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MCO BENEFITS INTERVENTIONS PREFER MCO BENEFIT DEDUCTIBLE INDEMNITY  
CORONARY VASCULAR PRIMARY MEDICARE REVIEW PROCESS NETWORK MEDICAL HMO  
ALIVE DIAGNOSIS CONTINUOUSLY TREATMENT ELIGIBLE PROVIDER SERVICES DEDUCTIBLE PARTICIPATING  
ISCHEMIC CONTINUED PLAN HYPERTENSION ENROLLEES CENTER INCLUDE PHARMACY BENEFIT COINSURE  
PERCENTAGE CHILDREN CERTIFIED AGE MET MEMBERS BREAST HEART ATTACK POLLO PREPARED HMO  
AVERAGE BOARD ADEQUATE MONTHS DIAGNOSIS CORONARY AVERAGE ENROLLMENT EVALUATE CHARGE EMPLOYER  
RESPONDING HEALTH MONTHS ACUTE IMMUNIZATION WOMEN VIRUS DEPRESSION MARKET MEN MUMPS REFERRALS PLAN APPROVED  
PERFORMED CONTINUOUSLY HEALTH PLAN CRITERIA PHYSICIANS SPECIALIST RECEIVED MONITOR SERVICES PLAN MCO  
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# Consumer Report Card

ON HEALTH INSURANCE CARRIERS  
IN CONNECTICUT

October 2016



## *Dear Health Insurance Customer,*

For nearly two decades, the Connecticut Insurance Department has provided consumers with extensive information needed to compare health insurance plans in Connecticut. The first "Comparisons of Managed Care Organization in Connecticut" was published in 1998. The Department compiled and compared a number of quality measures, including provider networks, covered services and member satisfaction.



Over the years this report has evolved as we've added more quality measures, including behavioral health and substance abuse coverage data. Even the title was changed to the "Consumer Report Card on Health Insurance Carriers in Connecticut."

The evolution of the "Consumer Report Card" continues and I am pleased to introduce the 2016 edition that has been reformatted to be more consumer friendly. We've featured an executive summary to help you understand what all this information means along with easy-to-read charts and graphs.

The intent remains the same - provide useful information to educate consumers on what health plans best suit their needs. We hope you find this edition helpful.

As always, the Department stands ready to assist consumers with questions about this report or any insurance issue.

Sincerely,

Katharine L. Wade

INSURANCE COMMISSIONER



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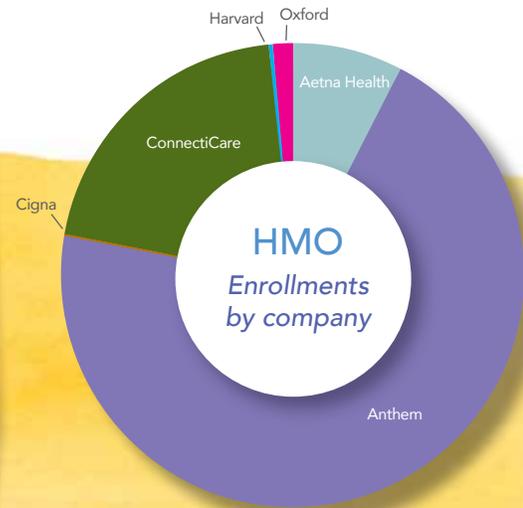


[www.ct.gov/cid](http://www.ct.gov/cid)

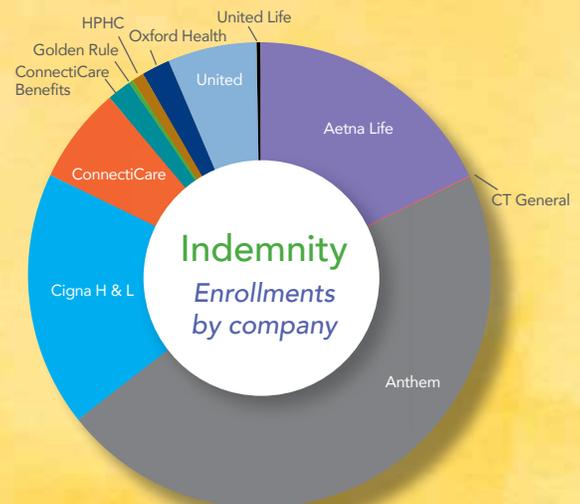
# Executive Summary

## Objective

Connecticut's health insurance marketplace is dynamic as companies look for ways to better serve customers across the state. This annual consumer report card – the state's 19th – paints a picture of the six health maintenance organizations (HMOs) and 11 indemnity insurance companies and the benefits and services they provide to over 2.4 million state residents. The data was collected from the companies by the Connecticut Insurance Department and is designed to deliver side-by-side comparisons of various health insurance plans and care measures. This report card offers consumers information on their health insurance options by providing data and trends on insurance purchasing and use.



## 2015 Enrollment



## Methodology

This data was collected by the Connecticut Insurance Department **CID** from the insurance companies. CID selected the data points, including care measures, claim denials, medical loss ratios, utilization review data, and member satisfaction survey results, based on legislation passed by the Connecticut General Assembly.

This report includes three years of data, where available, to be informative for consumers. While many of these data points are available over the 19 years since the report's inception, there have been significant changes in insurance provisions

due to the implementation of the federal Patient Protection and Affordable Care Act, also known as the Affordable Care Act (ACA), and some of the data elements collected have changed over time.

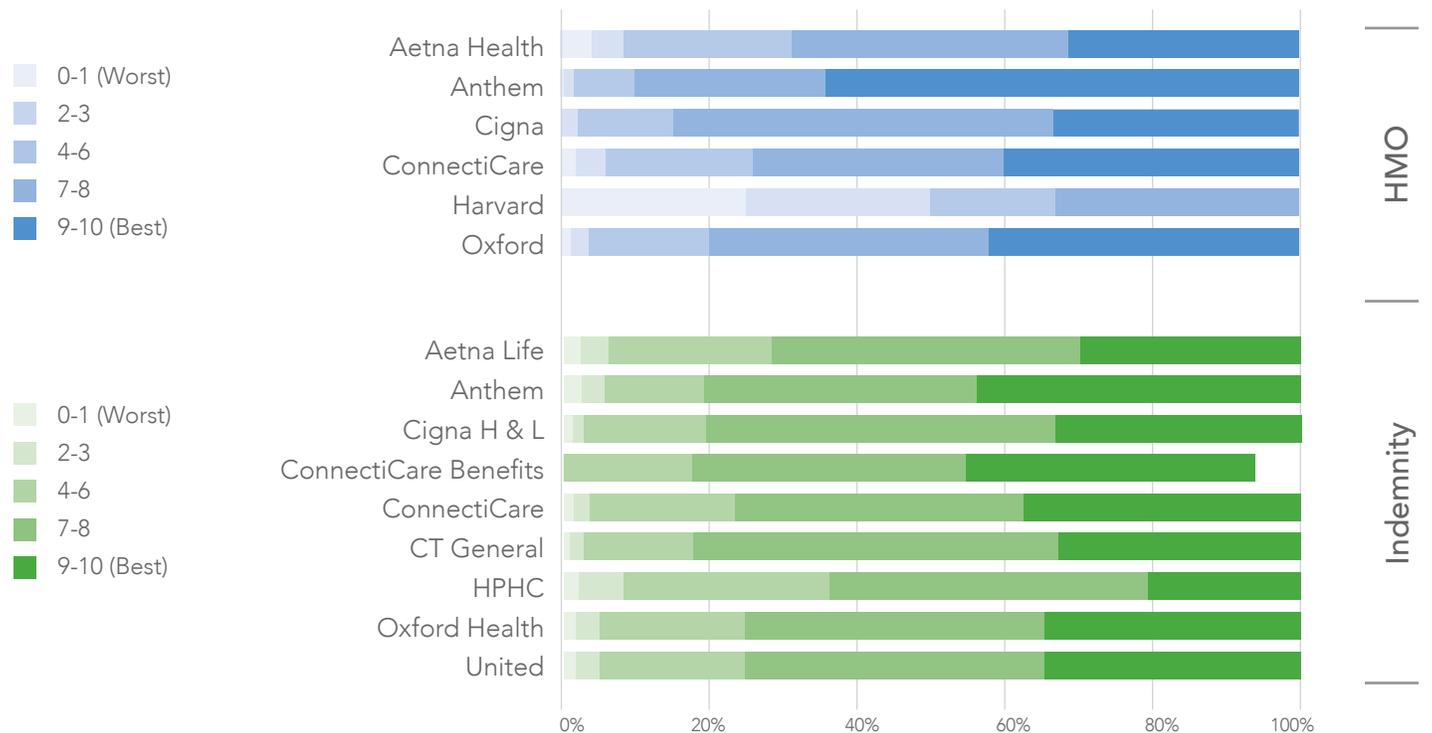
# Summary of Findings

## Overview of All Companies

While total enrollment numbers by company have decreased slightly from the previous year, new companies have been entering the Connecticut marketplace as others exit. Moreover, there have been overall increases in the number of participating primary care providers, specialist providers, and pharmacies while the number of participating hospitals has decreased due to hospital consolidation. Moreover, most participating primary care and specialist physicians are board certified, with increases in the proportion of certified providers by company from 2013 to 2015.

## Member Satisfaction

When surveyed, members of most of the insurance plans included in this report are much more likely to classify their plans as 7 or better on a scale of 0 (worst) to 10 (best). Members also generally reported that they were always or usually able to see a specialist or obtain routine care as soon as they wanted.



Golden Rule and United Life are excluded from this chart, as they had no response. Totals for ConnectiCare Benefits, Inc. do not equal 100% due to data provided by the company.

# Executive Summary

The companies included in this report are providing a range of health services to Connecticut residents.



Preventative



Treatment



Pregnancy



Mental Health

As seen in the table below, both HMOs and Indemnity companies are providing a range of care services to insured residents in Connecticut for preventative care, treatment, pregnancy, and mental health.

## Care Measures

Care measures reflect the percentage of the MCOs members who have accessed specific covered benefits. The ✓ indicates that, for all companies in this Report Card, at least 50% of the members who met relevant criteria used the benefit.

	HMO	Indemnity
<b>PREVENTATIVE</b>		
Adult Access to Care - Age 20-44	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Adult Access to Care - Ages 45-64	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Children and Adolescent Access to Primary Care	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Childhood Immunizations	<input type="checkbox"/>	<input type="checkbox"/>
Immunizations for Adolescents	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Human Papillomavirus Vaccine for Female Adolescents	<input type="checkbox"/>	<input type="checkbox"/>
Breast Cancer Screening	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Cervical Cancer Screening	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Colorectal Cancer Screening	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Eye Exams for People with Diabetes	<input type="checkbox"/>	<input type="checkbox"/>
<b>TREATMENT</b>		
Controlling High Blood Pressure	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Beta Blocker Treatment After a Heart Attack	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<b>PREGNANCY</b>		
Prenatal Care in the First Trimester	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Postpartum Care Following Delivery	<input type="checkbox"/>	<input type="checkbox"/>
<b>MENTAL HEALTH</b>		
Follow-up After Hospitalization for Mental Illness	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Antidepressant Medication Management	<input type="checkbox"/>	<input checked="" type="checkbox"/>

## Utilization Review

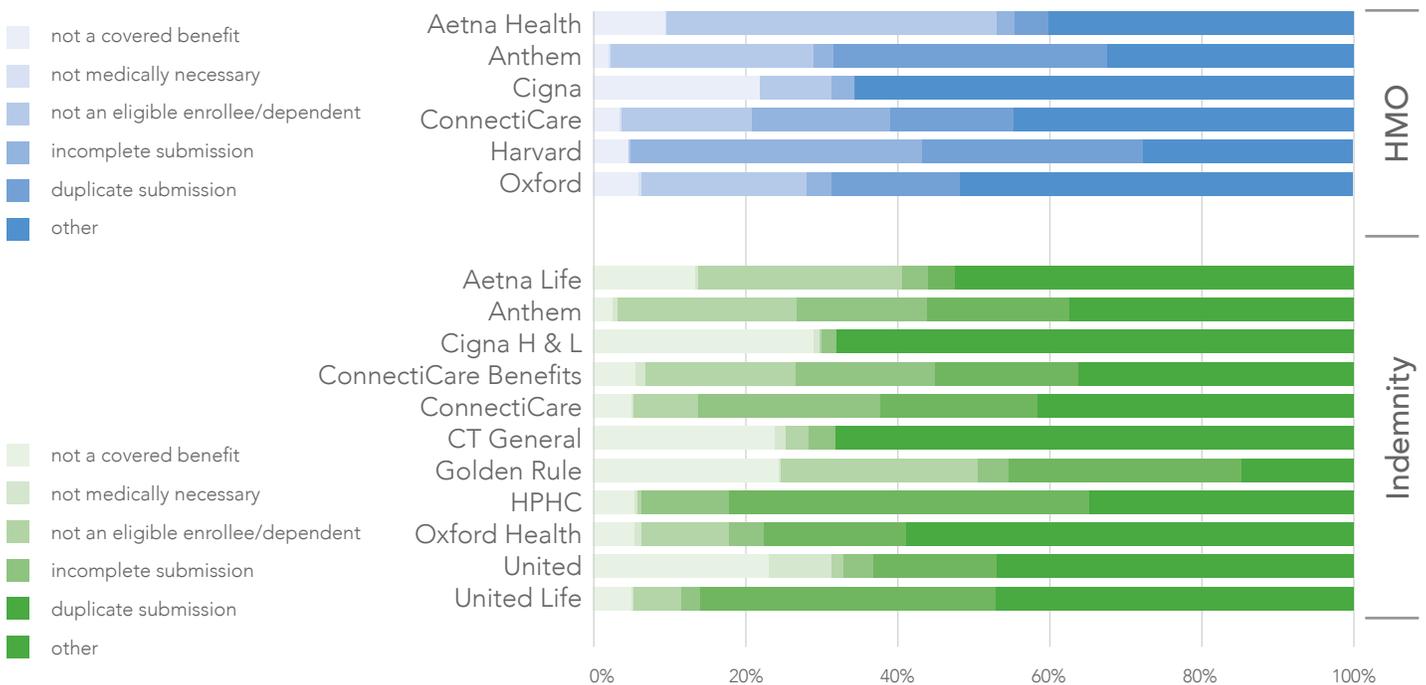
Utilization Review (UR) is the process by which a health plan determines whether the treatment or services prescribed by a physician are medically necessary to treat a condition. All but one HMO saw a decrease in the number of UR requests from 2014 to 2015, while most indemnity companies had an increase in UR requests. These changes are consistent with the change in overall enrollment in

these plans. While overall enrollment in all fully insured plans has declined, the enrollment in HMOs has declined at a higher rate than the decline in enrollment in indemnity plans. During the same time periods, only one HMO had an increase in denials as a percentage of UR requests, while three of the indemnity companies had an increase in the percentage of denials.

## Claims Denial

While Indemnity companies had the most total claims filed (with up to 4.5 million claims received by one company), HMOs had the highest proportion of denials as a percentage of total claims (up to 30% for one company). The reasons for the denied claims also varied between the HMO and Indemnity companies, and enrollees whose claims are denied due to "not a covered benefit" or "not medically necessary" were more likely to file appeals.

Reasons for Claims Denials as Percentage of All Denials 2015

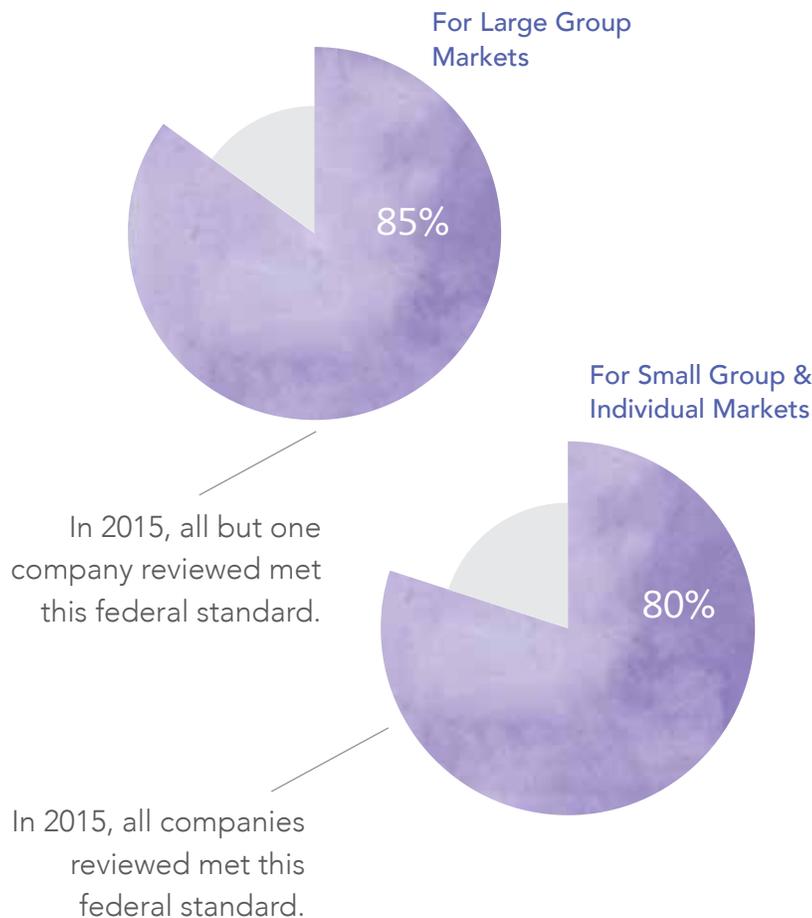


# Executive Summary

## Federal Medical Loss Ratio

Medical loss ratio (MLR) is the proportion of premiums spent on medical expenses or quality improvement. Under federal law, any company that does not meet the minimum loss ratio requirement may be required to pay rebates in that market. This provision adds additional consumer protections, especially in the large group market where insurance companies are not required to file rates with the Insurance Department. For 2015, most of the insurance companies included in this report met the federal standard for MLR – 85% for large group market and 80% for individual and small group markets. Only one company did not meet the 85% standard for large group MLR, and all companies met the standard of 80% for individual and small group MLR.

## Federal Standard for MLR



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# Managed Care Organizations

INCLUDED IN THIS REPORT

The companies will be referenced by the abbreviations shown in **bold face type**.  
Some companies may be servicing existing business and not currently issuing new business.

## HMO

Abbreviated Name	Company Name	Website	Phone
<b>Aetna Health</b>	Aetna Health, Inc.	www.aetna.com	(877) 402-8742
<b>Anthem</b>	Anthem Health Plans, Inc.	www.anthem.com	multiple
<b>Cigna</b>	Cigna HealthCare of CT, Inc.	www.cigna.com	(800) 244-6224
<b>ConnectiCare</b>	ConnectiCare, Inc.	www.connecticare.com	(800) 251-7722
<b>Harvard</b>	Harvard Pilgrim Health Care of CT, Inc	www.harvardpilgrim.org	(888) 333-4742
<b>Oxford</b>	Oxford Health Plans (CT), Inc.	www.oxhp.com	(800) 444-6222

## Indemnity

Abbreviated Name	Company Name	Website	Phone
<b>Aetna Life</b>	Aetna Life Insurance Company	www.aetna.com	(800) 962-6842
<b>Anthem</b>	Anthem Health Plans, Inc.	www.anthem.com	multiple
<b>Cigna H &amp; L</b>	Cigna Health & Life Insurance Company, Inc.	www.cigna.com	(800) 244-6224
<b>ConnectiCare Benefits</b>	ConnectiCare Benefits, Inc.	www.connecticare.com	(800) 251-7722
<b>ConnectiCare</b>	ConnectiCare Insurance Co. Inc.	www.connecticare.com	(800) 251-7722
<b>CT General</b>	Connecticut General Life Insurance Company	www.connecticare.com	(800) 244-6224
<b>Golden Rule</b>	Golden Rule Insurance Company	www.uhone.com	(800) 657-8205
<b>HPHC</b>	HPHC Insurance Company, Inc.	www.harvardpilgrim.org	(888) 333-4742
<b>Oxford Health</b>	Oxford Health Insurance, Inc.	www.oxhp.com	(800) 444-6222
<b>United*</b>	UnitedHealthcare Insurance Company	www.uhc.com	(866) 633-2446
<b>United Life*</b>	UnitedHealthcare Life Insurance Company	www.uhone.com	(800) 657-8205

\*Will exit the individual market effective 1/1/2017.

# Managed Care Organizations

INCLUDED IN THIS REPORT

## HMO

Abbreviated Name	Markets to Individuals	NCQA Accreditation
<b>Aetna Health</b>		Commendable
<b>Anthem</b>	✓	Excellent
<b>Cigna</b>		Accredited
<b>ConnectiCare</b>	✓	Commendable
<b>Harvard</b>		n/a
<b>Oxford</b>		Accredited

## Indemnity

Abbreviated Name	Markets to Individuals	NCQA Accreditation
<b>Aetna Life</b>	✓	Commendable
<b>Anthem</b>	✓	Exchange only
<b>Cigna H &amp; L</b>	✓	Commendable
<b>ConnectiCare Benefits</b>	✓	Accredited
<b>ConnectiCare</b>	✓	Commendable
<b>CT General</b>		Commendable
<b>Golden Rule</b>	✓	n/a
<b>HPHC</b>		n/a
<b>Oxford Health</b>		Accredited
<b>United*</b>	✓	Accredited
<b>United Life*</b>	✓	n/a



## National Committee for Quality Assurance (NCQA)

The National Committee for Quality Assurance is a not-for-profit organization that reviews quality and performance measures of HMOs and health plans, providing an independent standard of accountability.

**Excellent** awarded to organizations with programs for service and clinical quality that meet or exceed rigorous requirements for consumer protection and quality improvement. The organization must also achieve HEDIS results in the highest range of performance.

**Commendable** awarded to organizations with well-established programs for service and clinical quality that meet rigorous requirements for consumer protection and quality improvement.

