



Elevance Health, Inc.
(FKA) Anthem Blue Cross Blue Shield
220 Virginia Avenue
Indianapolis, IN 46204

December 15th, 2022

CEO Gail Boudreaux,

On November 9th, 2022 we sent you a [letter](#) noting our extreme concern over the denials of care you impose on your members (and those across the broader BCBS network). A delegation of Anthem BCBS policyholders visited the Elevance Health corporate headquarters in Indianapolis on November 14th, 2022 to speak with you or other Elevance decision makers about barriers to care your company imposes. You can watch a full video of your policyholders' remarks [here](#).

You did not meet with us or schedule a meeting with us, nor did any Elevance decision maker acknowledge your own policyholders' concerns about accessing health care due to your company's actions. Below are a couple specific examples where you denied care or denied payment for bills. We expect Anthem BCBS to resolve these claims immediately.

Through your Amerigroup plan on Iowa Medicaid you have denied care for diabetes to Bri Moss, a member of Iowa Citizens for Community Improvement in Dubuque, Iowa. Bri Moss's endocrinologist prescribed an Omnipod 5 insulin pump and you, Elevance, provided an out of date pump instead. Bri is sicker as a result and spent Thanksgiving in the emergency room due to an inferior pump. As her friend Erica Sawyer testified in Indianapolis at your offices "Anthem BCBS thinks they can get more money that way. They're doing this at the expense of Bri's health, and of all of us!" We demand you reverse this care denial immediately and provide Bri Moss an Omnipod 5 insulin pump as prescribed by her endocrinologist.

Through your Anthem BCBS plan on Healthy Indiana, Lane Fulton was denied coverage for \$5,000 in bills after three surgeries and sent to collections. As Lane [wrote](#) in the *Indianapolis Star*, "I was scared. I was stressed. And I was angry. Private insurers like Elevance/Anthem want to suck our bones dry, because denying care is easy money for them." We demand you pay the \$5,000 bill incorrectly sent to Lane immediately.

Research by the Public Accountability Initiative, which uses publicly available sources, makes clear Elevance/Anthem is profiteering at the expense of Bri, Lane, and millions of other members from around the country whose care you've denied:

- From 2017 through 2021, Elevance reported making more than **\$23 billion in profits** and **paying out more than \$4.49 billion in cash dividends**. In 2021, Elevance reported bringing in more than \$6.1 billion in profit after paying expenses and taxes and paying out more than \$1.15 billion in dividends to shareholders. Additionally, in this time period Elevance has repurchased and retired \$9.98 billion worth of its stock, another way to reward shareholders and executives by making their shares more valuable.¹
- In 2021 Anthem BCBS (now Elevance Health Inc.) CEO Gail Boudreaux's base salary alone increased 14.3% from \$1.4 Million to \$1.6 Million. She was also awarded \$4,019,399 in annual incentive payments (AIP) in 2021. In total, **Boudreaux's 2021 compensation package including all five award elements was \$19.4 Million, a 13.1% increase over the previous year**. Elevance stated that the ratio of Boudreaux's annual total compensation to the annual total compensation of its median employee – which it estimated to be \$51,005 – was 379:1. Notably, this ratio is higher than the trending average of 324:1 of the S&P 500 as reported by the AFL-CIO in 2022.

Finally, according to additional research by the Public Accountability Initiative, Elevance Health's leadership and Board of Directors continues to resist reasonable demands to change your behavior. At its 2022 annual meeting, Elevance shareholders considered proposals to prohibit political funding and to conduct an audit and report on the racial impacts of the corporation's activities. The Elevance board of directors officially **opposed** both of these proposals.

We demand a meeting with you, CEO Gail Boudeaux, to discuss the ways your company engages in denials of care that drive racial inequity while amassing obscene profit.

Given your lack of response, we share our demands, which are crucial steps Anthem must take to address the crisis created by continued claims denials:

1. Anthem BCBS/Elevance (and the BCBS Network) overturn all claim/pre-authorization denials that we submit when we meet
2. Anthem BCBS/Elevance (and the BCBS Network) stop denying claims, and overturn any existing denials, for treatments recommended by medical professionals
3. Transparency: Anthem BCBS/Elevance (and the entire BCBS Network) provide a total number of:
 - Denied claims/pre-authorizations (and the value of them) broken down by market (employer/marketplace/Medicare Advantage/Medicaid MCO), state, geography (urban/suburban/rural), race, and gender. If Anthem BCBS/Elevance's insurance

¹ These figures come from Elevance's Forms 10-K filed with the IRS from 2021, 2020, and 2019. Available in the "Selected Filings" section at:

<https://www.sec.gov/edgar/browse/?CIK=1156039&owner=exclude>

products result in disproportionate claim denials by race, gender, or geography, Anthem BCBS/Elevance must reform its practices to advance equity measures and repair this discrimination immediately

- How many and the monetary value of claims/pre-authorizations that were overturned on appeal through Anthem BCBS's internal process (or that of another BCBS Network affiliate) and how many and the monetary value of those overturned by an external authority
 - Anthem BCBS/Elevance (and all BCBS Network affiliates) disclose the total percentage of their profits taken by denying care for their members
4. Anthem BCBS/Elevance CEO Gail Boudreaux and Anthem BCBS Medical Director (as well as the CEO's and Medical Directors of all BCBS Network affiliates) hold monthly open microphone meetings with members to discuss problems with your insurance products
 5. Anthem BCBS/Elevance (and all BCBS Network affiliates) officially acknowledge they cannot be responsible for both denying claims (and pre-authorization requests) and running the appeals process and request relevant public authorities take over the claim appeals process.

People's Action takes extremely seriously the harm your organization is causing our members and people in our communities, and we await your timely response.

Sincerely,

Sulma Arias, Director, People's Action

Aija Nemer-Aanerud, Health Care for All Campaign Director, People's Action

Jaime Izaguirre, Co-Chair, www.careovercost.org, Iowa Citizens for Community Improvement

Eleana Molise, Co-Chair, www.careovercost.org, Organizing Neighborhoods for Equality,
Northside