This PDF contains the author's latest letter to Blue Shield Executive Inquiries (3 pages) followed by the 1-page letter from Executive Inquiries that the author is responding to.

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Date: September 02, 2026
From: The Old Coder
To: Blue Shield Executive Inquiries
Cc: Other levels of Blue Shield
Cc: HPMG [Hill Physicians Medical Group]
Subject: HPMG-SuperCare DME clarification and suggestion

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Ms. Elwood at HPMG: Please see to it that Mr. Joyner receives a copy of this letter.

There is no major development, but HPMG has been attempting to reach me by phone. This letter is indirectly related. Mr. Joyner and I are going to need to reach an agreement to ensure that that works out. Or, if HPMG prefers, the State Bar and the Board of HPMG can review the matter at their levels.

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All readers:

Blue Shield's latest letter to me and this response will probably be posted online at Coder Dansu. The other web-sites are simply initial drafts, but they'll be updated in due course. The roles that some of you play [yes, quite limited in some cases] will be documented on the sites.

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Blue Shield Executive Inquiries: Thank you for writing.

I'm not necessarily insisting on a purchase. However, it might be advisable. Permit me to offer a simple sug-gestion.

I'm uncomfortable with how the matter has been handled by the three organizations. I assert that it rises to the level of systemic violations of the laws. I'm correct. A reasonable person will agree with my position. Even Board Members might do so.

A purchase will factor out one of the issues. I thought that I'd suggested the following previously as one approach. Is there a reason that the following wouldn't work? If so, as dear Emily Litella used to say, "Never mind".

Step 1: Arrange a purchase of the device.

Step 2: A regional vendor who will not abuse me [or other patients] will handle shipping of filters [if needed] and technical questions. That could even be SuperCare. However, for SuperCare, a formal understanding regarding the laws and the rules would be needed.

In theory, SuperCare has already agreed to the understanding. SuperCare could be barred from billing in Cali-fornia due to the "street address" issue. However, leadership there is apparently disinclined to fight on that hill.

Ms. Inquiries, SuperCare has already agreed twice to drop the issue. Repeat, twice. Once in May 2026 and once in June 2026.

I'm disappointed, BTW, that Marcie James didn't read enough to be aware of that fact before she contacted SuperCare. It's inadvisable for anybody to skim in this matter. And, no, the insistence that details be reviewed isn't a favor to me. The laws ***have*** been violated.

Additionally, patients are at risk and the details still [after 5 months] have not even been read by anybody. Nobody at the medical group or the HMO wants to hear it. No relevant case has been opened after all that time. However, be advised that it isn't going to be dropped.

Regarding SuperCare, if they handle Support for my DME, we'd need a formal statement in writing that I could cite to representatives in the future.

Additionally, it's unreasonable to expect me to speak with "Elizabeth" at SuperCare again. If SuperCare isn't going to acknowledge that what happened on May 13, 2026 happened, I'd need that organization to agree to something else that is quite reasonable.

The leads at the two SuperCare regional offices, Modesto and Milpitas, should respond to email from me related to appointments, supplies, and questions. The leads can delegate responses to the respective Support teams.

The two SuperCare leads are, again, Rick and Anna. I've met both of them in person. They both seem professional and respectful.

Anna even loaded DME into my car that later on SuperCare said I wasn't permitted to have without a "street address" that met their standards. Did I mention that I was homeless due to the medical diagnosis on March 31, 2026? The motels and other places that I stayed at weren't good enough. It had to be a white picket fence house with a yard and chimney or something like that. SuperCare was incorrect. It's a slipshod organization, though much better than Apria.

It was lovely to truck around with all three organizations for months while I needed to focus on finding a place to live.

Ryan Oliver, I'm ever so grateful, truly, for your efforts in the matter. You even spoke with me on the day before my birthday and made promises that are memorable due to their sincerity. We'll come back to you below.

Executive Inquiries: A different DME vendor, one other than SuperCare, might work better. It would depend. However, as the kids say, "Here's the thing."

If the medical group [HPMG] only has SuperCare and Apria, note that, not only is Apria a patient death machine, but SuperCare and Blue Shield staff members agree wholeheartedly with the point. [Staff members in both organizations have worked for Apria in the past. In fact, Anna, one of the SuperCare leads, has done so.]

So, if there is no third option, I'd need to agree to SuperCare for the Support part. However, you tell me, is it just the two DME vendor options or is there a third one?

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Is it clear that I'm reasonable and flexible? Or that the problem for 5 months has been that the higher levels at all three organizations have focused largely on ignoring issues in the hopes that the issues will simply go away?

It would be nice to settle the DME issue. However, "reasonable and flexible" doesn't cover the rest of the matter. Did I happen to note that a "medically urgent" and "expedited" situation has been largely ignored for 5 months?

Malpractice at the specialist practice that ***is*** going to be reviewed. After the HMO has made a finding of physical impossibility that contradicts the testimony of its own staff. Testimony in writing that proves the practice

lied [and Marcie James even cited the lie to me]. I might add, the HMO made the physically impossible finding ***twice*.**

No escalation at the DME vendor [SuperCare]. No due process at the HMO A.&G.R. level save for one out of about a dozen cases. [A case that I won.] I did get escalation to the Chief Legal Officer at the medical group – as instructed by the HMO [!] – but he's he's trucked up to the extent that I believe he could be suspended. Perhaps we'll find out.

Did I happen to mention that the HMO Care Navigator level ***told me*** to go to HPMG about one of the possible solutions? As a note to HPMG, I think that the State Bar will be interested in that fact and in how Ryan Oliver handled that inquiry.

Ryan, Hello. Lying sack of potatoes, much?

Executive Inquiries: We'll need to come back to the review of policies and procedures that I've mentioned. However, never mind that for right now.

Regards, Robert (the Old Coder)

[continued on next page with letter from HMO]

Date: September 02, 2026
From: Blue Shield Executive Inquiries
To: The Old Coder
Subject: Re: 5-month anniversary of “expedited” matter

Hello Mr. Kiraly,

We wanted to provide you with an update regarding our efforts to obtain the portable oxygen concentrator you have requested.

Please know that we are continuing to actively explore options and are committed to finding a solution that meets your needs. At this time, we have encountered some challenges with the available vendors. The vendors that allow a portable oxygen concentrator to be purchased outright do not maintain local, in-person service locations that can provide the hands-on support and assistance you have requested. Conversely, SuperCare, which is able to provide in-person support and services, does not offer the option to purchase the portable oxygen concentrator outright.

We understand the importance of both having access to the equipment and receiving the level of support you need. We are continuing to work with the available vendors to identify any possible alternatives and will keep you informed as soon as we have additional information.

Thank you for your patience and understanding while we work through these challenges.

Regards,
Blue Shield of California