**Accredited** awarded to organizations with programs for service and clinical quality that meet basic requirements for consumer protection and quality improvement. Organizations awarded this status must take further action to achieve a higher accreditation status.

**Provisional** awarded to organizations with programs for service and clinical quality that meet basic requirements for consumer protection and quality improvement. Organizations awarded this status must take significant action to achieve a higher accreditation status.

**Denied** given to an organization whose programs for service and clinical quality did not meet NCQA requirements during the accreditation survey.

**n/a** indicates the health plan has not applied for NCQA accreditation.

# Managed Care Organizations

2015 ENROLLMENT

## HMO

	FULLY INSURED			OTHER ENROLLMENT			TOTAL ENROLLMENT		
	Individual Plans	Small Group Plans	Large Group Plans	Individual Plans	Small Group Plans	Large Group Plans	Individual Plans	Small Group Plans	Large Group Plans
<b>Aetna Health</b>	1	15,297	7,840	0	0	674	1	15,297	8,514
<b>Anthem</b>	17,315	12,673	11,669	0	0	174,204	17,315	12,673	185,873
<b>Cigna</b>	2	0	30	0	0	0	2	0	30
<b>ConnectiCare</b>	949	149	34,557	0	0	26,467	949	149	61,024
<b>Harvard</b>	0	758	42	0	0	0	0	758	42
<b>Oxford</b>	0	1,744	2,294	0	0	0	0	1,744	2,294
<b>Totals</b>	<b>18,267</b>	<b>30,621</b>	<b>56,432</b>	<b>0</b>	<b>0</b>	<b>201,345</b>	<b>18,267</b>	<b>30,621</b>	<b>257,777</b>

## Indemnity

	FULLY INSURED			OTHER ENROLLMENT			TOTAL ENROLLMENT		
	Individual Plans	Small Group Plans	Large Group Plans	Individual Plans	Small Group Plans	Large Group Plans	Individual Plans	Small Group Plans	Large Group Plans
<b>Aetna Life</b>	6,340	45,401	79,481	0	213	243,850	6,340	45,614	323,331
<b>Anthem</b>	33,076	20,815	55,309	0	0	880,084	33,076	20,815	935,393
<b>Cigna H &amp; L</b>	667	0	46,380	0	0	322,915	667	0	369,295
<b>ConnectiCare Benefits</b>	34,820	0	0	0	0	0	34,820	0	0
<b>ConnectiCare</b>	39,636	60,257	41,866	0	0	0	39,636	60,257	41,866
<b>CT General</b>	44	0	0	43	0	56	87	0	56
<b>Golden Rule</b>	4,659	0	0	0	0	0	4,659	0	0
<b>HPHC</b>	0	13,091	5,796	0	0	2,871	0	13,091	8,667
<b>Oxford Health</b>	0	15,958	23,429	0	0	0	0	15,958	23,429
<b>United</b>	7,235	279	123,468	0	0	0	7,235	279	123,468
<b>United Life</b>	1,115	0	0	0	0	0	1,115	0	0
<b>Totals</b>	<b>127,592</b>	<b>155,801</b>	<b>375,729</b>	<b>43</b>	<b>213</b>	<b>1,449,776</b>	<b>127,635</b>	<b>156,014</b>	<b>1,825,505</b>

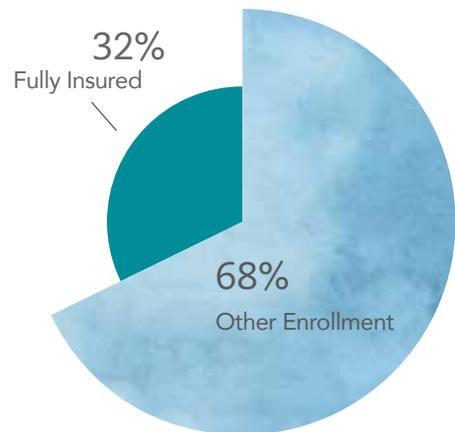
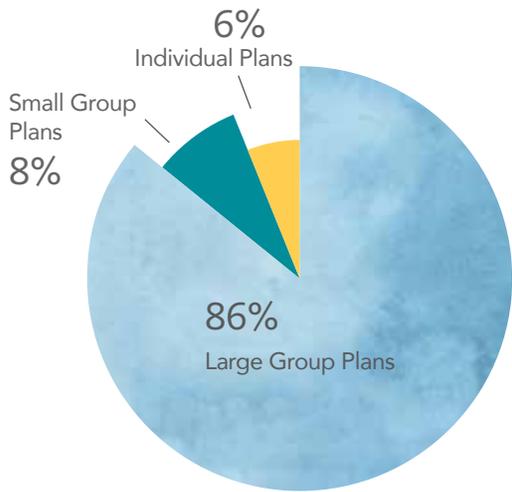
# Managed Care Organizations

2015 ENROLLMENT

Organization	Total Enrollment	Change* 2013-2015
Anthem	989,284	▲
Aetna Life	375,285	▲
Cigna H & L	369,962	▼
Anthem	215,861	▼
ConnectiCare	141,759	▲
United	130,982	▲
ConnectiCare	62,122	▲
Oxford Health	39,387	▼
ConnectiCare Benefits	34,820	▲
Aetna Health	23,812	▼
HPHC	21,758	▲
Golden Rule	4,659	▼
Oxford	4,038	▼
United Life	1,115	n/a
Harvard	800	▲
CT General	143	▼
Cigna	32	▼

■ HMO  
■ Indemnity

Total Enrollment  
**2,415,819**



The total enrollment includes people with private health insurance through individual policies or through their employer's fully-insured or self-insured plans. The enrollment does not include Medicare or Medicaid enrollees. CID has statutory authority over fully-insured plans, therefore the remainder of this book contains information on fully-insured plans and does not include information on self-funded plans, Medicare and Medicaid.

Note: United Life (Indemnity) is "n/a" because data for enrollment in 2013 and 2014 was unavailable.

\* Direction of change for Harvard (HMO), ConnectiCare Benefits (Indemnity), and HPHC (Indemnity) is from 2014-2015.

## Terms Consumers Should Know

Here is a list of common terms used in this Report Card and in health insurance generally:

**Adverse determination** A decision that denies, reduces, or terminates a health insurance benefit sought by an enrollee or his or her provider.

**Board certified physician** A doctor who has passed the medical examination for a particular practice specialty.

**Case management** A process that coordinates plans of treatment to achieve optimal patient outcomes.

**Center for Medicare & Medicaid Services** The federal government agency that administers Medicare and oversees the state's administration of the Medicaid program.

**Coinsurance** A fixed percentage of the medical costs that an enrollee must pay that may be in addition to any deductible.

**Copayment (copay)** A flat fee that an enrollee must pay each time a service is used that may be in addition to any deductible.

**Deductible** The dollar amount of medical costs in a calendar or contract year that an enrollee must pay before the plan makes any payments.

**Drug formulary** The list of prescription drugs for use under the plan.

**Emergency treatment** This is treatment for a condition of acute symptoms, including severe pain, in which the person would be in serious jeopardy should he or she not receive immediate medical attention.

**Enrollee** A person and his or her eligible dependent(s) who participates in a managed care plan.

**Fee for service** The plan pays the provider a fee for each service provided.

**Fully insured plan** The plan is backed by an insurance policy that guarantees benefits in exchange for premium payments.

**Gatekeeper plan** A plan that requires an enrollee's primary care physician to make a referral to a specialist in order for the plan to cover costs of the specialist's services.

**Health maintenance organization (HMO)** With this type of organization, subscribers pay a predetermined fee (premium) for medical services. Participating providers are registered with the organization.

**Indemnity managed care organization (indemnity MCO)** A licensed insurer that offers a managed care plan.

**Indemnity plan** A health insurance plan that provides reimbursement for medical services covered by the plan.

**Managed care plan** A plan offered by a managed care organization that has a network of providers and performs utilization review.

**Managed care organization (MCO)** An organization, whether HMO or indemnity insurer, that offers managed care plans.

**Maximum lifetime benefit** The maximum dollar amount that a plan will pay out during an enrollee's lifetime for nonessential benefits.

**Federal medical loss ratio (MLR)** The percentage of premium used to pay claims and certain permitted expenses.

**National Committee on Quality Assurance (NCQA)** A national not for profit that reviews plans' quality and performance measures and confers accreditation.

**Network** The group of providers that are under contract with an MCO to deliver medical services to enrollees for an agreed-upon fee. Generally, benefits for covered services will be higher than those for out-of-network providers.

**Point of service plan (POS)** A managed care plan that permits enrollees to utilize out of network providers, at lower levels of benefits or coverage.

**Preferred provider organization (PPO)** An independent group of providers that enters into a contract with an MCO to provide health services.

**Premium** The on-going amount paid for health insurance coverage, often monthly. Premium levels are proposed by the MCOs and approved by CID based on actuarial reviews where required by law.

**Primary care physician (PCP)** A physician practicing General Internal Medicine, General Practice, Family Practice, General Pediatrics or OB/GYN selected by an enrollee for his or her primary care.

**Preauthorization** A plan may require that services or treatment be preapproved before they will be covered. Also referred to as "precertification" or "prior authorization."

**Provider** A physician, hospital, nursing home, pharmacy, lab, or other individual or group that provides health care services.

**Reasonable and customary fee** The commonly charged or prevailing fee for a given health service in a specific geographic area.

**Referral** The request by a primary care physician to an MCO for an enrollee to receive care from an out-of-network specialist, non-participating provider or facility.

**Self-insured plan** A group plan under which an employer takes on the risk to pay claims, but may contract with a third party to administer the plan. These plans are not overseen by CID but are regulated under the federal Employee Retirement Income Security Act of 1974 (ERISA).

**Utilization review (UR)** The process used by a plan to determine whether the treatment, services or setting prescribed by a provider are appropriate or medically necessary for an enrollee. It may be conducted by any organization licensed in Connecticut to perform utilization reviews.

## Frequently Asked Questions

The information in this report card is based on data provided by the MCOs as of year end 2015. This report card does not contain information on specific plans offered by the MCOs. Each MCO offers several different plans, and often tailors them to a specific policyholder's needs. You will need to get additional information from the MCO or your employer to make your choice. In addition to this report card, you will need provider directories, premium or contribution rates and schedules of benefits for each plan you are considering.

**Q.** What types of plans are covered in this comparison?

**A.** Managed Care Plans offered by HMOs or traditional indemnity companies. These plans attempt to manage the access, cost and quality of health care by promoting early detection and preventive care.

**Q.** How does CID get its information for this Report Card?

**A.** CID sends a series of surveys to the companies. Their answers to our questions are summarized and included in this Report Card.

**Q.** Who can I call if I have questions about the information contained in this Report Card?

**A.** CID's Consumer Affairs Division at 1-800-203-3447.

**Q.** Does this Report Card evaluate all benefit options?

**A.** No. Because different plans provide different benefits, it would be nearly impossible to do so. Also, many benefits are mandated by law and therefore would be the same across plans.

**Q.** Who can I call if I have questions about specific benefit options?

**A.** Your employer, your insurer, or your independent agent.

**Q.** Does this Report Card include information regarding Medicare, Medicaid and other entitlement programs?

**A.** No.

**Q.** Does this Report Card also rate Medicare or Medicaid coverage and service?

**A.** No, the Report Card compares the performance of private, commercial insurers. Medicare is the federal health insurance program for people who are 65 or older and younger individuals with disabilities. Medicare information is available at [www.Medicare.gov](http://www.Medicare.gov) or through the Connecticut CHOICES at the Department on Aging at [www.ct.gov/agingservices](http://www.ct.gov/agingservices). Medicaid provides health coverage for low-income populations. In Connecticut, Medicaid is administered by the state Department of Social Services. More information can be found at [www.ct.gov/dss](http://www.ct.gov/dss).

**Q.** How are health insurance premiums set?

**A.** Under Connecticut law, individual and small group health insurance rates must be approved by CID. CID conducts an actuarial review of a health insurer's proposed rates to determine if they are reasonable in relationship to the benefits being provided and are neither excessive, inadequate nor unfairly discriminatory. CID posts all rate requests on its web site. There is opportunity for the public to comment online or at a public hearing.

# Member Satisfaction Survey

2015 DATA

HMO		Aetna Health	Anthem
Percentage of Managed Care members surveyed		66.3%	3.4%
Percentage of those surveyed who responded		14.5%	17.4%
Q: In the last 12 months, how often did you get an appointment with a specialists as soon as you needed?	Never	2.0%	2.1%
	Sometimes	12.7%	11.0%
	Usually	31.4%	37.2%
	Always	53.9%	49.7%
Q: In the last 12 months, how often did you get an appointment for a check-up or routine care at a doctor's office or clinic as soon as you needed?	Never	1.7%	0.9%
	Sometimes	8.7%	11.9%
	Usually	33.0%	26.9%
	Always	56.5%	60.4%
Q: In the last 12 months, when you needed care right away, how often did you get care as soon as you needed?	Never	1.7%	0.0%
	Sometimes	10.3%	5.1%
	Usually	20.7%	23.5%
	Always	67.2%	71.4%
Q: In the last 12 months, how often was it easy to get care, tests or treatment you needed?	Never	0.0%	0.4%
	Sometimes	5.5%	6.0%
	Usually	35.4%	32.3%
	Always	59.1%	61.2%
Q: In the last 12 months, how often did the written materials or Internet provide the information you needed about how your health plan works?	Never	13.0%	4.0%
	Sometimes	34.8%	42.1%
	Usually	37.0%	36.8%
	Always	15.2%	17.1%
Q: In the last 12 months, how often did your health plan's customer service give you the information or help you needed?	Never	3.9%	2.8%
	Sometimes	19.6%	19.7%
	Usually	21.6%	25.4%
	Always	54.9%	52.1%

# Member Satisfaction Survey

2015 DATA

Cigna	ConnectiCare	Harvard	Oxford Health
76.0%	0.8%	31.8%	54.0%
18.8%	18.6%	6.3%	19.4%
4.1%	3.3%	10.0%	2.5%
11.0%	10.0%	10.0%	12.4%
36.6%	40.0%	30.0%	31.1%
48.3%	46.7%	50.0%	54.1%
1.8%	0.0%	0.0%	2.0%
13.0%	9.8%	7.1%	14.9%
29.1%	24.4%	35.7%	28.2%
56.1%	65.9%	57.1%	54.9%
0.0%	4.6%	28.6%	1.6%
9.8%	0.0%	14.3%	10.1%
28.4%	40.9%	14.3%	22.9%
61.8%	54.5%	42.9%	65.5%
1.2%	0.0%	7.1%	1.2%
6.2%	7.3%	14.3%	8.9%
40.1%	48.8%	21.4%	33.5%
52.5%	43.9%	57.1%	56.4%
1.1%	18.2%	23.1%	4.3%
31.1%	27.3%	61.5%	29.2%
47.8%	45.5%	7.7%	43.2%
20.0%	9.1%	7.7%	23.3%
0.0%	6.3%	28.6%	3.4%
15.9%	37.5%	28.6%	15.1%
42.1%	25.0%	42.8%	28.5%
42.1%	31.3%	0.0%	53.0%

# Member Satisfaction Survey

2015 DATA

Indemnity		Aetna Life	Anthem	Cigna H & L
Percentage of Managed Care members surveyed		6.8%	1.3%	70.0%
Percentage of those surveyed who responded		18.9%	18.9%	22.2%
Q: In the last 12 months, how often did you get an appointment with a specialists as soon as you needed?	Never	0.7%	1.8%	1.8%
	Sometimes	9.4%	6.1%	11.0%
	Usually	34.8%	34.6%	38.1%
	Always	55.1%	57.6%	49.1%
Q: In the last 12 months, how often did you get an appointment for a check-up or routine care at a doctor's office or clinic as soon as you needed?	Never	2.8%	1.9%	1.7%
	Sometimes	17.8%	14.1%	13.2%
	Usually	25.0%	30.5%	28.8%
	Always	54.4%	53.5%	56.3%
Q: In the last 12 months, when you needed care right away, how often did you get care as soon as you needed?	Never	1.2%	0.0%	0.7%
	Sometimes	8.5%	9.0%	5.1%
	Usually	18.3%	18.0%	26.3%
	Always	72.0%	73.0%	67.9%
Q: In the last 12 months, how often was it easy to get care, tests or treatment you needed?	Never	0.0%	0.0%	0.0%
	Sometimes	8.7%	5.7%	7.9%
	Usually	36.6%	32.2%	38.4%
	Always	54.6%	62.1%	53.6%
Q: In the last 12 months, how often did the written materials or Internet provide the information you needed about how your health plan works?	Never	1.2%	4.5%	5.8%
	Sometimes	35.8%	37.3%	20.8%
	Usually	45.7%	49.3%	55.0%
	Always	17.3%	9.0%	18.3%
Q: In the last 12 months, how often did your health plan's customer service give you the information or help you needed?	Never	4.5%	1.5%	3.9%
	Sometimes	27.3%	22.7%	16.7%
	Usually	33.3%	25.8%	34.3%
	Always	34.8%	50.0%	45.1%

# Member Satisfaction Survey

2015 DATA

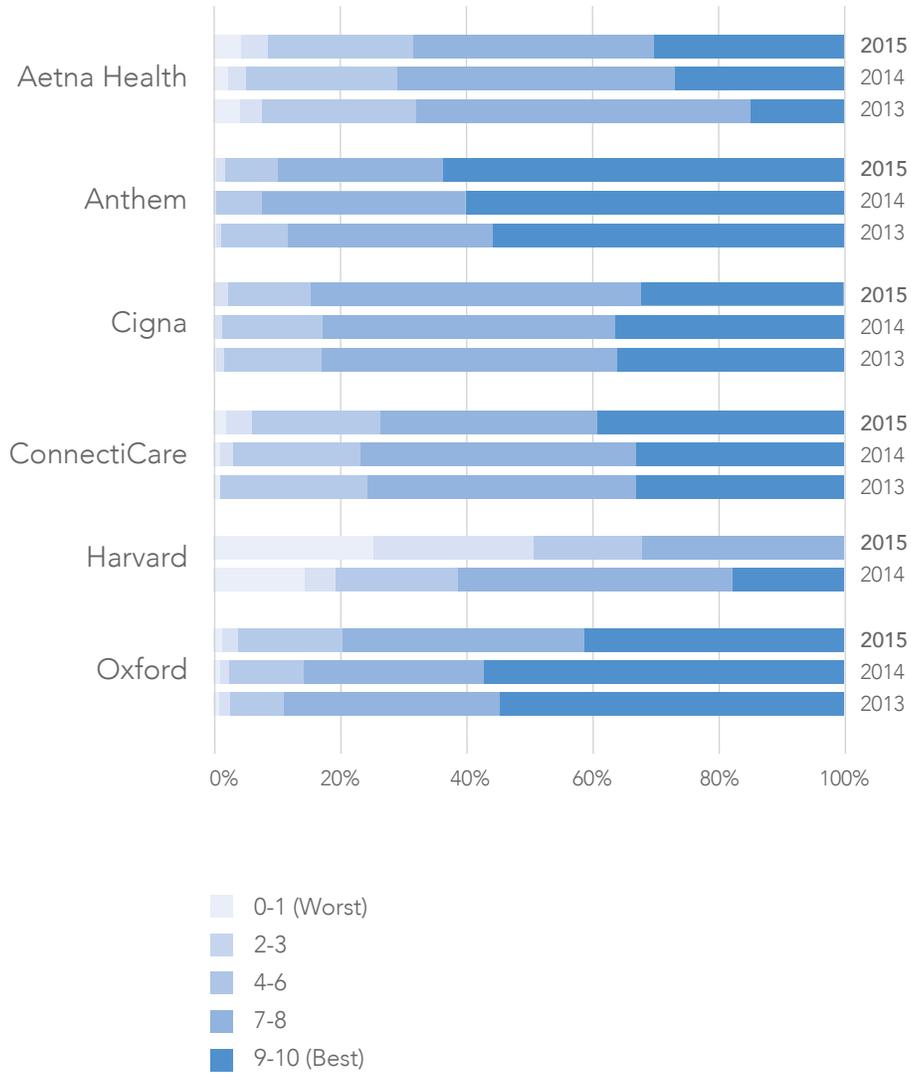
ConnectiCare Benefits	ConnectiCare	CT General	Golden Rule	HPHC	Oxford Health	United	United Life
3.7%	0.8%	70.0%	4.3%	99.9%	4.1%	1.2%	17.9%
26.4%	20.3%	20.5%	0.0%	18.3%	20.7%	17.8%	0.0%
3.4%	1.5%	3.0%	0.0%	2.4%	2.2%	2.2%	0.0%
13.4%	7.3%	11.0%	0.0%	12.9%	11.9%	11.9%	0.0%
25.5%	29.7%	37.4%	0.0%	27.1%	31.7%	31.7%	0.0%
57.7%	61.6%	48.6%	0.0%	57.6%	54.3%	54.3%	0.0%
3.7%	0.5%	1.8%	0.0%	3.3%	1.7%	1.7%	0.0%
22.8%	13.6%	13.1%	0.0%	12.5%	14.7%	14.7%	0.0%
24.1%	31.4%	29.0%	0.0%	25.8%	29.1%	29.1%	0.0%
49.4%	54.5%	56.1%	0.0%	58.3%	54.5%	54.5%	0.0%
0.0%	1.1%	0.4%	0.0%	1.7%	1.3%	1.3%	0.0%
0.0%	8.0%	7.5%	0.0%	10.0%	9.8%	9.8%	0.0%
21.4%	22.7%	27.4%	0.0%	30.0%	23.5%	23.5%	0.0%
67.3%	68.2%	64.7%	0.0%	58.3%	65.4%	65.4%	0.0%
2.5%	0.0%	0.6%	0.0%	12.3%	1.0%	1.0%	0.0%
11.1%	6.3%	7.1%	0.0%	9.8%	8.1%	8.1%	0.0%
30.2%	35.1%	39.3%	0.0%	33.1%	34.8%	34.8%	0.0%
56.2%	58.6%	53.2%	0.0%	54.9%	56.1%	56.1%	0.0%
3.2%	12.5%	3.5%	0.0%	6.3%	3.9%	3.9%	0.0%
30.5%	43.8%	26.0%	0.0%	31.3%	29.9%	29.9%	0.0%
40.0%	12.5%	51.4%	0.0%	45.3%	45.5%	45.5%	0.0%
26.3%	31.3%	19.1%	0.0%	17.2%	20.6%	20.6%	0.0%
3.4%	1.6%	2.0%	0.0%	4.5%	3.7%	3.7%	0.0%
19.0%	14.3%	16.3%	0.0%	18.2%	17.4%	17.4%	0.0%
33.6%	30.2%	38.2%	0.0%	27.3%	30.9%	30.9%	0.0%
44.0%	54.0%	43.5%	0.0%	50.0%	48.0%	48.0%	0.0%

# Member Satisfaction Survey

## HEALTH PLAN RATING

Q: How would you rate your health plan, on a scale of 0 to 10 where 0 is the worst health plan possible and 10 is the best health plan possible?

