubmission of invoices from facility, even though they have the invoices there.
124.	r_72067	2/10/2022	CNA	Denying claim despite 2ADLs, letter from provider of 16 years supporting.
125.	r_72746	2/28/2022	Bankers Life	Trying to get expired check reissued to father's estate; every time they call, they get another excuse/false reassurances, sending to wrong address despite verifying the correct address.