### HMO



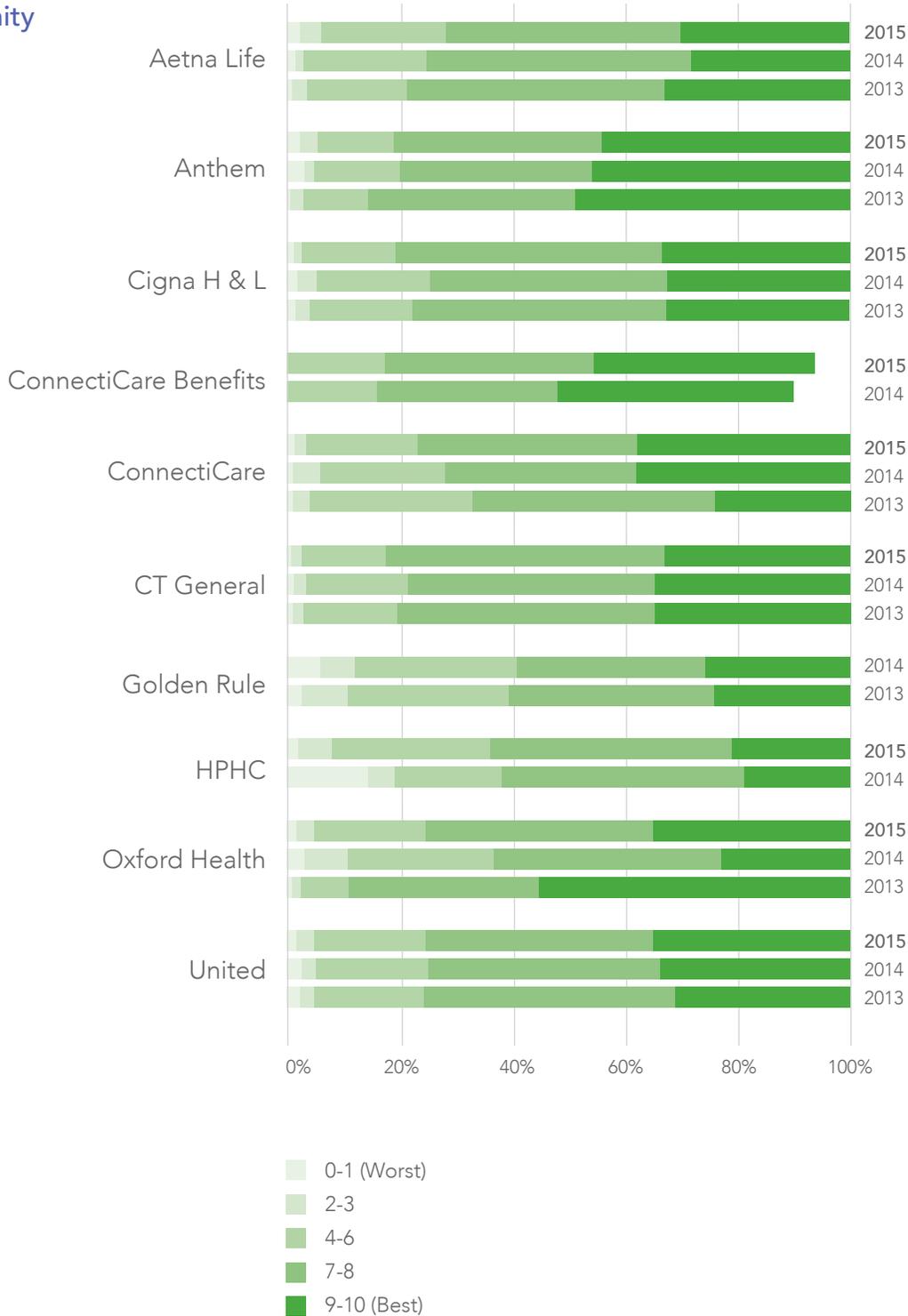
Note: Harvard was not conducting business in 2013.

# Member Satisfaction Survey

## HEALTH PLAN RATING

Q: How would you rate your health plan, on a scale of 0 to 10 where 0 is the worst health plan possible and 10 is the best health plan possible?

### Indemnity



Note: ConnectiCare Benefits and HPHC were not conducting business in 2013. Golden Rule had no response in 2015. ConnectiCare Benefits, Inc. totals do not equal 100% due to data provided by the company. United Life is excluded from this chart, as it had no response.

# Utilization Review Data

2015 DATA

## HMO - Aetna Health

	Medical Requests	MH/SA Requests	Total Requests
<b>A. The total number of utilization review requests.</b>	818	384	1,202
1. Based on medical necessity	818	378	1,196
2. Based on anything other than medical necessity	0	6	6
<b>B. The total number of UR requests in A that were denied.</b>	151	128	279
1. Based on medical necessity	140	122	262
2. Based on anything other than medical necessity	11	6	17
<b>The percentage of UR requests that were denied based on A.</b>	18.40%	33.30%	23.20%
1. Based on medical necessity	17.10%	31.70%	21.70%
2. Based on anything other than medical necessity	1.30%	1.50%	1.40%
<b>C. The total number of denials in B above that were appealed.</b>	32	4	36
1. Based on medical necessity	14	4	18
2. Based on anything other than medical necessity	18	0	18
<b>The percentage of denials in B above that were appealed.</b>	21.10%	3.10%	12.90%
1. Based on medical necessity	9.20%	3.10%	6.40%
2. Based on anything other than medical necessity	11.90%	0.00%	6.40%
<b>D. The total number of appeals in C that were reversed on appeal.</b>	7	3	10
1. Based on medical necessity	3	3	6
2. Based on anything other than medical necessity	4	0	4
<b>The percentage of appeals that were reversed on appeal.</b>	21.80%	75.00%	27.70%
1. Based on medical necessity	9.30%	75.00%	16.60%
2. Based on anything other than medical necessity	12.50%	0.00%	11.10%
<b>E. The total number of appeals in C that were upheld on appeal.</b>	25	1	26
1. Based on medical necessity	11	1	12
2. Based on anything other than medical necessity	14	0	14
<b>The percentage of appeals in C that were upheld on appeal.</b>	78.10%	25.00%	72.20%
1. Based on medical necessity	34.30%	25.00%	33.30%
2. Based on anything other than medical necessity	43.70%	0.00%	38.80%
<b>F. The number of appeals in E that went to external appeal (through CID).</b>	2	1	3
1. Based on medical necessity	1	1	2
2. Based on anything other than medical necessity	1	0	1
<b>The percentage of appeals in E that went to external appeal (through CID).</b>	8.00%	100.00%	11.50%
1. Based on medical necessity	4.00%	100.00%	7.60%
2. Based on anything other than medical necessity	4.00%	0.00%	3.80%
<b>G. The total number of external appeals above in F that were reversed on appeal.</b>	1	0	1
1. Based on medical necessity	1	0	1
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of external appeals above in F that were reversed on appeal.</b>	50.00%	0.00%	33.30%
1. Based on medical necessity	50.00%	0.00%	33.30%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%

# Utilization Review Data

2015 DATA

## HMO - Anthem

	Medical Requests	MH/SA Requests	Total Requests
<b>A. The total number of utilization review requests.</b>	11,027	1,438	12,466
1. Based on medical necessity	10,674	1,402	12,076
2. Based on anything other than medical necessity	353	36	389
<b>B. The total number of UR requests in A that were denied.</b>	759	55	814
1. Based on medical necessity	736	40	776
2. Based on anything other than medical necessity	23	15	38
<b>The percentage of UR requests that were denied based on A.</b>	6.88%	3.82%	6.53%
1. Based on medical necessity	6.90%	2.85%	6.43%
2. Based on anything other than medical necessity	6.52%	41.67%	9.77%
<b>C. The total number of denials in B above that were appealed.</b>	334	19	353
1. Based on medical necessity	125	15	140
2. Based on anything other than medical necessity	209	4	213
<b>The percentage of denials in B above that were appealed.</b>	44.01%	34.55%	43.37%
1. Based on medical necessity	16.98%	37.50%	18.04%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>D. The total number of appeals in C that were reversed on appeal.</b>	154	4	158
1. Based on medical necessity	41	3	44
2. Based on anything other than medical necessity	113	1	114
<b>The percentage of appeals that were reversed on appeal.</b>	46.11%	21.05%	44.76%
1. Based on medical necessity	32.80%	20.00%	31.43%
2. Based on anything other than medical necessity	54.07%	25.00%	53.52%
<b>E. The total number of appeals in C that were upheld on appeal.</b>	180	15	195
1. Based on medical necessity	84	12	96
2. Based on anything other than medical necessity	96	3	99
<b>The percentage of appeals in C that were upheld on appeal.</b>	53.89%	78.95%	55.24%
1. Based on medical necessity	67.20%	80.00%	68.57%
2. Based on anything other than medical necessity	45.93%	75.00%	46.48%
<b>F. The number of appeals in E that went to external appeal (through CID).</b>	10	3	13
1. Based on medical necessity	10	3	13
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of appeals in E that went to external appeal (through CID).</b>	5.56%	20.00%	6.67%
1. Based on medical necessity	11.90%	25.00%	13.54%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>G. The total number of external appeals above in F that were reversed on appeal.</b>	5	1	6
1. Based on medical necessity	5	1	6
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of external appeals above in F that were reversed on appeal.</b>	50.00%	33.33%	46.15%
1. Based on medical necessity	50.00%	33.33%	46.15%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%

# Utilization Review Data

2015 DATA

## HMO - Cigna

	Medical Requests	MH/SA Requests	Total Requests
<b>A. The total number of utilization review requests.</b>	18	0	18
1. Based on medical necessity	17	0	17
2. Based on anything other than medical necessity	1	0	1
<b>B. The total number of UR requests in A that were denied.</b>	1	0	1
1. Based on medical necessity	1	0	1
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of UR requests that were denied based on A.</b>	5.55%	0.00%	5.55%
1. Based on medical necessity	5.88%	0.00%	5.88%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>C. The total number of denials in B above that were appealed.</b>	0	0	0
1. Based on medical necessity	0	0	0
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of denials in B above that were appealed.</b>	0.00%	0.00%	0.00%
1. Based on medical necessity	0.00%	0.00%	0.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>D. The total number of appeals in C that were reversed on appeal.</b>	0	0	0
1. Based on medical necessity	0	0	0
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of appeals that were reversed on appeal.</b>	0.00%	0.00%	0.00%
1. Based on medical necessity	0.00%	0.00%	0.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>E. The total number of appeals in C that were upheld on appeal.</b>	0	0	0
1. Based on medical necessity	0	0	0
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of appeals in C that were upheld on appeal.</b>	0.00%	0.00%	0.00%
1. Based on medical necessity	0.00%	0.00%	0.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>F. The number of appeals in E that went to external appeal (through CID).</b>	0	0	0
1. Based on medical necessity	0	0	0
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of appeals in E that went to external appeal (through CID).</b>	0.00%	0.00%	0.00%
1. Based on medical necessity	0.00%	0.00%	0.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>G. The total number of external appeals above in F that were reversed on appeal.</b>	0	0	0
1. Based on medical necessity	0	0	0
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of external appeals above in F that were reversed on appeal.</b>	0.00%	0.00%	0.00%
1. Based on medical necessity	0.00%	0.00%	0.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%

# Utilization Review Data

2015 DATA

## HMO - ConnectiCare

	Medical Requests	MH/SA Requests	Total Requests
<b>A. The total number of utilization review requests.</b>	17,121	1,268	18,389
1. Based on medical necessity	16,810	1,252	18,062
2. Based on anything other than medical necessity	311	16	327
<b>B. The total number of UR requests in A that were denied.</b>	1,385	63	1,448
1. Based on medical necessity	1,074	47	1,121
2. Based on anything other than medical necessity	311	16	327
<b>The percentage of UR requests that were denied based on A.</b>	8.00%	5.00%	8.00%
1. Based on medical necessity	6.00%	4.00%	6.00%
2. Based on anything other than medical necessity	100.00%	100.00%	100.00%
<b>C. The total number of denials in B above that were appealed.</b>	121	1	122
1. Based on medical necessity	93	1	94
2. Based on anything other than medical necessity	28	0	28
<b>The percentage of denials in B above that were appealed.</b>	9.00%	2.00%	8.00%
1. Based on medical necessity	9.00%	2.00%	8.00%
2. Based on anything other than medical necessity	9.00%	0.00%	9.00%
<b>D. The total number of appeals in C that were reversed on appeal.</b>	35	0	35
1. Based on medical necessity	34	0	34
2. Based on anything other than medical necessity	1	0	1
<b>The percentage of appeals that were reversed on appeal.</b>	29.00%	0.00%	29.00%
1. Based on medical necessity	37.00%	0.00%	36.00%
2. Based on anything other than medical necessity	4.00%	0.00%	4.00%
<b>E. The total number of appeals in C that were upheld on appeal.</b>	86	1	87
1. Based on medical necessity	59	1	60
2. Based on anything other than medical necessity	27	0	27
<b>The percentage of appeals in C that were upheld on appeal.</b>	71.00%	100.00%	71.00%
1. Based on medical necessity	63.00%	100.00%	64.00%
2. Based on anything other than medical necessity	96.00%	0.00%	96.00%
<b>F. The number of appeals in E that went to external appeal (through CID).</b>	5	1	6
1. Based on medical necessity	3	1	4
2. Based on anything other than medical necessity	2	0	2
<b>The percentage of appeals in E that went to external appeal (through CID).</b>	6.00%	100.00%	7.00%
1. Based on medical necessity	5.00%	100.00%	7.00%
2. Based on anything other than medical necessity	7.00%	0.00%	7.00%
<b>G. The total number of external appeals above in F that were reversed on appeal.</b>	1	0	1
1. Based on medical necessity	0	0	0
2. Based on anything other than medical necessity	1	0	1
<b>The percentage of external appeals above in F that were reversed on appeal.</b>	20.00%	0.00%	17.00%
1. Based on medical necessity	0.00%	0.00%	0.00%
2. Based on anything other than medical necessity	50.00%	0.00%	50.00%

# Utilization Review Data

2015 DATA

## HMO - Harvard

	Medical Requests	MH/SA Requests	Total Requests
<b>A. The total number of utilization review requests.</b>	45	9	54
1. Based on medical necessity	43	8	51
2. Based on anything other than medical necessity	2	1	3
<b>B. The total number of UR requests in A that were denied.</b>	6	1	7
1. Based on medical necessity	1	0	1
2. Based on anything other than medical necessity	5	1	6
<b>The percentage of UR requests that were denied based on A.</b>	13.30%	11.10%	13.00%
1. Based on medical necessity	2.30%	0.00%	2.00%
2. Based on anything other than medical necessity	250.00%	100.00%	200.00%
<b>C. The total number of denials in B above that were appealed.</b>	4	0	4
1. Based on medical necessity	2	0	2
2. Based on anything other than medical necessity	2	0	2
<b>The percentage of denials in B above that were appealed.</b>	66.70%	0.00%	57.10%
1. Based on medical necessity	200.00%	0.00%	200.00%
2. Based on anything other than medical necessity	40.00%	0.00%	40.00%
<b>D. The total number of appeals in C that were reversed on appeal.</b>	1	0	1
1. Based on medical necessity	1	0	1
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of appeals that were reversed on appeal.</b>	25.00%	0.00%	25.00%
1. Based on medical necessity	50.00%	0.00%	50.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>E. The total number of appeals in C that were upheld on appeal.</b>	3	0	3
1. Based on medical necessity	1	0	1
2. Based on anything other than medical necessity	2	0	2
<b>The percentage of appeals in C that were upheld on appeal.</b>	75.00%	0.00%	75.00%
1. Based on medical necessity	50.00%	0.00%	50.00%
2. Based on anything other than medical necessity	100.00%	0.00%	100.00%
<b>F. The number of appeals in E that went to external appeal (through CID).</b>	0	0	0
1. Based on medical necessity	0	0	0
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of appeals in E that went to external appeal (through CID).</b>	0.00%	0.00%	0.00%
1. Based on medical necessity	0.00%	0.00%	0.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>G. The total number of external appeals above in F that were reversed on appeal.</b>	0	0	0
1. Based on medical necessity	0	0	0
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of external appeals above in F that were reversed on appeal.</b>	0.00%	0.00%	0.00%
1. Based on medical necessity	0.00%	0.00%	0.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%

# Utilization Review Data

2015 DATA

## HMO - Oxford

	Medical Requests	MH/SA Requests	Total Requests
<b>A. The total number of utilization review requests.</b>	5,144	68	5,212
1. Based on medical necessity	4,675	64	4,739
2. Based on anything other than medical necessity	469	4	473
<b>B. The total number of UR requests in A that were denied.</b>	519	17	536
1. Based on medical necessity	477	13	490
2. Based on anything other than medical necessity	42	4	46
<b>The percentage of UR requests that were denied based on A.</b>	10.00%	25.00%	10.00%
1. Based on medical necessity	10.00%	20.00%	10.00%
2. Based on anything other than medical necessity	9.00%	100.00%	10.00%
<b>C. The total number of denials in B above that were appealed.</b>	72	2	74
1. Based on medical necessity	40	1	41
2. Based on anything other than medical necessity	32	1	33
<b>The percentage of denials in B above that were appealed.</b>	14.00%	12.00%	14.00%
1. Based on medical necessity	8.00%	8.00%	8.00%
2. Based on anything other than medical necessity	76.00%	25.00%	72.00%
<b>D. The total number of appeals in C that were reversed on appeal.</b>	27	0	27
1. Based on medical necessity	20	0	20
2. Based on anything other than medical necessity	7	0	7
<b>The percentage of appeals that were reversed on appeal.</b>	38.00%	0.00%	36.00%
1. Based on medical necessity	50.00%	0.00%	49.00%
2. Based on anything other than medical necessity	22.00%	0.00%	21.00%
<b>E. The total number of appeals in C that were upheld on appeal.</b>	45	2	47
1. Based on medical necessity	20	1	21
2. Based on anything other than medical necessity	25	1	26
<b>The percentage of appeals in C that were upheld on appeal.</b>	63.00%	100.00%	64.00%
1. Based on medical necessity	50.00%	100.00%	51.00%
2. Based on anything other than medical necessity	78.00%	100.00%	79.00%
<b>F. The number of appeals in E that went to external appeal (through CID).</b>	1	0	1
1. Based on medical necessity	1	0	1
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of appeals in E that went to external appeal (through CID).</b>	2.00%	0.00%	2.00%
1. Based on medical necessity	5.00%	0.00%	5.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>G. The total number of external appeals above in F that were reversed on appeal.</b>	0	0	0
1. Based on medical necessity	0	0	0
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of external appeals above in F that were reversed on appeal.</b>	0.00%	0.00%	0.00%
1. Based on medical necessity	0.00%	0.00%	0.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%

# Utilization Review Data

2015 DATA

## Indemnity - Aetna Life

	Medical Requests	MH/SA Requests	Total Requests
<b>A. The total number of utilization review requests.</b>	33,251	11,564	44,815
1. Based on medical necessity	33,251	10,914	44,165
2. Based on anything other than medical necessity	0	650	650
<b>B. The total number of UR requests in A that were denied.</b>	6,503	3,711	10,214
1. Based on medical necessity	6,318	3,426	9,744
2. Based on anything other than medical necessity	185	285	470
<b>The percentage of UR requests that were denied based on A.</b>	19.50%	32.00%	22.70%
1. Based on medical necessity	19.00%	29.60%	21.70%
2. Based on anything other than medical necessity	0.50%	2.40%	1.00%
<b>C. The total number of denials in B above that were appealed.</b>	354	51	405
1. Based on medical necessity	230	49	279
2. Based on anything other than medical necessity	124	2	126
<b>The percentage of denials in B above that were appealed.</b>	5.40%	1.30%	3.90%
1. Based on medical necessity	3.50%	1.30%	2.70%
2. Based on anything other than medical necessity	1.90%	0.05%	1.20%
<b>D. The total number of appeals in C that were reversed on appeal.</b>	139	23	162
1. Based on medical necessity	122	23	145
2. Based on anything other than medical necessity	17	0	17
<b>The percentage of appeals that were reversed on appeal.</b>	39.20%	45.00%	40.00%
1. Based on medical necessity	34.40%	45.00%	35.80%
2. Based on anything other than medical necessity	4.80%	0.00%	4.10%
<b>E. The total number of appeals in C that were upheld on appeal.</b>	215	28	243
1. Based on medical necessity	108	26	134
2. Based on anything other than medical necessity	107	2	109
<b>The percentage of appeals in C that were upheld on appeal.</b>	60.70%	54.90%	60.00%
1. Based on medical necessity	30.50%	50.90%	33.00%
2. Based on anything other than medical necessity	30.20%	3.90%	26.90%
<b>F. The number of appeals in E that went to external appeal (through CID).</b>	30	5	35
1. Based on medical necessity	16	3	19
2. Based on anything other than medical necessity	14	2	16
<b>The percentage of appeals in E that went to external appeal (through CID).</b>	13.90%	17.80%	14.40%
1. Based on medical necessity	7.40%	10.70%	7.80%
2. Based on anything other than medical necessity	6.50%	7.10%	6.50%
<b>G. The total number of external appeals above in F that were reversed on appeal.</b>	8	2	10
1. Based on medical necessity	2	1	3
2. Based on anything other than medical necessity	6	1	7
<b>The percentage of external appeals above in F that were reversed on appeal.</b>	26.60%	40.00%	28.50%
1. Based on medical necessity	6.60%	20.00%	8.50%
2. Based on anything other than medical necessity	20.00%	20.00%	20.00%

# Utilization Review Data

2015 DATA

## Indemnity - Anthem

	Medical Requests	MH/SA Requests	Total Requests
<b>A. The total number of utilization review requests.</b>	71,677	4,130	75,807
1. Based on medical necessity	69,956	4,048	74,004
2. Based on anything other than medical necessity	1,721	82	1,803
<b>B. The total number of UR requests in A that were denied.</b>	7,119	197	7,316
1. Based on medical necessity	7,084	142	7,226
2. Based on anything other than medical necessity	35	55	90
<b>The percentage of UR requests that were denied based on A.</b>	9.93%	4.77%	9.65%
1. Based on medical necessity	10.13%	3.51%	9.76%
2. Based on anything other than medical necessity	2.03%	67.07%	4.99%
<b>C. The total number of denials in B above that were appealed.</b>	691	63	754
1. Based on medical necessity	353	63	416
2. Based on anything other than medical necessity	338	0	338
<b>The percentage of denials in B above that were appealed.</b>	9.71%	31.98%	10.31%
1. Based on medical necessity	4.98%	44.37%	5.76%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>D. The total number of appeals in C that were reversed on appeal.</b>	282	7	289
1. Based on medical necessity	122	7	129
2. Based on anything other than medical necessity	160	0	160
<b>The percentage of appeals that were reversed on appeal.</b>	40.81%	11.11%	38.33%
1. Based on medical necessity	34.56%	11.11%	31.01%
2. Based on anything other than medical necessity	47.34%	0.00%	47.34%
<b>E. The total number of appeals in C that were upheld on appeal.</b>	409	56	465
1. Based on medical necessity	231	56	287
2. Based on anything other than medical necessity	178	0	178
<b>The percentage of appeals in C that were upheld on appeal.</b>	59.19%	88.89%	61.67%
1. Based on medical necessity	65.44%	88.89%	68.99%
2. Based on anything other than medical necessity	52.66%	0.00%	52.66%
<b>F. The number of appeals in E that went to external appeal (through CID).</b>	29	16	45
1. Based on medical necessity	29	16	45
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of appeals in E that went to external appeal (through CID).</b>	7.09%	28.57%	9.68%
1. Based on medical necessity	12.55%	28.57%	15.68%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>G. The total number of external appeals above in F that were reversed on appeal.</b>	13	3	16
1. Based on medical necessity	13	3	16
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of external appeals above in F that were reversed on appeal.</b>	44.83%	18.75%	35.56%
1. Based on medical necessity	44.83%	18.75%	35.56%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%

# Utilization Review Data

2015 DATA

## Indemnity - Cigna H & L

	Medical Requests	MH/SA Requests	Total Requests
<b>A. The total number of utilization review requests.</b>	41,600	1,052	42,652
1. Based on medical necessity	38,703	1,052	39,755
2. Based on anything other than medical necessity	2,897	0	2,897
<b>B. The total number of UR requests in A that were denied.</b>	7,863	110	7,973
1. Based on medical necessity	7,704	102	7,806
2. Based on anything other than medical necessity	159	8	167
<b>The percentage of UR requests that were denied based on A.</b>	19.00%	10.50%	19.00%
1. Based on medical necessity	19.00%	9.70%	18.00%
2. Based on anything other than medical necessity	0.38%	0.80%	0.39%
<b>C. The total number of denials in B above that were appealed.</b>	565	46	611
1. Based on medical necessity	248	38	286
2. Based on anything other than medical necessity	317	8	325
<b>The percentage of denials in B above that were appealed.</b>	7.10%	41.80%	7.60%
1. Based on medical necessity	3.10%	37.30%	3.60%
2. Based on anything other than medical necessity	4.00%	100.00%	4.00%
<b>D. The total number of appeals in C that were reversed on appeal.</b>	120	11	131
1. Based on medical necessity	87	9	96
2. Based on anything other than medical necessity	33	2	35
<b>The percentage of appeals that were reversed on appeal.</b>	21.20%	23.90%	21.40%
1. Based on medical necessity	15.30%	23.70%	15.70%
2. Based on anything other than medical necessity	5.80%	25.00%	5.70%
<b>E. The total number of appeals in C that were upheld on appeal.</b>	6	35	41
1. Based on medical necessity	6	29	35
2. Based on anything other than medical necessity	0	6	6
<b>The percentage of appeals in C that were upheld on appeal.</b>	1.00%	76.10%	6.70%
1. Based on medical necessity	1.00%	76.30%	5.70%
2. Based on anything other than medical necessity	0.00%	75.00%	0.98%
<b>F. The number of appeals in E that went to external appeal (through CID).</b>	2	3	5
1. Based on medical necessity	2	3	5
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of appeals in E that went to external appeal (through CID).</b>	33.00%	8.60%	12.00%
1. Based on medical necessity	33.00%	10.30%	12.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>G. The total number of external appeals above in F that were reversed on appeal.</b>	2	1	3
1. Based on medical necessity	2	1	3
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of external appeals above in F that were reversed on appeal.</b>	100.00%	33.30%	60.00%
1. Based on medical necessity	100.00%	33.30%	60.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%

# Utilization Review Data

2015 DATA

## Indemnity - ConnectiCare Benefits

	Medical Requests	MH/SA Requests	Total Requests
<b>A. The total number of utilization review requests.</b>	21,095	1,479	22,574
1. Based on medical necessity	20,690	1,470	22,160
2. Based on anything other than medical necessity	405	9	414
<b>B. The total number of UR requests in A that were denied.</b>	2,656	69	2,725
1. Based on medical necessity	2,251	60	2,311
2. Based on anything other than medical necessity	405	9	414
<b>The percentage of UR requests that were denied based on A.</b>	13.00%	5.00%	12.00%
1. Based on medical necessity	11.00%	4.00%	10.00%
2. Based on anything other than medical necessity	100.00%	100.00%	100.00%
<b>C. The total number of denials in B above that were appealed.</b>	148	9	157
1. Based on medical necessity	109	9	118
2. Based on anything other than medical necessity	39	0	39
<b>The percentage of denials in B above that were appealed.</b>	6.00%	13.00%	6.00%
1. Based on medical necessity	5.00%	15.00%	5.00%
2. Based on anything other than medical necessity	10.00%	0.00%	9.00%
<b>D. The total number of appeals in C that were reversed on appeal.</b>	62	2	64
1. Based on medical necessity	60	2	62
2. Based on anything other than medical necessity	2	0	2
<b>The percentage of appeals that were reversed on appeal.</b>	42.00%	22.00%	41.00%
1. Based on medical necessity	55.00%	22.00%	53.00%
2. Based on anything other than medical necessity	5.00%	0.00%	5.00%
<b>E. The total number of appeals in C that were upheld on appeal.</b>	86	7	93
1. Based on medical necessity	49	7	56
2. Based on anything other than medical necessity	37	0	37
<b>The percentage of appeals in C that were upheld on appeal.</b>	58.00%	78.00%	59.00%
1. Based on medical necessity	45.00%	78.00%	47.00%
2. Based on anything other than medical necessity	95.00%	0.00%	95.00%
<b>F. The number of appeals in E that went to external appeal (through CID).</b>	3	0	3
1. Based on medical necessity	2	0	2
2. Based on anything other than medical necessity	1	0	1
<b>The percentage of appeals in E that went to external appeal (through CID).</b>	3.00%	0.00%	3.00%
1. Based on medical necessity	4.00%	0.00%	4.00%
2. Based on anything other than medical necessity	3.00%	0.00%	3.00%
<b>G. The total number of external appeals above in F that were reversed on appeal.</b>	0	0	0
1. Based on medical necessity	0	0	0
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of external appeals above in F that were reversed on appeal.</b>	0.00%	0.00%	0.00%
1. Based on medical necessity	0.00%	0.00%	0.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%

# Utilization Review Data

2015 DATA

## Indemnity - ConnectiCare

	Medical Requests	MH/SA Requests	Total Requests
<b>A. The total number of utilization review requests.</b>	48,745	4,917	53,662
1. Based on medical necessity	47,621	4,889	52,510
2. Based on anything other than medical necessity	1,124	28	1,152
<b>B. The total number of UR requests in A that were denied.</b>	5,897	273	6,170
1. Based on medical necessity	4,773	245	5,018
2. Based on anything other than medical necessity	1,124	28	1,152
<b>The percentage of UR requests that were denied based on A.</b>	12.00%	6.00%	11.00%
1. Based on medical necessity	10.00%	5.00%	10.00%
2. Based on anything other than medical necessity	100.00%	100.00%	100.00%
<b>C. The total number of denials in B above that were appealed.</b>	431	53	484
1. Based on medical necessity	351	53	404
2. Based on anything other than medical necessity	80	0	80
<b>The percentage of denials in B above that were appealed.</b>	7.00%	19.00%	8.00%
1. Based on medical necessity	7.00%	22.00%	8.00%
2. Based on anything other than medical necessity	7.00%	0.00%	7.00%
<b>D. The total number of appeals in C that were reversed on appeal.</b>	157	4	161
1. Based on medical necessity	156	4	160
2. Based on anything other than medical necessity	1	0	1
<b>The percentage of appeals that were reversed on appeal.</b>	36.43%	8.00%	33.00%
1. Based on medical necessity	44.00%	8.00%	40.00%
2. Based on anything other than medical necessity	1.00%	0.00%	1.00%
<b>E. The total number of appeals in C that were upheld on appeal.</b>	274	49	323
1. Based on medical necessity	195	49	244
2. Based on anything other than medical necessity	79	0	79
<b>The percentage of appeals in C that were upheld on appeal.</b>	64.00%	92.00%	67.00%
1. Based on medical necessity	56.00%	92.00%	60.00%
2. Based on anything other than medical necessity	99.00%	0.00%	99.00%
<b>F. The number of appeals in E that went to external appeal (through CID).</b>	15	5	20
1. Based on medical necessity	12	5	17
2. Based on anything other than medical necessity	3	0	3
<b>The percentage of appeals in E that went to external appeal (through CID).</b>	5.00%	10.00%	6.00%
1. Based on medical necessity	6.00%	10.00%	7.00%
2. Based on anything other than medical necessity	4.00%	0.00%	4.00%
<b>G. The total number of external appeals above in F that were reversed on appeal.</b>	5	2	7
1. Based on medical necessity	4	2	6
2. Based on anything other than medical necessity	1	0	1
<b>The percentage of external appeals above in F that were reversed on appeal.</b>	33.00%	40.00%	35.00%
1. Based on medical necessity	33.00%	40.00%	35.00%
2. Based on anything other than medical necessity	33.00%	0.00%	33.00%

# Utilization Review Data

2015 DATA

## Indemnity - CT General

	Medical Requests	MH/SA Requests	Total Requests
<b>A. The total number of utilization review requests.</b>	19	3	22
1. Based on medical necessity	11	3	14
2. Based on anything other than medical necessity	8	0	8
<b>B. The total number of UR requests in A that were denied.</b>	5	0	5
1. Based on medical necessity	5	0	5
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of UR requests that were denied based on A.</b>	26.00%	0.00%	23.00%
1. Based on medical necessity	45.00%	0.00%	36.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>C. The total number of denials in B above that were appealed.</b>	0	0	0
1. Based on medical necessity	0	0	0
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of denials in B above that were appealed.</b>	0.00%	0.00%	0.00%
1. Based on medical necessity	0.00%	0.00%	0.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>D. The total number of appeals in C that were reversed on appeal.</b>	0	0	0
1. Based on medical necessity	0	0	0
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of appeals that were reversed on appeal.</b>	0.00%	0.00%	0.00%
1. Based on medical necessity	0.00%	0.00%	0.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>E. The total number of appeals in C that were upheld on appeal.</b>	0	0	0
1. Based on medical necessity	0	0	0
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of appeals in C that were upheld on appeal.</b>	0.00%	0.00%	0.00%
1. Based on medical necessity	0.00%	0.00%	0.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>F. The number of appeals in E that went to external appeal (through CID).</b>	0	0	0
1. Based on medical necessity	0	0	0
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of appeals in E that went to external appeal (through CID).</b>	0.00%	0.00%	0.00%
1. Based on medical necessity	0.00%	0.00%	0.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>G. The total number of external appeals above in F that were reversed on appeal.</b>	0	0	0
1. Based on medical necessity	0	0	0
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of external appeals above in F that were reversed on appeal.</b>	0.00%	0.00%	0.00%
1. Based on medical necessity	0.00%	0.00%	0.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%

# Utilization Review Data

2015 DATA

## Indemnity - Golden Rule

	Medical Requests	MH/SA Requests	Total Requests
<b>A. The total number of utilization review requests.</b>	261	3	264
1. Based on medical necessity	260	3	263
2. Based on anything other than medical necessity	1	0	1
<b>B. The total number of UR requests in A that were denied.</b>	52	1	53
1. Based on medical necessity	51	1	52
2. Based on anything other than medical necessity	1	0	1
<b>The percentage of UR requests that were denied based on A.</b>	20.00%	33.00%	20.00%
1. Based on medical necessity	20.00%	33.00%	20.00%
2. Based on anything other than medical necessity	100.00%	0.00%	100.00%
<b>C. The total number of denials in B above that were appealed.</b>	13	0	13
1. Based on medical necessity	12	0	12
2. Based on anything other than medical necessity	1	0	1
<b>The percentage of denials in B above that were appealed.</b>	25.00%	0.00%	25.00%
1. Based on medical necessity	24.00%	0.00%	23.00%
2. Based on anything other than medical necessity	100.00%	0.00%	100.00%
<b>D. The total number of appeals in C that were reversed on appeal.</b>	3	0	3
1. Based on medical necessity	2	0	2
2. Based on anything other than medical necessity	1	0	1
<b>The percentage of appeals that were reversed on appeal.</b>	23.00%	0.00%	23.00%
1. Based on medical necessity	17.00%	0.00%	17.00%
2. Based on anything other than medical necessity	100.00%	0.00%	100.00%
<b>E. The total number of appeals in C that were upheld on appeal.</b>	10	0	10
1. Based on medical necessity	10	0	10
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of appeals in C that were upheld on appeal.</b>	77.00%	0.00%	77.00%
1. Based on medical necessity	83.00%	0.00%	83.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>F. The number of appeals in E that went to external appeal (through CID).</b>	0	0	0
1. Based on medical necessity	0	0	0
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of appeals in E that went to external appeal (through CID).</b>	0.00%	0.00%	0.00%
1. Based on medical necessity	0.00%	0.00%	0.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>G. The total number of external appeals above in F that were reversed on appeal.</b>	0	0	0
1. Based on medical necessity	0	0	0
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of external appeals above in F that were reversed on appeal.</b>	0.00%	0.00%	0.00%
1. Based on medical necessity	0.00%	0.00%	0.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%

# Utilization Review Data

2015 DATA

## Indemnity - HPHC

	Medical Requests	MH/SA Requests	Total Requests
<b>A. The total number of utilization review requests.</b>	1,656	302	1,958
1. Based on medical necessity	1,622	301	1,923
2. Based on anything other than medical necessity	34	1	35
<b>B. The total number of UR requests in A that were denied.</b>	185	10	195
1. Based on medical necessity	60	9	69
2. Based on anything other than medical necessity	125	1	126
<b>The percentage of UR requests that were denied based on A.</b>	11.20%	3.31%	10.00%
1. Based on medical necessity	3.70%	3.00%	3.60%
2. Based on anything other than medical necessity	370.00%	100.00%	360.00%
<b>C. The total number of denials in B above that were appealed.</b>	19	0	19
1. Based on medical necessity	12	0	12
2. Based on anything other than medical necessity	7	0	7
<b>The percentage of denials in B above that were appealed.</b>	10.30%	0.00%	9.74%
1. Based on medical necessity	20.00%	0.00%	20.00%
2. Based on anything other than medical necessity	5.60%	0.00%	5.60%
<b>D. The total number of appeals in C that were reversed on appeal.</b>	11	0	11
1. Based on medical necessity	9	0	9
2. Based on anything other than medical necessity	2	0	2
<b>The percentage of appeals that were reversed on appeal.</b>	57.90%	0.00%	57.90%
1. Based on medical necessity	75.00%	0.00%	75.00%
2. Based on anything other than medical necessity	29.00%	0.00%	29.00%
<b>E. The total number of appeals in C that were upheld on appeal.</b>	8	0	8
1. Based on medical necessity	3	0	3
2. Based on anything other than medical necessity	5	0	5
<b>The percentage of appeals in C that were upheld on appeal.</b>	42.10%	0.00%	42.10%
1. Based on medical necessity	25.00%	0.00%	25.00%
2. Based on anything other than medical necessity	71.00%	0.00%	71.00%
<b>F. The number of appeals in E that went to external appeal (through CID).</b>	0	0	0
1. Based on medical necessity	0	0	0
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of appeals in E that went to external appeal (through CID).</b>	0.00%	0.00%	0.00%
1. Based on medical necessity	0.00%	0.00%	0.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>G. The total number of external appeals above in F that were reversed on appeal.</b>	0	0	0
1. Based on medical necessity	0	0	0
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of external appeals above in F that were reversed on appeal.</b>	0.00%	0.00%	0.00%
1. Based on medical necessity	0.00%	0.00%	0.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%

# Utilization Review Data

2015 DATA

## Indemnity - Oxford Health

	Medical Requests	MH/SA Requests	Total Requests
<b>A. The total number of utilization review requests.</b>	32,294	732	33,026
1. Based on medical necessity	29,445	715	30,160
2. Based on anything other than medical necessity	2,849	17	2,866
<b>B. The total number of UR requests in A that were denied.</b>	3,469	121	3,590
1. Based on medical necessity	2,733	104	2,837
2. Based on anything other than medical necessity	736	17	753
<b>The percentage of UR requests that were denied based on A.</b>	11.00%	17.00%	11.00%
1. Based on medical necessity	9.00%	15.00%	9.00%
2. Based on anything other than medical necessity	26.00%	100.00%	26.00%
<b>C. The total number of denials in B above that were appealed.</b>	732	17	749
1. Based on medical necessity	430	13	443
2. Based on anything other than medical necessity	302	4	306
<b>The percentage of denials in B above that were appealed.</b>	21.00%	14.00%	21.00%
1. Based on medical necessity	16.00%	13.00%	16.00%
2. Based on anything other than medical necessity	41.00%	24.00%	41.00%
<b>D. The total number of appeals in C that were reversed on appeal.</b>	300	1	301
1. Based on medical necessity	248	1	249
2. Based on anything other than medical necessity	52	0	52
<b>The percentage of appeals that were reversed on appeal.</b>	41.00%	6.00%	40.00%
1. Based on medical necessity	58.00%	8.00%	56.00%
2. Based on anything other than medical necessity	17.00%	0.00%	17.00%
<b>E. The total number of appeals in C that were upheld on appeal.</b>	267	16	283
1. Based on medical necessity	17	12	29
2. Based on anything other than medical necessity	250	4	254
<b>The percentage of appeals in C that were upheld on appeal.</b>	36.00%	94.00%	38.00%
1. Based on medical necessity	4.00%	92.00%	7.00%
2. Based on anything other than medical necessity	83.00%	100.00%	83.00%
<b>F. The number of appeals in E that went to external appeal (through CID).</b>	17	0	17
1. Based on medical necessity	17	0	17
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of appeals in E that went to external appeal (through CID).</b>	6.00%	0.00%	6.00%
1. Based on medical necessity	100.00%	0.00%	59.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>G. The total number of external appeals above in F that were reversed on appeal.</b>	13	0	13
1. Based on medical necessity	13	0	13
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of external appeals above in F that were reversed on appeal.</b>	76.00%	0.00%	76.00%
1. Based on medical necessity	76.00%	0.00%	76.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%

# Utilization Review Data

2015 DATA

## Indemnity - United

	Medical Requests	MH/SA Requests	Total Requests
<b>A. The total number of utilization review requests.</b>	3,967	674	4,641
1. Based on medical necessity	3,247	665	3,912
2. Based on anything other than medical necessity	720	9	729
<b>B. The total number of UR requests in A that were denied.</b>	260	49	309
1. Based on medical necessity	210	40	250
2. Based on anything other than medical necessity	50	9	59
<b>The percentage of UR requests that were denied based on A.</b>	7.00%	7.00%	7.00%
1. Based on medical necessity	6.00%	6.00%	6.00%
2. Based on anything other than medical necessity	7.00%	100.00%	8.00%
<b>C. The total number of denials in B above that were appealed.</b>	28	18	46
1. Based on medical necessity	6	12	18
2. Based on anything other than medical necessity	22	6	28
<b>The percentage of denials in B above that were appealed.</b>	11.00%	37.00%	15.00%
1. Based on medical necessity	3.00%	30.00%	7.00%
2. Based on anything other than medical necessity	44.00%	67.00%	47.00%
<b>D. The total number of appeals in C that were reversed on appeal.</b>	8	2	10
1. Based on medical necessity	3	1	4
2. Based on anything other than medical necessity	5	1	6
<b>The percentage of appeals that were reversed on appeal.</b>	29.00%	11.00%	22.00%
1. Based on medical necessity	50.00%	8.00%	22.00%
2. Based on anything other than medical necessity	23.00%	17.00%	21.00%
<b>E. The total number of appeals in C that were upheld on appeal.</b>	20	16	36
1. Based on medical necessity	3	11	14
2. Based on anything other than medical necessity	17	5	22
<b>The percentage of appeals in C that were upheld on appeal.</b>	71.00%	89.00%	78.00%
1. Based on medical necessity	50.00%	92.00%	78.00%
2. Based on anything other than medical necessity	77.00%	83.00%	79.00%
<b>F. The number of appeals in E that went to external appeal (through CID).</b>	1	0	1
1. Based on medical necessity	1	0	1
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of appeals in E that went to external appeal (through CID).</b>	5.00%	0.00%	3.00%
1. Based on medical necessity	33.00%	0.00%	7.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>G. The total number of external appeals above in F that were reversed on appeal.</b>	1	0	1
1. Based on medical necessity	1	0	1
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of external appeals above in F that were reversed on appeal.</b>	100.00%	0.00%	100.00%
1. Based on medical necessity	100.00%	0.00%	100.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%

# Utilization Review Data

2015 DATA

## Indemnity - United Life

	Medical Requests	MH/SA Requests	Total Requests
<b>A. The total number of utilization review requests.</b>	156	0	156
1. Based on medical necessity	156	0	156
2. Based on anything other than medical necessity	0	0	0
<b>B. The total number of UR requests in A that were denied.</b>	22	0	22
1. Based on medical necessity	22	0	22
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of UR requests that were denied based on A.</b>	14.00%	0.00%	14.00%
1. Based on medical necessity	14.00%	0.00%	14.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>C. The total number of denials in B above that were appealed.</b>	1	0	1
1. Based on medical necessity	1	0	1
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of denials in B above that were appealed.</b>	5.00%	0.00%	5.00%
1. Based on medical necessity	5.00%	0.00%	5.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>D. The total number of appeals in C that were reversed on appeal.</b>	1	0	1
1. Based on medical necessity	1	0	1
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of appeals that were reversed on appeal.</b>	100.00%	0.00%	100.00%
1. Based on medical necessity	100.00%	0.00%	100.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>E. The total number of appeals in C that were upheld on appeal.</b>	0	0	0
1. Based on medical necessity	0	0	0
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of appeals in C that were upheld on appeal.</b>	0.00%	0.00%	0.00%
1. Based on medical necessity	0.00%	0.00%	0.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>F. The number of appeals in E that went to external appeal (through CID).</b>	0	0	0
1. Based on medical necessity	0	0	0
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of appeals in E that went to external appeal (through CID).</b>	0.00%	0.00%	0.00%
1. Based on medical necessity	0.00%	0.00%	0.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%
<b>G. The total number of external appeals above in F that were reversed on appeal.</b>	0	0	0
1. Based on medical necessity	0	0	0
2. Based on anything other than medical necessity	0	0	0
<b>The percentage of external appeals above in F that were reversed on appeal.</b>	0.00%	0.00%	0.00%
1. Based on medical necessity	0.00%	0.00%	0.00%
2. Based on anything other than medical necessity	0.00%	0.00%	0.00%

# Mental Health - Utilization Review Data

2015 DATA

## HMO - Aetna Health

	Acute Inpatient	Residential	Partial Hospitalization	Intensive Outpatient	Routine Outpatient	Substance Abuse Detox
Number of UR requests received	4	2	2	6	9	4
Number of UR requests denied	0	1	1	0	2	0
Percentage of UR requests that were denied	0.00%	50.00%	50.00%	0.00%	22.00%	0.00%
Number of denials that were appealed	0	1	0	0	0	0
Percentage of denials that were appealed	0.00%	100.00%	0.00%	0.00%	0.00%	0.00%
Number of appeals that reversed the decision	0	0	0	0	0	0
Percentage of appeals that reversed the decision	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of upheld appeals that went to external appeal	0	1	0	0	0	0
Percentage of upheld appeals that went to external appeals	0.00%	100.00%	0.00%	0.00%	0.00%	0.00%
Number of external appeals that reversed the decision	0	0	0	0	0	0
Percentage of external appeals that reversed the decision	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

## HMO - Anthem

	Acute Inpatient	Residential	Partial Hospitalization	Intensive Outpatient	Routine Outpatient	Substance Abuse Detox
Number of UR requests received	571	126	124	369	132	116
Number of UR requests denied	9	23	4	13	2	4
Percentage of UR requests that were denied	1.58%	18.25%	3.23%	3.52%	1.52%	3.45%
Number of denials that were appealed	3	10	0	1	4	1
Percentage of denials that were appealed	0.00%	0.01%	0.00%	0.00%	0.00%	0.00%
Number of appeals that reversed the decision	0	2	0	0	1	0
Percentage of appeals that reversed the decision	0.00%	20.00%	0.00%	0.00%	25.00%	0.00%
Number of upheld appeals that went to external appeal	0	1	0	2	0	0
Percentage of upheld appeals that went to external appeals	0.00%	12.50%	0.00%	25.00%	0.00%	0.00%
Number of external appeals that reversed the decision	0	1	0	0	0	0
Percentage of external appeals that reversed the decision	0.00%	100.00%	0.00%	0.00%	0.00%	0.00%

## HMO - Cigna

	Acute Inpatient	Residential	Partial Hospitalization	Intensive Outpatient	Routine Outpatient	Substance Abuse Detox
Number of UR requests received	0	0	0	0	0	0
Number of UR requests denied	0	0	0	0	0	0
Percentage of UR requests that were denied	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of denials that were appealed	0	0	0	0	0	0
Percentage of denials that were appealed	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of appeals that reversed the decision	0	0	0	0	0	0
Percentage of appeals that reversed the decision	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of upheld appeals that went to external appeal	0	0	0	0	0	0
Percentage of upheld appeals that went to external appeals	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of external appeals that reversed the decision	0	0	0	0	0	0
Percentage of external appeals that reversed the decision	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

# Mental Health - Utilization Review Data

2015 DATA

## HMO - ConnectiCare

	Acute Inpatient	Residential	Partial Hospitalization	Intensive Outpatient	Routine Outpatient	Substance Abuse Detox
Number of UR requests received	384	84	115	332	300	37
Number of UR requests denied	11	9	5	21	1	0
Percentage of UR requests that were denied	2.86%	10.71%	4.35%	6.33%	0.33%	0.00%
Number of denials that were appealed	1	1	0	1	0	0
Percentage of denials that were appealed	9.09%	1.11%	0.00%	4.76%	0.00%	0.00%
Number of appeals that reversed the decision	0	0	0	0	0	0
Percentage of appeals that reversed the decision	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of upheld appeals that went to external appeal	0	1	0	0	0	0
Percentage of upheld appeals that went to external appeals	0.00%	100.00%	0.00%	0.00%	0.00%	0.00%
Number of external appeals that reversed the decision	0	0	0	0	0	0
Percentage of external appeals that reversed the decision	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

## HMO - Harvard

	Acute Inpatient	Residential	Partial Hospitalization	Intensive Outpatient	Routine Outpatient	Substance Abuse Detox
Number of UR requests received	2	0	0	5	2	0
Number of UR requests denied	0	0	0	0	0	0
Percentage of UR requests that were denied	0.00%	0.00%	0.00%	1.00%	0.00%	0.00%
Number of denials that were appealed	0	0	0	0	0	0
Percentage of denials that were appealed	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of appeals that reversed the decision	0	0	0	0	0	0
Percentage of appeals that reversed the decision	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of upheld appeals that went to external appeal	0	0	0	0	0	0
Percentage of upheld appeals that went to external appeals	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of external appeals that reversed the decision	0	0	0	0	0	0
Percentage of external appeals that reversed the decision	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

## HMO - Oxford

	Acute Inpatient	Residential	Partial Hospitalization	Intensive Outpatient	Routine Outpatient	Substance Abuse Detox
Number of UR requests received	27	27	1	37	0	0
Number of UR requests denied	5	5	1	8	0	0
Percentage of UR requests that were denied	19.00%	19.00%	100.00%	22.00%	0.00%	0.00%
Number of denials that were appealed	2	5	2	2	0	0
Percentage of denials that were appealed	1.00%	19.00%	15.40%	5.00%	0.00%	0.00%
Number of appeals that reversed the decision	0	1	0	0	0	0
Percentage of appeals that reversed the decision	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of upheld appeals that went to external appeal	0	0	0	0	0	0
Percentage of upheld appeals that went to external appeals	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of external appeals that reversed the decision	0	0	0	0	0	0
Percentage of external appeals that reversed the decision	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

# Mental Health - Utilization Review Data

2015 DATA

## Indemnity - Aetna Life

	Acute Inpatient	Residential	Partial Hospitalization	Intensive Outpatient	Routine Outpatient	Substance Abuse Detox
Number of UR requests received	326	76	160	280	130	197
Number of UR requests denied	7	24	16	21	31	8
Percentage of UR requests that were denied	2.00%	32.00%	10.00%	8.00%	24.00%	4.00%
Number of denials that were appealed	4	12	2	5	12	1
Percentage of denials that were appealed	57.00%	50.00%	13.00%	24.00%	39.00%	13.00%
Number of appeals that reversed the decision	0	5	1	2	5	0
Percentage of appeals that reversed the decision	0.00%	42.00%	50.00%	40.00%	42.00%	0.00%
Number of upheld appeals that went to external appeal	1	2	0	0	1	0
Percentage of upheld appeals that went to external appeals	25.00%	17.00%	0.00%	0.00%	8.00%	0.00%
Number of external appeals that reversed the decision	0	1	0	0	1	0
Percentage of external appeals that reversed the decision	0.00%	50.00%	0.00%	0.00%	100.00%	0.00%

## Indemnity - Anthem

	Acute Inpatient	Residential	Partial Hospitalization	Intensive Outpatient	Routine Outpatient	Substance Abuse Detox
Number of UR requests received	1251	577	616	1251	239	196
Number of UR requests denied	26	64	29	56	8	14
Percentage of UR requests that were denied	2.08%	11.09%	4.71%	4.48%	3.35%	7.14%
Number of denials that were appealed	13	31	5	3	2	9
Percentage of denials that were appealed	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of appeals that reversed the decision	2	2	1	0	1	1
Percentage of appeals that reversed the decision	15.40%	20.00%	6.50%	0.00%	50.00%	11.00%
Number of upheld appeals that went to external appeal	1	12	0	0	1	2
Percentage of upheld appeals that went to external appeals	9.00%	41.30%	0.00%	0.00%	100.00%	25.00%
Number of external appeals that reversed the decision	0	3	0	0	0	0
Percentage of external appeals that reversed the decision	0.00%	25.00%	0.00%	0.00%	0.00%	0.00%

## Indemnity - Cigna H & L

	Acute Inpatient	Residential	Partial Hospitalization	Intensive Outpatient	Routine Outpatient	Substance Abuse Detox
Number of UR requests received	383	135	159	208	33	134
Number of UR requests denied	15	43	24	8	10	10
Percentage of UR requests that were denied	3.90%	31.90%	15.10%	3.80%	30.30%	7.50%
Number of denials that were appealed	11	18	5	4	6	2
Percentage of denials that were appealed	73.30%	41.90%	20.80%	50.00%	60.00%	20.00%
Number of appeals that reversed the decision	3	2	3	0	3	0
Percentage of appeals that reversed the decision	27.30%	11.10%	60.00%	0.00%	50.00%	0.00%
Number of upheld appeals that went to external appeal	0	2	0	0	1	0
Percentage of upheld appeals that went to external appeals	0.00%	12.50%	0.00%	0.00%	33.00%	0.00%
Number of external appeals that reversed the decision	0	1	0	0	0	0
Percentage of external appeals that reversed the decision	0.00%	50.00%	0.00%	0.00%	0.00%	0.00%

# Mental Health - Utilization Review Data

2015 DATA

## Indemnity - ConnectiCare Benefits

	Acute Inpatient	Residential	Partial Hospitalization	Intensive Outpatient	Routine Outpatient	Substance Abuse Detox
Number of UR requests received	444	148	112	436	236	97
Number of UR requests denied	13	12	3	30	2	0
Percentage of UR requests that were denied	2.93%	8.11%	2.68%	6.88%	0.85%	0.00%
Number of denials that were appealed	5	1	0	3	0	0
Percentage of denials that were appealed	38.50%	8.33%	0.00%	10.00%	0.00%	0.00%
Number of appeals that reversed the decision	1	0	0	1	0	0
Percentage of appeals that reversed the decision	20.00%	0.00%	0.00%	33.33%	0.00%	0.00%
Number of upheld appeals that went to external appeal	0	0	0	0	0	0
Percentage of upheld appeals that went to external appeals	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of external appeals that reversed the decision	0	0	0	0	0	0
Percentage of external appeals that reversed the decision	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

## Indemnity - ConnectiCare

	Acute Inpatient	Residential	Partial Hospitalization	Intensive Outpatient	Routine Outpatient	Substance Abuse Detox
Number of UR requests received	1197	477	580	1487	896	248
Number of UR requests denied	46	52	30	106	11	0
Percentage of UR requests that were denied	3.84%	10.90%	5.17%	7.13%	1.23%	0.00%
Number of denials that were appealed	5	14	7	27	0	0
Percentage of denials that were appealed	10.87%	26.92%	23.33%	25.47%	0.00%	0.00%
Number of appeals that reversed the decision	0	0	0	4	0	0
Percentage of appeals that reversed the decision	0.00%	0.00%	0.00%	14.81%	0.00%	0.00%
Number of upheld appeals that went to external appeal	0	5	0	0	0	0
Percentage of upheld appeals that went to external appeals	0.00%	36.00%	0.00%	0.00%	0.00%	0.00%
Number of external appeals that reversed the decision	0	2	0	0	0	0
Percentage of external appeals that reversed the decision	0.00%	40.00%	0.00%	0.00%	0.00%	0.00%

## Indemnity - CT General

	Acute Inpatient	Residential	Partial Hospitalization	Intensive Outpatient	Routine Outpatient	Substance Abuse Detox
Number of UR requests received	3	0	0	0	0	0
Number of UR requests denied	0	0	0	0	0	0
Percentage of UR requests that were denied	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of denials that were appealed	0	0	0	0	0	0
Percentage of denials that were appealed	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of appeals that reversed the decision	0	0	0	0	0	0
Percentage of appeals that reversed the decision	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of upheld appeals that went to external appeal	0	0	0	0	0	0
Percentage of upheld appeals that went to external appeals	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of external appeals that reversed the decision	0	0	0	0	0	0
Percentage of external appeals that reversed the decision	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

# Mental Health - Utilization Review Data

2015 DATA

## Indemnity - Golden Rule

	Acute Inpatient	Residential	Partial Hospitalization	Intensive Outpatient	Routine Outpatient	Substance Abuse Detox
Number of UR requests received	0	0	0	0	0	0
Number of UR requests denied	0	0	0	0	0	0
Percentage of UR requests that were denied	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of denials that were appealed	0	0	0	0	0	0
Percentage of denials that were appealed	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of appeals that reversed the decision	0	0	0	0	0	0
Percentage of appeals that reversed the decision	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of upheld appeals that went to external appeal	0	0	0	0	0	0
Percentage of upheld appeals that went to external appeals	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of external appeals that reversed the decision	0	0	0	0	0	0
Percentage of external appeals that reversed the decision	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

## Indemnity - HPHC

	Acute Inpatient	Residential	Partial Hospitalization	Intensive Outpatient	Routine Outpatient	Substance Abuse Detox
Number of UR requests received	99	25	43	97	50	0
Number of UR requests denied	4	5	5	5	3	0
Percentage of UR requests that were denied	4.00%	20.00%	12.00%	5.00%	6.00%	0.00%
Number of denials that were appealed	0	0	0	0	0	0
Percentage of denials that were appealed	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of appeals that reversed the decision	0	0	0	0	0	0
Percentage of appeals that reversed the decision	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of upheld appeals that went to external appeal	0	0	0	0	0	0
Percentage of upheld appeals that went to external appeals	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of external appeals that reversed the decision	0	0	0	0	0	0
Percentage of external appeals that reversed the decision	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

## Indemnity - Oxford Health

	Acute Inpatient	Residential	Partial Hospitalization	Intensive Outpatient	Routine Outpatient	Substance Abuse Detox
Number of UR requests received	261	274	12	455	0	0
Number of UR requests denied	13	26	12	91	0	0
Percentage of UR requests that were denied	5.00%	9.50%	100.00%	20.00%	0.00%	0.00%
Number of denials that were appealed	2	6	2	12	0	0
Percentage of denials that were appealed	15.40%	23.00%	17.00%	13.00%	0.00%	0.00%
Number of appeals that reversed the decision	1	0	0	0	0	0
Percentage of appeals that reversed the decision	50.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of upheld appeals that went to external appeal	0	0	0	0	0	0
Percentage of upheld appeals that went to external appeals	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of external appeals that reversed the decision	0	0	0	0	0	0
Percentage of external appeals that reversed the decision	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

# Mental Health - Utilization Review Data

2015 DATA

## Indemnity - United

	Acute Inpatient	Residential	Partial Hospitalization	Intensive Outpatient	Routine Outpatient	Substance Abuse Detox
Number of UR requests received	208	59	87	300	11	0
Number of UR requests denied	6	7	5	22	0	0
Percentage of UR requests that were denied	3.00%	13.50%	6.10%	8.00%	0.00%	0.00%
Number of denials that were appealed	2	2	2	6	0	0
Percentage of denials that were appealed	33.30%	29.00%	40.00%	27.20%	0.00%	0.00%
Number of appeals that reversed the decision	0	0	0	1	0	0
Percentage of appeals that reversed the decision	0.00%	0.00%	0.00%	17.00%	0.00%	0.00%
Number of upheld appeals that went to external appeal	0	0	0	0	0	0
Percentage of upheld appeals that went to external appeals	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of external appeals that reversed the decision	0	0	0	0	0	0
Percentage of external appeals that reversed the decision	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

## Indemnity - United Life

	Acute Inpatient	Residential	Partial Hospitalization	Intensive Outpatient	Routine Outpatient	Substance Abuse Detox
Number of UR requests received	0	0	0	0	0	0
Number of UR requests denied	0	0	0	0	0	0
Percentage of UR requests that were denied	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of denials that were appealed	0	0	0	0	0	0
Percentage of denials that were appealed	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of appeals that reversed the decision	0	0	0	0	0	0
Percentage of appeals that reversed the decision	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of upheld appeals that went to external appeal	0	0	0	0	0	0
Percentage of upheld appeals that went to external appeals	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Number of external appeals that reversed the decision	0	0	0	0	0	0
Percentage of external appeals that reversed the decision	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

# Mental Health - Care Measures

2015 DATA

## HMO

	Aetna Health	Anthem	Cigna	ConnectiCare	Harvard	Oxford
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### MENTAL HEALTH UTILIZATION

The total number of members who received care

	Aetna Health	Anthem	Cigna	ConnectiCare	Harvard	Oxford
A) Any mental health service	430	26,143	229	3,612	35	2,450
B) Inpatient mental health services	11	596	7	110	1	75
C) Intensive outpatient or partial hospitalization health services	9	638	7	129	0	62
D) Outpatient or emergency department health services	429	26,043	228	3,583	35	2,440

The percentage of all enrollees with a mental health benefit who received the respective service.

A) Inpatient mental health services	0.30%	0.31%	0.22%	0.29%	0.28%	0.29%
B) Intensive outpatient or partial hospitalization health services	0.24%	0.34%	0.22%	0.34%	0.00%	0.24%
C) Outpatient or emergency department health services	11.63%	13.72%	7.01%	9.53%	9.63%	9.55%

### ALCOHOL & OTHER DRUG SERVICES

The total number of members who received care

	Aetna Health	Anthem	Cigna	ConnectiCare	Harvard	Oxford
A) Any chemical dependency service	81	4,497	55	772	9	496
B) Inpatient chemical dependency services	15	852	13	126	3	112
C) Intensive outpatient or partial hospitalization health services	6	538	14	69	2	75
D) Outpatient or emergency department health services	76	4,096	53	720	8	441

The percentage of all enrollees with a alcohol and other drug benefit who received the respective service.

A) Inpatient chemical dependency services	0.41%	0.45%	0.40%	0.34%	0.83%	0.44%
B) Intensive outpatient or partial hospitalization health services	0.16%	0.28%	0.43%	0.18%	0.55%	0.29%
C) Outpatient or emergency department health services	2.06%	2.16%	1.63%	1.91%	2.20%	1.73%

Pursuant to 38a-478i(c), mental health data shall be collected consistent with NCQA HEDIS measures. The NCQA has retired discharge rates and average lengths of stay and therefore this information is not included in this report card.

# Mental Health - Care Measures

2015 DATA

## Indemnity

	Aetna Life	Anthem	Cigna H & L	ConnectiCare Benefits	ConnectiCare
<b>MENTAL HEALTH UTILIZATION</b>					
The total number of members who received care					
A) Any mental health service	29,252	46,204	25,994	3,313	12,925
B) Inpatient mental health services	681	1,220	628	111	334
C) Intensive outpatient or partial hospitalization health services	797	1,006	571	88	315
D) Outpatient or emergency department health services	29,078	45,964	25,858	3,286	12,845
The percentage of all enrollees with a mental health benefit who received the respective service.					
A) Inpatient mental health services	0.21%	0.25%	0.21%	0.30%	0.23%
B) Intensive outpatient or partial hospitalization health services	0.25%	0.21%	0.19%	0.24%	0.22%
C) Outpatient or emergency department health services	9.01%	9.47%	8.77%	8.98%	8.94%
<b>ALCOHOL &amp; OTHER DRUG SERVICES</b>					
The total number of members who received care					
A) Any chemical dependency service	5,761	8,782	4,283	1,007	2,969
B) Inpatient chemical dependency services	1,117	1,863	673	166	487
C) Intensive outpatient or partial hospitalization health services	771	982	627	109	343
D) Outpatient or emergency department health services	5,286	7,861	4,117	946	2,780
The percentage of all enrollees with an alcohol and other drug benefit who received the respective service.					
A) Inpatient chemical dependency services	0.35%	0.38%	0.23%	0.45%	0.34%
B) Intensive outpatient or partial hospitalization health services	0.24%	0.20%	0.21%	0.30%	0.24%
C) Outpatient or emergency department health services	1.64%	1.62%	1.42%	2.59%	1.93%

Pursuant to 38a-478l(c), mental health data shall be collected consistent with NCOA HEDIS measures. The NCOA has retired discharge rates and average lengths of stay and therefore this information is not included in this report card.

# Mental Health - Care Measures

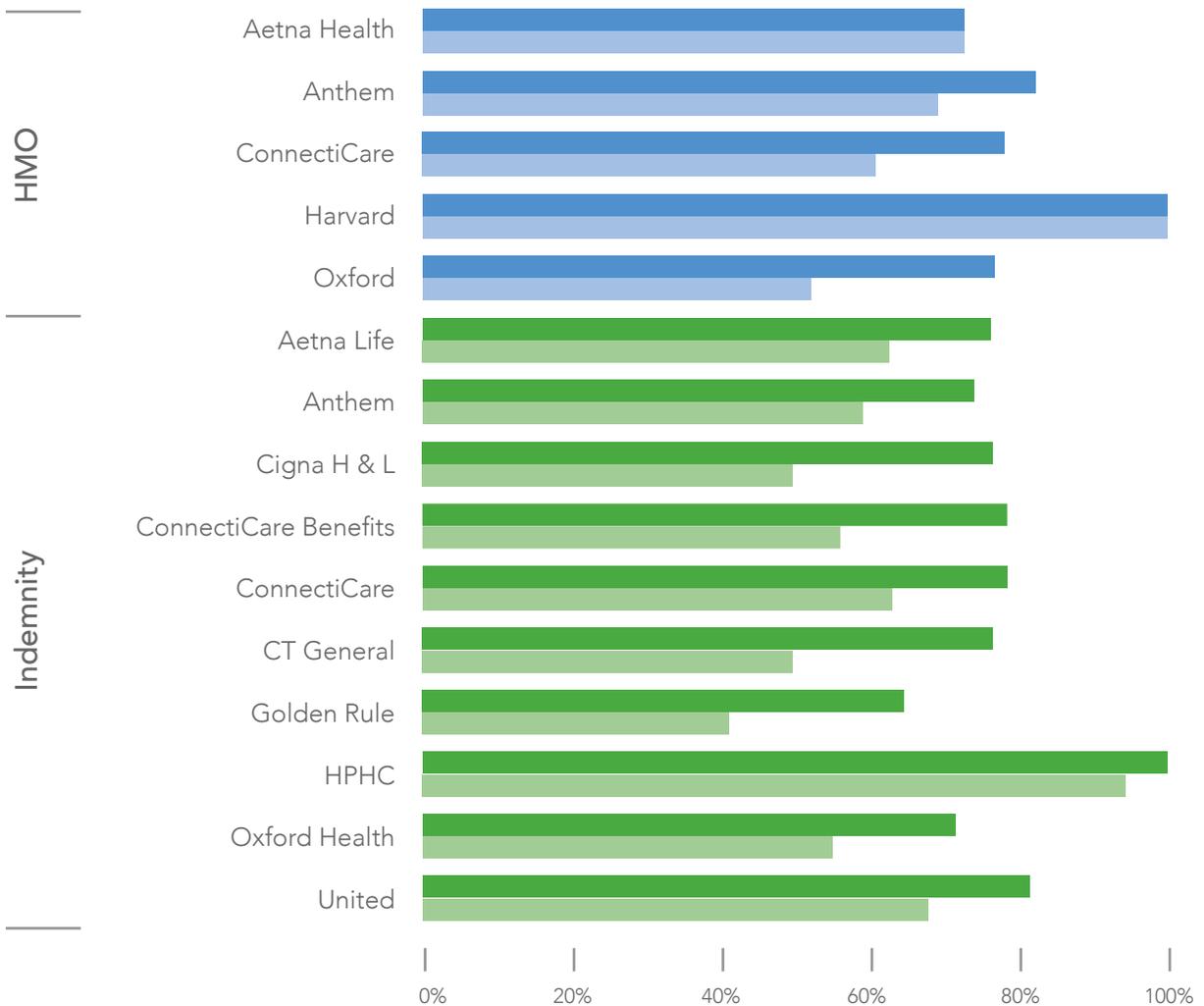
2015 DATA

CT General	Golden Rule	HPHC	Oxford Health	United	United Life
26,223	1,245	879	5,050	13,933	231
635	96	22	130	379	12
578	9	17	83	395	0
26,086	1,232	872	5,025	13,938	219
0.04%	1.30%	0.23%	0.25%	0.25%	1.08%
0.03%	0.10%	0.18%	0.16%	0.26%	0.00%
1.46%	17.20%	9.11%	9.60%	9.34%	19.04%
4,338	195	201	974	2,375	27
686	25	40	276	522	4
641	3	24	113	302	0
4,230	189	189	825	2,144	23
0.04%	0.30%	0.42%	0.53%	0.35%	0.36%
0.04%	0.00%	0.25%	0.22%	0.20%	0.00%
0.24%	2.60%	1.79%	1.58%	1.44%	2.06%

# Mental Health - Care Measures

2015 DATA

## Follow-Up After Hospitalization



The percentage of discharges for members 6 years of age and older as of the discharge date who: (a) were continuously enrolled from the date of discharge through 30 days after discharge and (b) had an acute care inpatient discharge with a principal diagnosis of mental illness with a discharge date on or between January 1 and December 1, 2015:

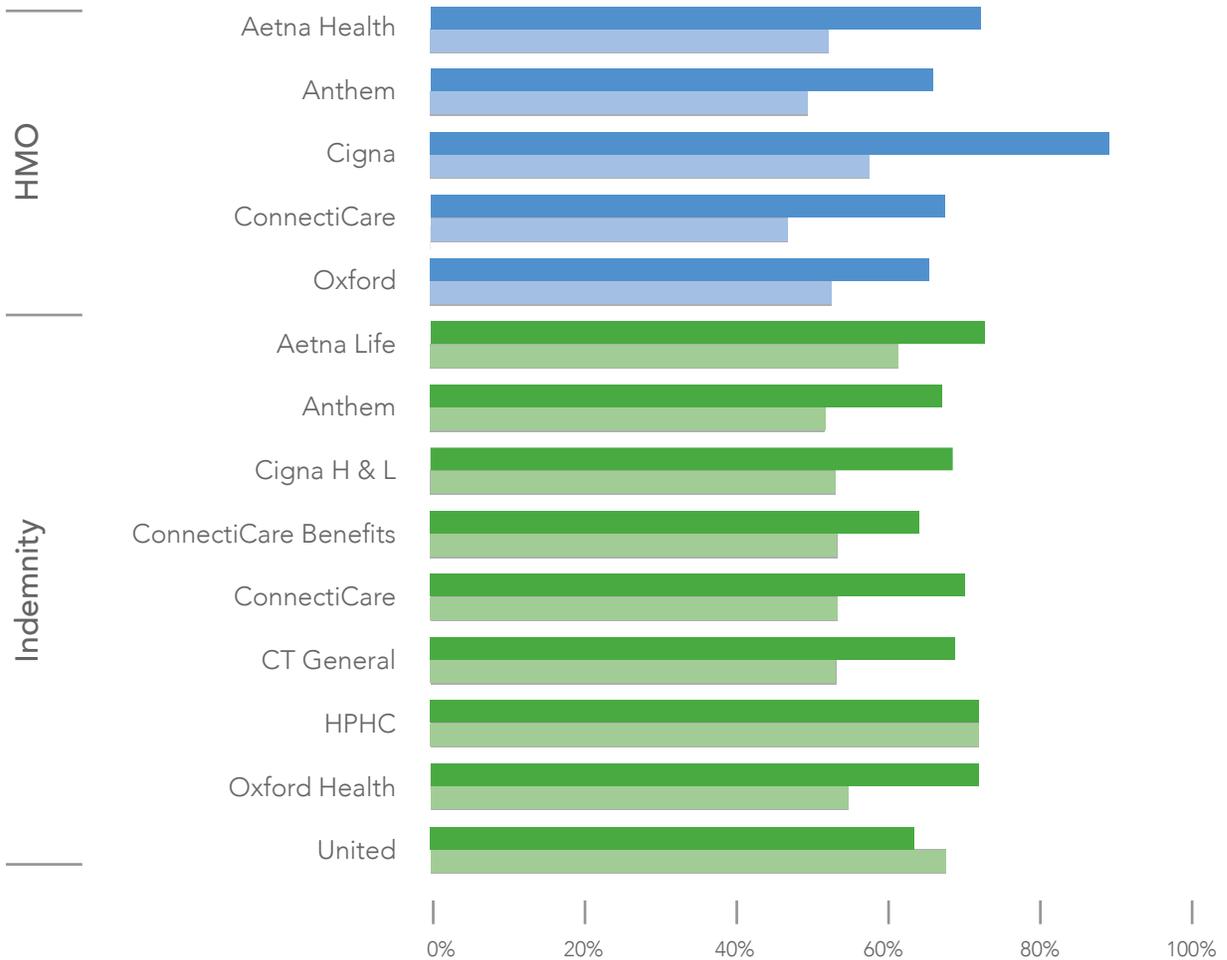
- A) Who had an outpatient visit, intensive outpatient visit or partial hospitalization with a mental health practitioner within 30 days after the hospital discharge.
- B) Who had an outpatient visit, intensive outpatient visit or partial hospitalization with a mental health practitioner within 7 days after the hospital discharge.

Note: Cigna (HMO) and United Life (Indemnity) were excluded from chart as proportion served was 0%.

# Mental Health - Care Measures

2015 DATA

## Anti-Depressant Medication Management



The percentage of members 18 and older as of April 30, 2015, who: (a) were continuously enrolled 105 days prior to the index prescription start date (IPSD) through 231 days after the IPSD, (b) were not taking an antidepressant medication 105 days prior to the IPSD, (c) were diagnosed with a new episode of depression between May 1, 2014, and April 30, 2015, and treated with antidepressant medication, and (d) met at least one of the following criteria during the intake period: (1) an outpatient, intensive outpatient or partial hospitalization setting with a diagnosis of major depression; (2) an ED visit with any diagnosis of major depression; or (3) at least one inpatient claim/encounter with any diagnosis of major depression.

- ■ A) Who remained on antidepressant medication for at least an 84-day period (12 weeks).
- ■ B) Who remained on antidepressant medication for at least 180 days (6 months).

Note: Harvard (HMO), Golden Rule (Indemnity), and United Life (Indemnity) were excluded from chart as proportion served was 0%.

## Mental Health - Claims

2015 DATA

Claim expenses are on a per member per month basis.

### HMO

	Aetna Health	Anthem	Cigna	ConnectiCare	Harvard	Oxford
Total mental health	\$10.64	\$11.15	\$0.00	\$7.64	\$10.10	\$9.97
Inpatient mental health	\$1.60	\$3.91	\$0.00	\$2.46	\$4.21	\$2.71
Outpatient mental health	\$9.04	\$7.24	\$0.00	\$5.18	\$5.89	\$7.25
Total substance abuse	\$7.83	\$2.95	\$0.00	\$1.69	\$3.72	\$4.82
Inpatient substance abuse	\$3.32	\$1.91	\$0.00	\$0.14	\$0.66	\$1.52
Outpatient substance abuse	\$4.51	\$1.04	\$0.00	\$1.55	\$3.06	\$3.30
Total medical	\$475.19	\$321.96	\$2,287.36	\$340.17	\$168.48	\$347.91
Inpatient medical	\$156.31	\$80.23	\$1,098.86	\$97.55	\$52.66	\$84.16
Outpatient medical	\$318.88	\$241.73	\$1,188.50	\$242.62	\$115.82	\$263.75
Total for all inpatient	\$161.23	\$86.05	\$1,098.86	\$100.15	\$57.53	\$88.39
Total for all outpatient	\$332.43	\$250.01	\$1,188.50	\$249.35	\$124.77	\$274.31

### Indemnity

	Aetna Life	Anthem	Cigna H & L	ConnectiCare Benefits	ConnectiCare	CT General
Total mental health	\$10.33	\$13.38	\$5.95	\$8.03	\$6.12	\$76.63
Inpatient mental health	\$3.52	\$4.80	\$2.47	\$2.43	\$1.66	\$7.83
Outpatient mental health	\$6.81	\$8.58	\$3.48	\$5.60	\$4.46	\$68.80
Total substance abuse	\$3.75	\$3.85	\$1.61	\$3.60	\$2.95	\$0.00
Inpatient substance abuse	\$1.06	\$2.42	\$0.60	\$0.40	\$0.26	\$0.00
Outpatient substance abuse	\$2.69	\$1.43	\$1.01	\$3.20	\$2.69	\$0.00
Total medical	\$333.93	\$342.74	\$2,224.47	\$328.19	\$290.19	\$1,691.64
Inpatient medical	\$85.49	\$92.42	\$935.71	\$94.36	\$82.76	\$280.03
Outpatient medical	\$248.44	\$250.32	\$1,288.76	\$233.83	\$207.43	\$1,411.61
Total for all inpatient	\$90.07	\$99.64	\$938.78	\$97.19	\$84.68	\$287.86
Total for all outpatient	\$257.94	\$260.33	\$1,293.25	\$242.63	\$214.58	\$1,480.41

# Mental Health - Claims

2015 DATA



Thousands of Connecticut individuals and families use their insurance to access behavioral health & substance abuse treatment.

THE CONNECTICUT INSURANCE DEPARTMENT IS HERE TO HELP WITH QUESTIONS OR CONCERNS.



Golden Rule	HPHC	Oxford Health	United	United Life
\$24.54	\$10.10	\$8.33	\$4.99	\$48.11
\$5.84	\$4.21	\$2.65	\$1.12	\$11.54
\$18.70	\$5.89	\$5.68	\$3.87	\$36.57
\$8.96	\$3.72	\$3.28	\$1.04	\$24.27
\$1.28	\$0.66	\$1.52	\$0.30	\$5.51
\$7.68	\$3.06	\$1.76	\$0.74	\$18.76
\$447.00	\$264.65	\$342.36	\$309.57	\$486.76
\$102.79	\$77.78	\$85.85	\$83.69	\$142.55
\$344.21	\$186.87	\$256.51	\$225.88	\$344.21
\$109.91	\$82.65	\$90.02	\$85.11	\$159.60
\$370.59	\$195.82	\$263.94	\$230.49	\$399.54

# Claim Denials

2015 DATA

## HMO

		Aetna Health	Anthem
The total number of claims received for the period.		102,968	449,011
Provide the number of denials of the total in each of the following:	1) "not a covered benefit"	2,980	2,228
	2) "not medically necessary"	59	363
	3) "not an eligible enrollee/dependent"	13,619	30,013
	4) "incomplete submission"	726	2,903
	5) "duplicate submission"	1,390	40,388
	6) "all other miscellaneous"	12,635	36,336
Provide the number of denials as a percent of the total claims for the following:	1) "not a covered benefit"	2.89%	0.50%
	2) "not medically necessary"	0.06%	0.08%
	3) "not an eligible enrollee/dependent"	13.23%	6.68%
	4) "incomplete submission"	0.71%	0.65%
	5) "duplicate submission"	1.35%	8.99%
	6) "all other miscellaneous"	12.27%	8.09%
Provide the number of internal appeals of denials in each of the following:	1) "not a covered benefit"	19	4
	2) "not medically necessary"	10	15
	3) "not an eligible enrollee/dependent"	0	0
	4) "incomplete submission"	1	0
	5) "duplicate submission"	0	0
	6) "all other miscellaneous"	47	0
Provide the number of internal appeals as a percent of the total claims for the following:	1) "not a covered benefit"	0.02%	0.00%
	2) "not medically necessary"	0.01%	0.00%
	3) "not an eligible enrollee/dependent"	0.00%	0.00%
	4) "incomplete submission"	0.00%	0.00%
	5) "duplicate submission"	0.00%	0.00%
	6) "all other miscellaneous"	0.05%	0.00%
Provide the number of internal appeals reversed on appeal in each of the following:	1) "not a covered benefit"	2	1
	2) "not medically necessary"	0	3
	3) "not an eligible enrollee/dependent"	0	0
	4) "incomplete submission"	0	0
	5) "duplicate submission"	0	0
	6) "all other miscellaneous"	13	0
Provide the reversed appeals as a percent of the total claims for the following:	1) "not a covered benefit"	0.00%	0.00%
	2) "not medically necessary"	0.00%	0.00%
	3) "not an eligible enrollee/dependent"	0.00%	0.00%
	4) "incomplete submission"	0.00%	0.00%
	5) "duplicate submission"	0.00%	0.00%
	6) "all other miscellaneous"	0.01%	0.00%

# Claim Denials

2015 DATA

Cigna	ConnectiCare	Harvard	Oxford
414	1,267,003	3,053	162,268
7	7,636	28	2,767
0	720	0	188
3	36,829	2	10,195
1	39,644	233	1,515
0	35,042	175	7,898
21	96,934	168	24,120
1.69%	0.60%	0.92%	1.71%
0.00%	0.06%	0.00%	0.12%
0.72%	2.91%	0.07%	6.28%
0.24%	3.13%	7.63%	0.93%
0.00%	2.77%	5.73%	4.87%
5.07%	7.65%	5.50%	14.86%
0	24	2	0
0	22	2	39
0	7	0	0
0	38	0	0
0	13	0	6
1	551	0	31
0.00%	0.00%	0.07%	0.00%
0.00%	0.00%	0.07%	0.02%
0.00%	0.00%	0.00%	0.00%
0.00%	0.00%	0.00%	0.00%
0.00%	0.00%	0.00%	0.00%
0.24%	0.04%	0.00%	0.02%
0	9	0	0
0	0	1	37
0	0	0	0
0	15	0	0
0	6	0	3
0	186	0	52
0.00%	0.00%	0.00%	0.00%
0.00%	0.00%	0.03%	0.02%
0.00%	0.00%	0.00%	0.00%
0.00%	0.00%	0.00%	0.00%
0.00%	0.00%	0.00%	0.00%
0.00%	0.01%	0.00%	0.03%

# Claim Denials

2015 DATA

## Indemnity

		Aetna Life	Anthem	Cigna H & L
The total number of claims received for the period.		2,682,565	1,181,584	910,601
Provide the number of denials of the total in each of the following:	1) "not a covered benefit"	85,554	5,546	47,854
	2) "not medically necessary"	2,714	1,621	1,084
	3) "not an eligible enrollee/dependent"	172,050	52,327	639
	4) "incomplete submission"	21,831	37,973	3,118
	5) "duplicate submission"	21,812	41,339	30
	6) "all other miscellaneous"	336,536	83,173	112,175
Provide the denials as a percent of the total claims for the following:	1) "not a covered benefit"	3.19%	0.47%	5.26%
	2) "not medically necessary"	0.10%	0.14%	0.12%
	3) "not an eligible enrollee/dependent"	6.41%	4.43%	0.07%
	4) "incomplete submission"	0.81%	3.21%	0.34%
	5) "duplicate submission"	0.81%	3.50%	0.00%
	6) "all other miscellaneous"	12.55%	7.04%	12.32%
Provide the number of internal appeals of denials in each of the following:	1) "not a covered benefit"	150	0	0
	2) "not medically necessary"	65	63	248
	3) "not an eligible enrollee/dependent"	0	0	0
	4) "incomplete submission"	0	0	0
	5) "duplicate submission"	0	0	0
	6) "all other miscellaneous"	388	0	317
Provide the internal appeals as a percent of the total claims for the following:	1) "not a covered benefit"	0.01%	0.00%	0.00%
	2) "not medically necessary"	0.00%	0.01%	2.72%
	3) "not an eligible enrollee/dependent"	0.00%	0.00%	0.00%
	4) "incomplete submission"	0.00%	0.00%	0.00%
	5) "duplicate submission"	0.00%	0.00%	0.00%
	6) "all other miscellaneous"	0.01%	0.00%	3.48%
Provide the number of internal appeals reversed on appeal in each of the following:	1) "not a covered benefit"	29	0	0
	2) "not medically necessary"	12	7	87
	3) "not an eligible enrollee/dependent"	0	0	0
	4) "incomplete submission"	0	0	0
	5) "duplicate submission"	0	0	0
	6) "all other miscellaneous"	160	0	33
Provide the reversed appeals as a percent of the total claims for the following:	1) "not a covered benefit"	0.00%	0.00%	0.00%
	2) "not medically necessary"	0.00%	0.00%	0.96%
	3) "not an eligible enrollee/dependent"	0.00%	0.00%	0.00%
	4) "incomplete submission"	0.00%	0.00%	0.00%
	5) "duplicate submission"	0.00%	0.00%	0.00%
	6) "all other miscellaneous"	0.01%	0.00%	0.36%

# Claim Denials

2015 DATA

ConnectiCare Benefits	ConnectiCare	CT General	Golden Rule	HPHC	Oxford Health	United	United Life
1,291,904	4,384,374	727	61,545	95,996	1,406,504	4,501,046	15,865
12,522	33,761	33	3,757	844	18,854	190,359	156
3,001	1,968	2	48	63	2,983	68,103	9
44,146	56,991	4	3,971	102	39,904	13,114	195
41,175	160,847	5	628	1,777	15,546	32,325	80
42,335	138,409	0	4,725	7,385	64,585	134,458	1,206
81,226	278,966	94	2,275	5,430	202,515	387,424	1,469
0.97%	0.77%	4.56%	6.10%	0.88%	1.00%	4.00%	0.98%
0.23%	0.04%	0.28%	0.10%	0.07%	0.20%	2.00%	0.06%
3.42%	1.30%	0.55%	6.50%	0.11%	3.00%	0.30%	1.23%
3.19%	3.67%	0.69%	1.00%	1.85%	1.00%	1.00%	0.50%
3.28%	3.16%	0.00%	7.70%	7.69%	5.00%	3.00%	7.60%
6.29%	6.36%	13.00%	3.70%	5.66%	14.00%	9.00%	9.26%
48	124	0	32	5	0	5	3
1	2	3	7	3	61	39	0
0	8	0	4	0	0	2	0
45	188	0	4	0	0	13	1
39	52	0	7	0	3	10	2
271	983	10	23	0	109	59	12
0.00%	0.00%	0.00%	0.05%	0.01%	0.00%	0.00%	0.02%
0.00%	0.00%	0.41%	0.01%	0.00%	0.00%	0.00%	0.00%
0.00%	0.00%	0.00%	0.01%	0.00%	0.00%	0.00%	0.00%
0.00%	0.00%	0.00%	0.01%	0.00%	0.00%	0.00%	0.01%
0.00%	0.00%	0.00%	0.01%	0.00%	0.00%	0.00%	0.01%
0.02%	0.02%	1.38%	0.04%	0.00%	0.00%	0.00%	0.08%
22	57	0	9	2	0	6	1
0	0	1	1	9	17	38	0
0	0	0	2	0	0	5	0
18	57	0	1	0	0	3	1
17	27	0	3	0	0	1	0
74	298	2	10	0	244	83	7
0.00%	0.00%	0.00%	0.02%	0.00%	0.00%	0.00%	0.01%
0.00%	0.00%	0.14%	0.00%	0.01%	0.00%	0.00%	0.00%
0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.01%
0.00%	0.00%	0.00%	0.01%	0.00%	0.00%	0.00%	0.00%
0.01%	0.01%	0.28%	0.02%	0.00%	0.00%	0.00%	0.04%

## Federal Medical Loss Ratios

2015 DATA

Medical loss ratio (MLR) is the proportion of premiums spent on medical expenses or quality improvement. Under federal law, any company that does not meet the minimum loss ratio requirement may be required to pay rebates in that market. The federal standard is: 80% for individual and small group plans and 85% for large group plans.

### HMO

	Individual	Small Group	Large Group
Aetna Health	0.0%	304.0%	101.1%
Anthem	81.4%	84.6%	89.9%
Cigna	0.0%	0.0%	0.0%
ConnectiCare	97.0%	88.2%	90.2%
Harvard	0.0%	0.0%	0.0%
Oxford	0.0%	88.4%	91.8%

### Indemnity

	Individual	Small Group	Large Group
Aetna Life	92.7%	86.0%	82.3%
Anthem	81.4%	84.6%	89.9%
Cigna H & L	105.9%	95.4%	90.2%
ConnectiCare Benefits	80.0%	0.0%	0.0%
ConnectiCare	94.7%	83.4%	89.6%
CT General	134.7%	85.3%	92.8%
Golden Rule	88.4%	0.0%	0.0%
HPHC	0.0%	112.7%	99.1%
Oxford	94.9%	82.7%	85.1%
United	94.4%	148.6%	88.6%
United Life	107.4%	0.0%	0.0%

Note: Harvard (HMO) had fewer than 1,000 members over a three year period so they were not required to calculate a federal MLR. Other carriers reporting 0.00% did not serve the market.

The state MLR is not included in the report as the federal MLR is the determining factor in any rebates required based on ACA.

## Participating Providers by County

The following tables show the total number of primary care physicians\*, physician specialists, hospitals and pharmacies for each HMO provider network in Connecticut by county. If an individual physician practices in more than one office, the physician is only counted once. Physicians who practice in more than one county were placed in the county that has the largest number of the HMO's enrollees.

### HMO

	FAIRFIELD COUNTY											
	Primary Care Physicians			Physician Specialists			Hospitals			Pharmacies		
	2016	2015	2014	2016	2015	2014	2016	2015	2014	2016	2015	2014
Aetna Health	1,109	1,054	1,006	2,414	2,223	2,098	6	6	6	160	163	164
Anthem	999	1,030	757	1,706	1,818	1,766	6	6	6	162	160	161
Cigna	1,387	1,196	1,174	3,393	3,157	2,861	6	6	6	164	166	161
ConnectiCare	1,414	1,214	1,158	2,659	1,983	1,848	6	6	6	162	161	149
Harvard	445	177	n/a	2,110	521	n/a	6	5	n/a	160	250	n/a
Oxford	715	916	953	1,921	1,793	1,775	6	6	6	158	159	163

	HARTFORD COUNTY											
	Primary Care Physicians			Physician Specialists			Hospitals			Pharmacies		
	2016	2015	2014	2016	2015	2014	2016	2015	2014	2016	2015	2014
Aetna Health	1,055	1,056	1,038	2,363	2,335	2,214	7	7	7	184	187	187
Anthem	1,096	1,100	853	2,076	2,399	2,309	7	7	7	182	182	180
Cigna	1,598	1,144	1,180	3,831	3,421	3,305	7	7	7	185	185	178
ConnectiCare	1,640	1,583	1,503	3,675	3,411	3,308	7	7	7	183	183	157
Harvard	710	474	n/a	4,667	1,324	n/a	7	7	n/a	181	282	n/a
Oxford	761	967	964	1,970	1,904	1,963	7	7	7	179	182	181

	LITCHFIELD COUNTY											
	Primary Care Physicians			Physician Specialists			Hospitals			Pharmacies		
	2016	2015	2014	2016	2015	2014	2016	2015	2014	2016	2015	2014
Aetna Health	174	148	151	537	533	412	3	3	3	40	40	41
Anthem	127	140	113	162	248	245	2	3	3	40	39	39
Cigna	209	178	156	486	480	458	3	3	3	40	40	40
ConnectiCare	150	144	141	217	211	213	3	3	3	39	39	33
Harvard	60	30	n/a	305	81	n/a	4	2	n/a	40	56	n/a
Oxford	116	126	129	333	294	299	2	2	3	40	39	40

\* Primary care physicians are defined as physicians practicing General Internal Medicine, General Practice, Family Practice, and General Pediatrics. OB/GYN physicians are not considered to be primary care physicians for this tabulation.

Note: Harvard did not report data in 2014 as it was not licensed to operate in CT.

# Participating Providers by County

## HMO

	MIDDLESEX COUNTY											
	Primary Care Physicians			Physician Specialists			Hospitals			Pharmacies		
	2016	2015	2014	2016	2015	2014	2016	2015	2014	2016	2015	2014
Aetna Health	197	183	221	479	464	319	1	1	1	38	36	36
Anthem	224	221	172	256	253	252	1	1	1	38	36	35
Cigna	269	245	251	451	429	431	1	1	1	36	36	33
ConnectiCare	211	210	208	206	198	186	1	1	1	38	36	32
Harvard	75	54	n/a	415	146	n/a	1	1	n/a	36	57	n/a
Oxford	164	206	217	296	282	277	1	1	1	37	35	35

	NEW HAVEN COUNTY											
	Primary Care Physicians			Physician Specialists			Hospitals			Pharmacies		
	2016	2015	2014	2016	2015	2014	2016	2015	2014	2016	2015	2014
Aetna Health	1,230	1,190	1,141	2,905	2,823	2,686	7	7	7	181	181	179
Anthem	1,163	1,177	751	2,403	2,515	2,438	6	7	7	183	179	177
Cigna	1,515	1,298	1,229	3,876	4,041	3,849	7	7	7	179	180	174
ConnectiCare	1,331	1,404	1,448	2,749	3,261	3,201	7	7	7	183	181	153
Harvard	377	215	n/a	3,968	1,281	n/a	5	4	n/a	175	263	n/a
Oxford	776	955	971	2,396	2,275	2,286	6	6	6	177	179	176

	NEW LONDON COUNTY											
	Primary Care Physicians			Physician Specialists			Hospitals			Pharmacies		
	2016	2015	2014	2016	2015	2014	2016	2015	2014	2016	2015	2014
Aetna Health	251	238	226	627	609	580	2	2	2	52	51	51
Anthem	279	282	200	395	438	436	2	2	2	54	52	49
Cigna	269	222	212	687	725	668	2	2	2	58	58	49
ConnectiCare	307	290	255	606	579	548	2	2	2	54	52	40
Harvard	112	27	n/a	683	97	n/a	2	1	n/a	49	78	n/a
Oxford	195	242	225	447	403	396	2	2	2	53	56	54

Note: Harvard did not report data in 2014 as it was not licensed to operate in CT.

# Participating Providers by County

## HMO

	TOLLAND COUNTY											
	Primary Care Physicians			Physician Specialists			Hospitals			Pharmacies		
	2016	2015	2014	2016	2015	2014	2016	2015	2014	2016	2015	2014
Aetna Health	146	145	152	340	292	269	2	2	2	24	25	23
Anthem	88	95	77	69	98	85	1	2	2	25	23	22
Cigna	206	173	150	307	333	297	2	2	2	23	24	20
ConnectiCare	98	103	107	87	99	102	2	2	2	25	24	18
Harvard	45	34	n/a	237	39	n/a	2	2	n/a	22	45	n/a
Oxford	100	124	122	189	155	152	2	2	2	25	25	22

	WINDHAM COUNTY											
	Primary Care Physicians			Physician Specialists			Hospitals			Pharmacies		
	2016	2015	2014	2016	2015	2014	2016	2015	2014	2016	2015	2014
Aetna Health	134	136	136	250	229	228	2	2	2	22	23	24
Anthem	116	122	88	117	128	138	2	2	2	22	23	23
Cigna	153	141	140	295	284	272	2	2	2	22	23	23
ConnectiCare	127	125	127	152	125	150	2	2	2	22	23	18
Harvard	55	39	n/a	160	35	n/a	2	2	n/a	24	47	n/a
Oxford	103	123	126	171	169	183	2	2	2	22	22	24

	TOTAL, ALL COUNTIES											
	Primary Care Physicians			Physician Specialists			Hospitals			Pharmacies		
	2016	2015	2014	2016	2015	2014	2016	2015	2014	2016	2015	2014
Aetna Health	4,296	4,150	4,071	9,915	9,508	8,806	30	30	30	701	706	705
Anthem	4,092	4,167	3,011	7,184	7,897	7,669	27	30	30	706	694	686
Cigna	5,606	4,597	4,492	13,326	12,870	12,141	30	30	30	707	712	678
ConnectiCare	5,278	5,073	4,947	10,351	9,867	9,556	30	30	30	706	699	600
Harvard	1,879	1,050	n/a	12,545	3,524	n/a	29	24	n/a	687	1,078	n/a
Oxford	2,930	3,659	3,707	7,723	7,275	7,331	28	28	29	691	697	695

Note: Harvard did not report data in 2014 as it was not licensed to operate in CT.

## Participating Providers by County

The following tables show the total number of primary care physicians\*, physician specialists, hospitals and pharmacies for each Indemnity provider network in Connecticut counties. If an individual physician practices in more than one office, the physician is only counted once. Physicians who practice in more than one county were placed in the county that has the largest number of the Indemnity's enrollees.

### Indemnity

	FAIRFIELD COUNTY											
	Primary Care Physicians			Physician Specialists			Hospitals			Pharmacies		
	2016	2015	2014	2016	2015	2014	2016	2015	2014	2016	2015	2014
Aetna Life	1,109	1,054	1,007	2,414	2,223	2,098	6	6	6	160	163	164
Anthem	1,018	1,049	778	1,748	1,860	1,809	6	6	6	162	160	161
Cigna H & L	1,372	1,202	1,194	3,263	3,258	2,996	6	6	6	165	166	161
ConnectiCare Benefits	1,361	1,276	n/a	2,553	2,457	n/a	6	6	n/a	162	161	n/a
ConnectiCare	1,414	1,214	1,158	2,659	1,983	1,848	6	6	6	162	161	149
CT General	1,372	1,202	1,194	3,263	3,258	2,996	6	6	6	165	166	161
Golden Rule	983	916	953	1,921	1,793	1,775	6	6	6	158	159	161
HPHC	445	177	n/a	2,110	521	n/a	6	5	n/a	160	250	n/a
Oxford Health	715	916	953	1,921	1,793	1,775	6	6	6	158	159	163
United	715	916	953	1,921	1,793	1,775	6	6	6	158	159	163
United Life	983	n/a	n/a	1,921	n/a	n/a	6	n/a	n/a	158	n/a	n/a

\* Primary care physicians are defined as physicians practicing General Internal Medicine, General Practice, Family Practice, and General Pediatrics. OB/GYN physicians are not considered to be primary care physicians for this tabulation.

Note: ConnectiCare Benefits and HPHC did not report data in 2014 as they were not licensed to operate in CT. United Life did not report 2015 and 2014.

# Participating Providers by County

## Indemnity

	HARTFORD COUNTY											
	Primary Care Physicians			Physician Specialists			Hospitals			Pharmacies		
	2016	2015	2014	2016	2015	2014	2016	2015	2014	2016	2015	2014
Aetna Life	1,055	1,056	1,032	2,363	2,335	2,225	7	7	7	184	187	187
Anthem	1,099	1,103	860	2,121	2,445	2,360	7	7	7	182	182	180
Cigna H & L	1,589	1,163	1,215	3,831	3,517	3,475	7	7	7	185	185	178
ConnectiCare Benefits	1,603	1,503	n/a	3,538	3,212	n/a	7	7	n/a	183	183	n/a
ConnectiCare	1,640	1,583	1,503	3,675	3,411	3,308	7	7	7	183	183	157
CT General	1,589	1,163	1,215	3,831	3,517	3,475	7	7	7	185	185	178
Golden Rule	893	967	964	1,970	1,904	1,963	7	7	7	170	182	181
HPHC	710	474	n/a	4,667	1,324	n/a	7	7	n/a	181	282	n/a
Oxford Health	761	967	964	1,970	1,904	1,963	7	7	7	179	182	181
United	761	967	964	1,970	1,904	1,963	7	7	7	179	182	181
United Life	893	n/a	n/a	1,970	n/a	n/a	7	n/a	n/a	170	n/a	n/a

	LITCHFIELD COUNTY											
	Primary Care Physicians			Physician Specialists			Hospitals			Pharmacies		
	2016	2015	2014	2016	2015	2014	2016	2015	2014	2016	2015	2014
Aetna Life	174	148	151	537	533	414	3	3	3	40	40	41
Anthem	129	143	116	170	255	252	2	3	3	40	39	39
Cigna H & L	214	180	168	470	511	489	3	3	3	40	40	40
ConnectiCare Benefits	150	143	n/a	207	201	n/a	3	3	n/a	39	39	n/a
ConnectiCare	150	144	141	217	211	213	3	3	3	39	39	33
CT General	214	180	168	470	511	489	3	3	3	40	40	40
Golden Rule	83	126	129	333	294	299	2	2	3	39	39	40
HPHC	60	30	n/a	305	81	n/a	4	2	n/a	40	56	n/a
Oxford Health	116	126	129	333	294	299	2	2	3	40	39	40
United	116	126	129	333	294	299	2	2	3	40	39	40
United Life	83	n/a	n/a	333	n/a	n/a	2	n/a	n/a	39	n/a	n/a

Note: ConnectiCare Benefits and HPHC did not report data in 2014 as they were not licensed to operate in CT. United Life did not report 2015 and 2014.

## Participating Providers by County

### Indemnity

	MIDDLESEX COUNTY											
	Primary Care Physicians			Physician Specialists			Hospitals			Pharmacies		
	2016	2015	2014	2016	2015	2014	2016	2015	2014	2016	2015	2014
Aetna Life	197	183	221	479	464	318	1	1	1	38	36	36
Anthem	224	221	172	262	268	260	1	1	1	38	36	35
Cigna H & L	272	251	257	427	447	137	1	1	1	36	36	33
ConnectiCare Benefits	210	210	n/a	190	183	n/a	1	1	n/a	38	36	n/a
ConnectiCare	211	210	208	206	198	458	1	1	1	38	36	32
CT General	272	251	257	427	447	186	1	1	1	36	36	33
Golden Rule	96	206	217	296	282	277	1	1	1	35	35	35
HPHC	75	54	n/a	415	146	n/a	1	1	n/a	36	57	n/a
Oxford Health	164	206	217	296	282	277	1	1	1	37	35	35
United	164	206	217	296	282	277	1	1	1	37	35	35
United Life	96	n/a	n/a	296	n/a	n/a	1	n/a	n/a	35	n/a	n/a

	NEW HAVEN COUNTY											
	Primary Care Physicians			Physician Specialists			Hospitals			Pharmacies		
	2016	2015	2014	2016	2015	2014	2016	2015	2014	2016	2015	2014
Aetna Life	1,230	1,190	1,142	2,905	2,823	2,689	7	7	7	181	181	179
Anthem	1,169	1,183	761	2,449	2,563	2,487	6	7	7	183	179	177
Cigna H & L	1,521	1,312	1,270	3,810	4,072	3,975	7	7	7	179	180	174
ConnectiCare Benefits	1,249	1,202	n/a	2,703	2,573	n/a	7	7	n/a	183	181	n/a
ConnectiCare	1,331	1,404	1,448	2,749	3,261	3,201	7	7	7	183	181	153
CT General	1,521	1,312	1,270	3,810	4,072	3,975	7	7	7	179	180	174
Golden Rule	744	955	971	2,396	2,275	2,286	6	6	6	171	179	175
HPHC	377	215	n/a	3,968	1,281	n/a	5	4	n/a	175	263	n/a
Oxford Health	776	955	971	2,396	2,275	2,286	6	6	7	177	179	176
United	776	955	971	2,396	2,275	2,286	6	6	6	177	179	176
United Life	744	n/a	n/a	2,396	n/a	n/a	6	n/a	n/a	171	n/a	n/a

Note: ConnectiCare Benefits and HPHC did not report data in 2014 as they were not licensed to operate in CT. United Life did not report 2015 and 2014.

# Participating Providers by County

## Indemnity

	NEW LONDON COUNTY											
	Primary Care Physicians			Physician Specialists			Hospitals			Pharmacies		
	2016	2015	2014	2016	2015	2014	2016	2015	2014	2016	2015	2014
Aetna Life	251	238	227	627	609	580	2	2	2	52	51	51
Anthem	284	287	204	411	453	452	2	2	2	54	52	49
Cigna H & L	269	239	226	674	777	731	2	2	2	58	58	49
ConnectiCare Benefits	303	288	n/a	584	565	n/a	2	2	n/a	54	52	n/a
ConnectiCare	307	290	255	606	579	548	2	2	2	54	52	40
CT General	269	239	226	674	777	731	2	2	2	58	58	49
Golden Rule	186	242	225	447	403	396	2	2	2	51	56	51
HPHC	112	27	n/a	683	97	n/a	2	1	n/a	49	78	n/a
Oxford Health	196	242	225	447	403	396	2	2	2	53	56	54
United	195	242	225	447	403	396	2	2	2	53	56	54
United Life	186	n/a	n/a	447	n/a	n/a	2	n/a	n/a	51	n/a	n/a

	TOLLAND COUNTY											
	Primary Care Physicians			Physician Specialists			Hospitals			Pharmacies		
	2016	2015	2014	2016	2015	2014	2016	2015	2014	2016	2015	2014
Aetna Life	146	145	151	340	292	271	2	2	2	24	25	23
Anthem	89	96	78	70	89	88	1	2	2	25	23	22
Cigna H & L	212	175	158	308	354	338	2	2	2	23	24	20
ConnectiCare Benefits	96	98	n/a	85	86	n/a	2	2	n/a	25	24	n/a
ConnectiCare	98	103	107	87	99	102	2	2	2	25	24	18
CT General	212	175	158	308	354	338	2	2	2	23	24	20
Golden Rule	54	124	122	189	155	152	2	2	2	25	25	22
HPHC	45	34	n/a	237	39	n/a	2	2	n/a	22	45	n/a
Oxford Health	100	124	122	189	155	152	2	2	2	25	25	22
United	100	124	122	189	155	152	2	2	2	25	25	22
United Life	54	n/a	n/a	189	n/a	n/a	2	n/a	n/a	25	n/a	n/a

Note: ConnectiCare Benefits and HPHC did not report data in 2014 as they were not licensed to operate in CT. United Life did not report 2015 and 2014.

## Participating Providers by County

### Indemnity

	WINDHAM COUNTY											
	Primary Care Physicians			Physician Specialists			Hospitals			Pharmacies		
	2016	2015	2014	2016	2015	2014	2016	2015	2014	2016	2015	2014
Aetna Life	134	136	138	250	229	229	2	2	2	22	23	24
Anthem	116	122	88	124	135	145	2	2	2	22	23	23
Cigna H & L	156	142	143	297	296	286	2	2	2	22	23	23
ConnectiCare Benefits	122	120	n/a	145	153	n/a	2	2	n/a	22	23	n/a
ConnectiCare	127	125	127	152	125	150	2	2	2	22	23	18
CT General	156	142	143	297	296	286	2	2	2	22	23	23
Golden Rule	73	123	126	171	169	183	2	2	2	20	22	24
HPHC	55	39	n/a	160	35	n/a	2	2	n/a	24	47	n/a
Oxford Health	103	123	126	171	169	183	2	2	2	22	22	24
United	103	123	126	171	169	183	2	2	2	22	22	24
United Life	73	n/a	n/a	171	n/a	n/a	2	n/a	n/a	20	n/a	n/a

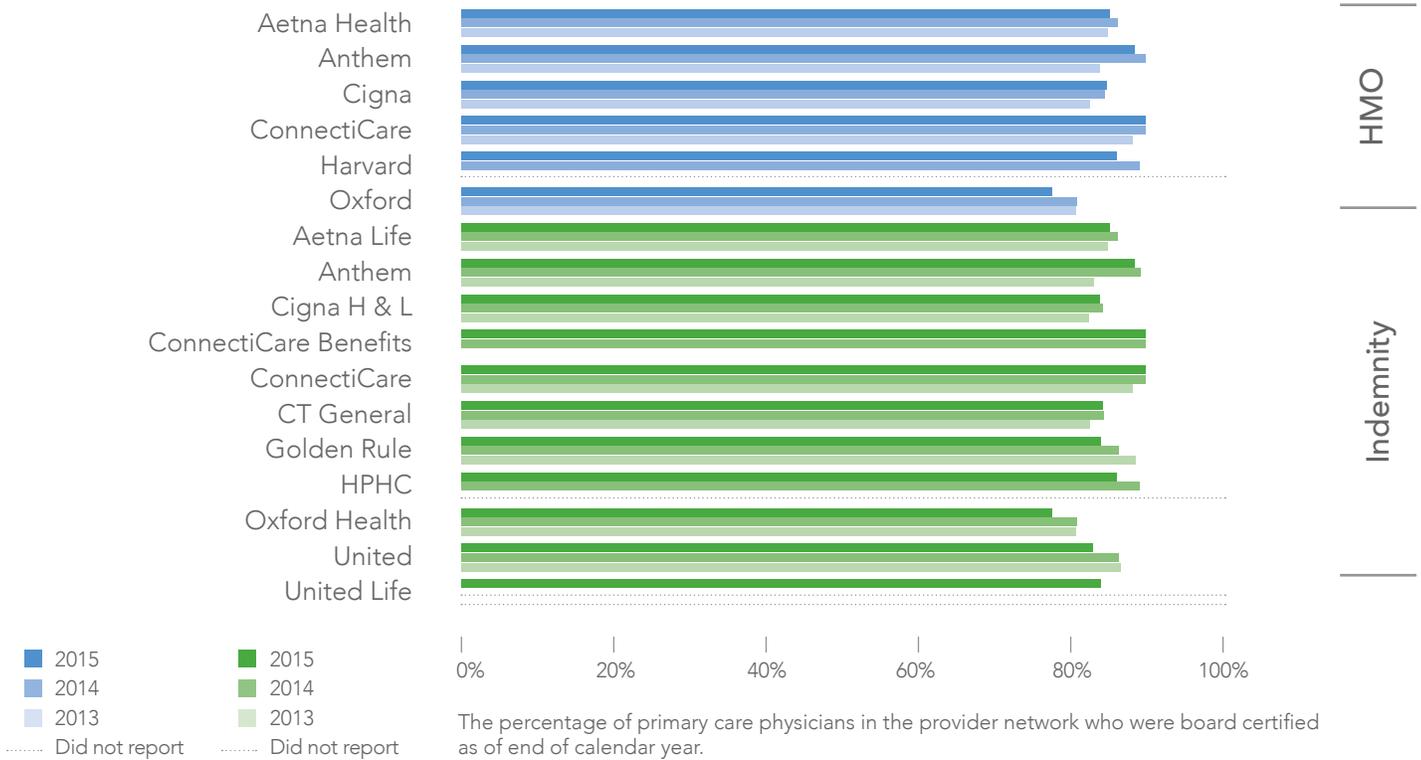
	TOTAL, ALL COUNTIES											
	Primary Care Physicians			Physician Specialists			Hospitals			Pharmacies		
	2016	2015	2014	2016	2015	2014	2016	2015	2014	2016	2015	2014
Aetna Life	4,296	4,150	4,069	9,915	9,508	8,824	30	30	30	701	706	705
Anthem	4,128	4,204	3,057	7,355	8,068	7,853	27	30	30	706	694	686
Cigna H & L	5,605	4,664	4,631	13,080	13,232	12,748	30	30	30	708	712	678
ConnectiCare Benefits	5,094	4,840	n/a	10,005	9,430	n/a	30	30	n/a	706	699	n/a
ConnectiCare	5,278	5,073	4,947	10,351	9,867	9,556	30	30	30	706	699	600
CT General	5,605	4,664	4,631	13,080	13,232	12,748	30	30	30	708	712	678
Golden Rule	3,112	3,659	3,707	7,723	7,275	7,331	28	28	29	669	697	689
HPHC	1,879	1,050	n/a	12,545	3,524	n/a	29	24	n/a	687	1,078	n/a
Oxford Health	2,930	3,659	3,707	7,723	7,275	7,331	28	28	30	691	697	695
United	2,930	3,659	3,707	7,723	7,275	7,331	28	28	29	691	697	695
United Life	3,112	n/a	n/a	7,723	n/a	n/a	28	n/a	n/a	669	n/a	n/a

Note: ConnectiCare Benefits and HPHC did not report data in 2014 as they were not licensed to operate in CT. United Life did not report 2015 and 2014.

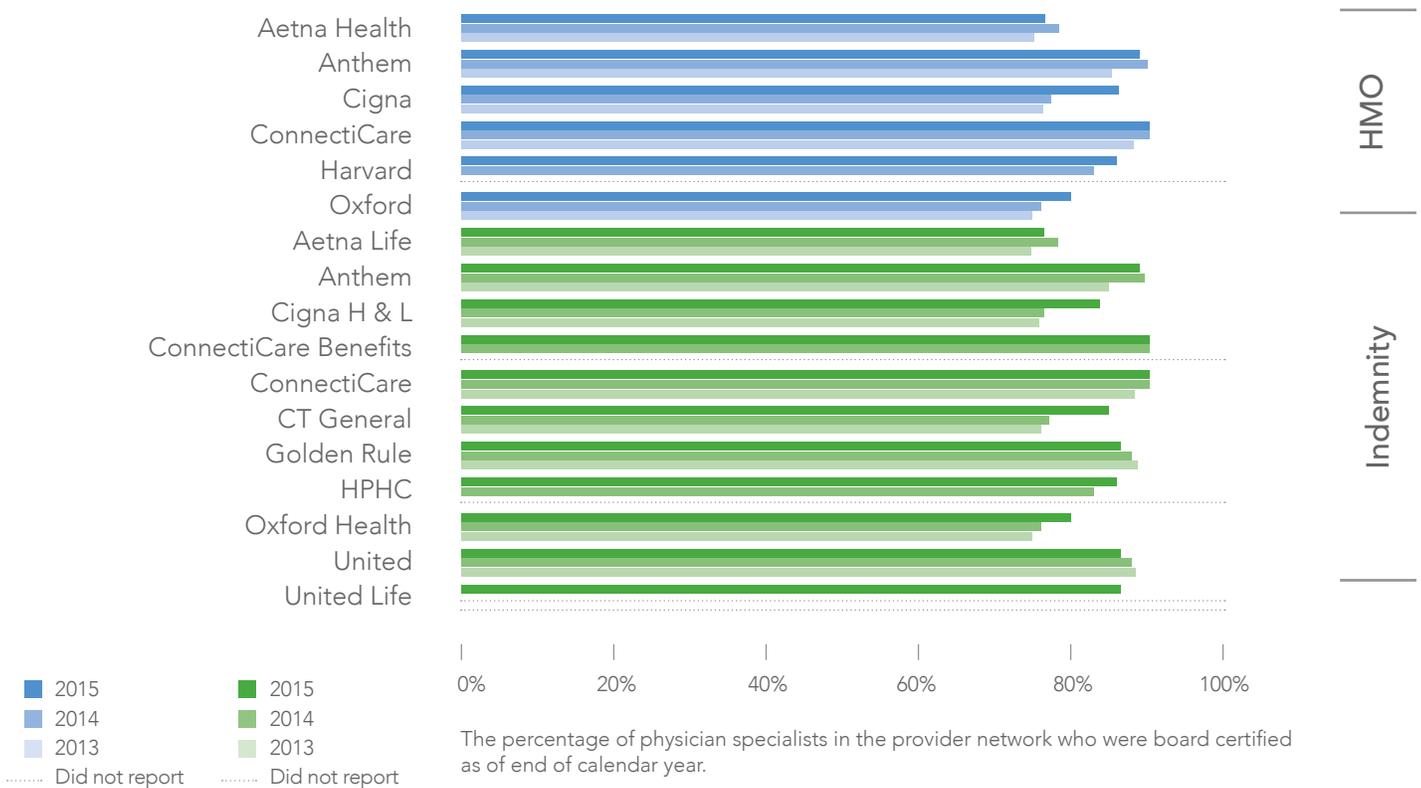
# Care Measures

2015 DATA

## Percentage of Primary Care Physicians Who Are Board Certified



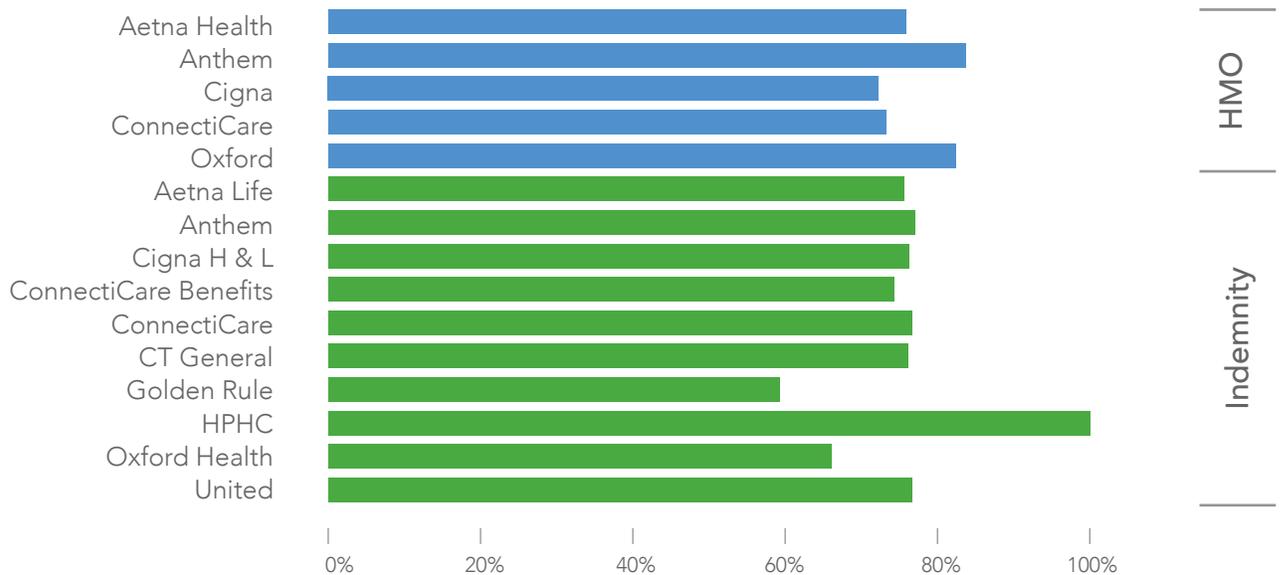
## Percentage of Physician Specialists Who Are Board Certified



# Care Measures

2015 DATA

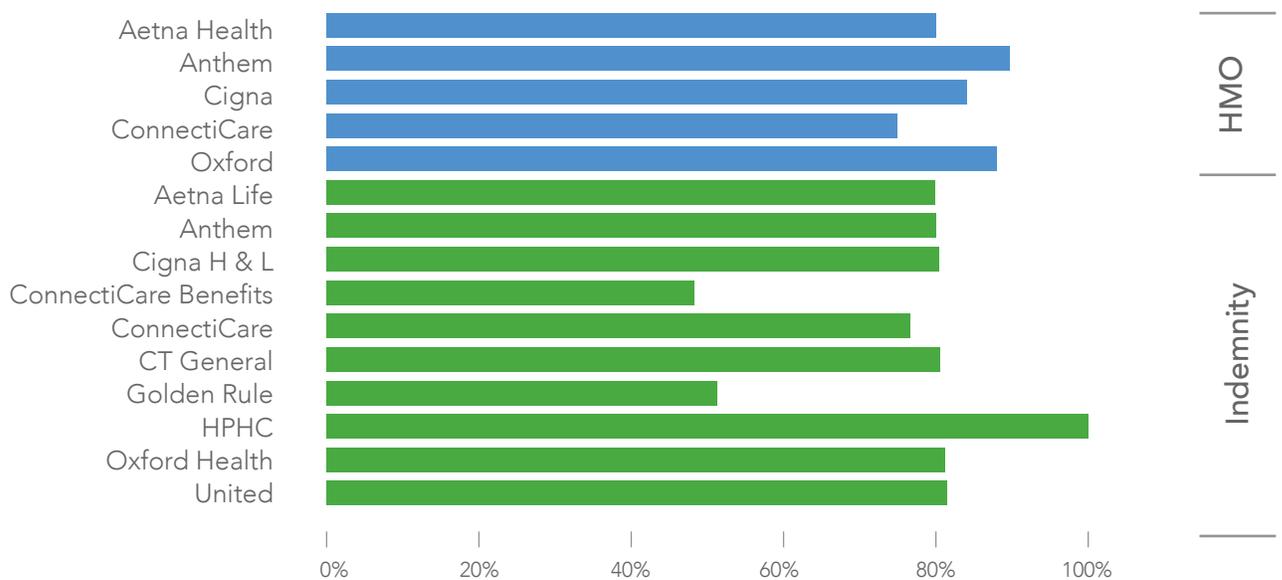
## Breast Cancer Screening



The percentage of enrolled women who: (a) were age 52 through 74 years as of December 31, 2015; and (b) were continuously enrolled from October 1, 2013 through December 31, 2015; and (c) had 1 or more mammogram between October 1, 2013 and December 31, 2015.

Note: Harvard (HMO) and United Life (Indemnity) were excluded from chart as proportion served was 0%.

## Cervical Cancer Screening



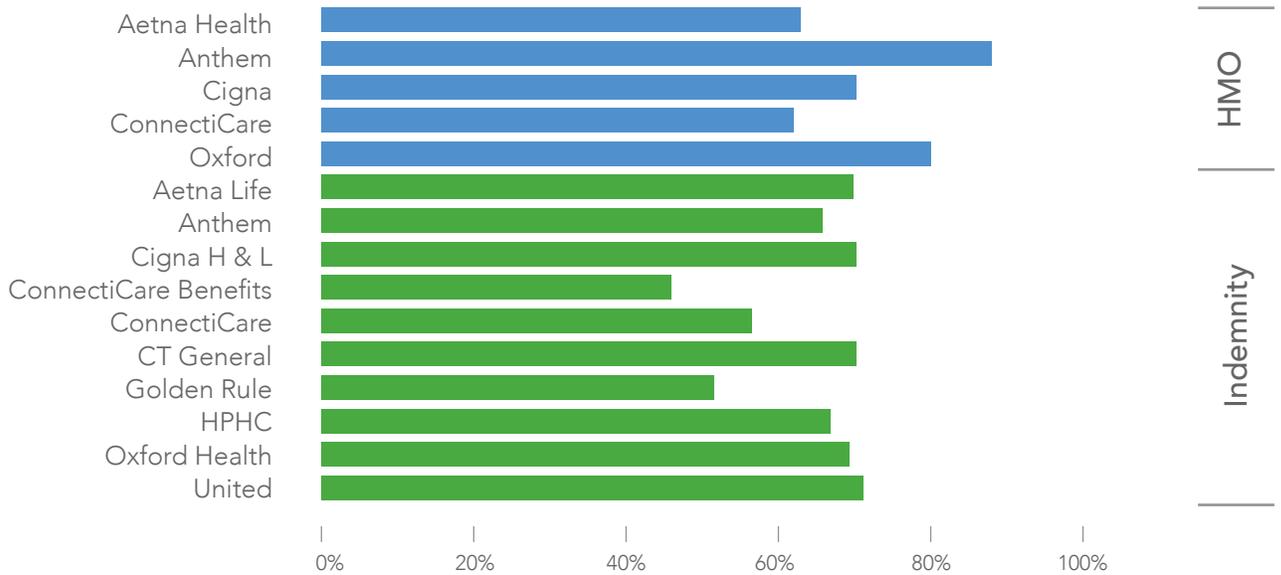
The percentage of enrolled women who: (a) were age 24 through 64 years as of December 31, 2015; and (b) were continuously enrolled during 2013, 2014, or 2015; and (c) were either: a woman age 21-64, who had a cervical cytology performed in 2015 or the 2 years prior; or a woman age 30-64, who had a cervical cytology/human papillomavirus (HPV) co-testing performed in 2015 or the 4 years prior.

Note: Harvard (HMO) and United Life (Indemnity) were excluded from chart as proportion served was 0%.

# Care Measures

2015 DATA

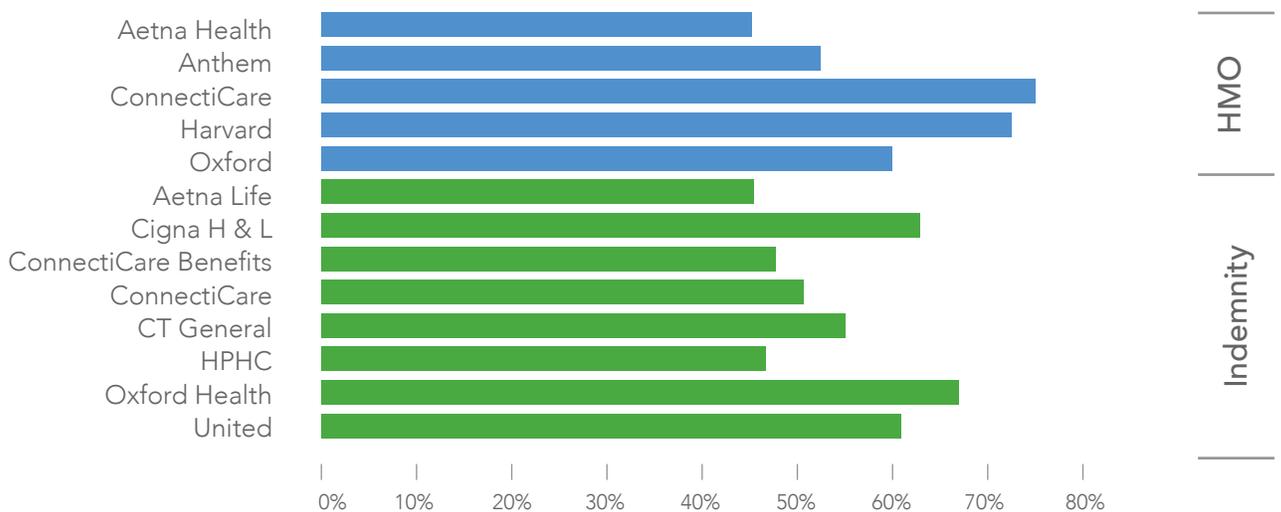
## Colorectal Cancer Screening



The percentage of members 51-75 years as of December 31, 2015, who were continuously enrolled during 2014 and 2015 and had one or more of the following screenings: (a) fecal occult blood test (FOBT) during 2015; (b) flexible sigmoidoscopy during 2015 or the 4 years prior to 2015; or (c) colonoscopy during 2015 or the 9 years prior to 2015.

Note: Harvard (HMO) and United Life (Indemnity) were excluded from chart as proportion served was 0%.

## Controlling High Blood Pressure



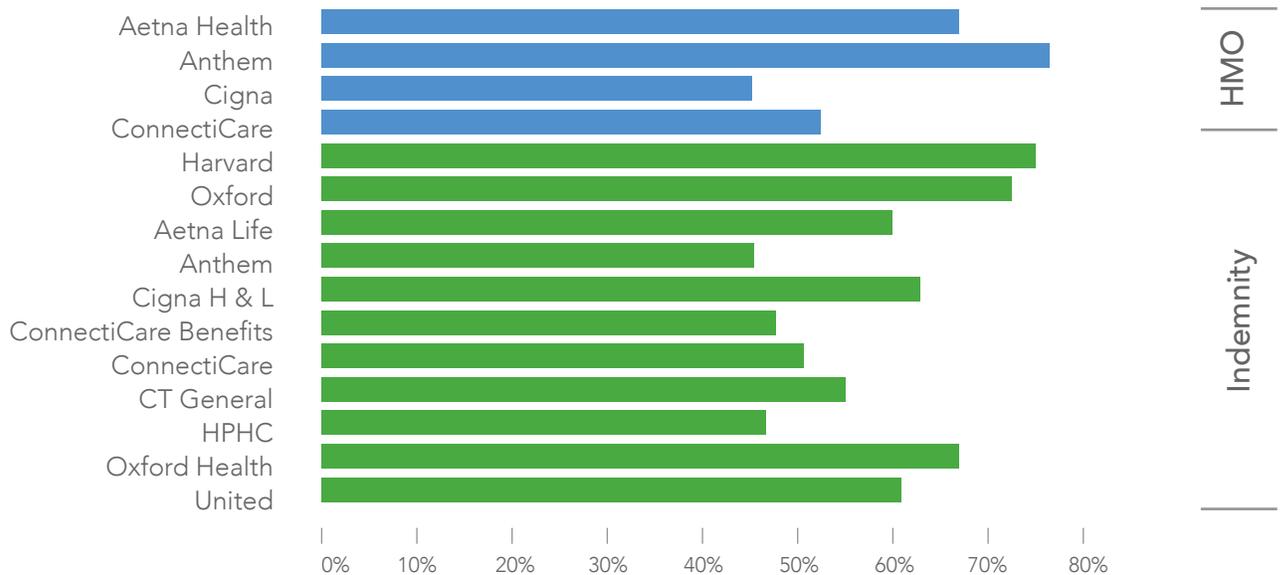
The percentage of members age 18 through 85 years as of December 31, 2015, who were diagnosed with hypertension (HTN) and whose blood pressure was adequately controlled during 2015, based on the following age criteria: (a) members 18-59 years of age whose BP was 140/90 mm Hg; (b) members 60-85 years of age with a diagnosis of diabetes whose BP was <140/90 mm Hg; or (c) members 60-85 years of age without a diagnosis of diabetes whose BP was <150/90 mm HG. The single rate reported is the sum of all 3 groups.

Note: Cigna (HMO), Anthem (Indemnity), Golden Rule (Indemnity), and United Life (Indemnity) were excluded from chart as proportion served was 0%.

# Care Measures

2015 DATA

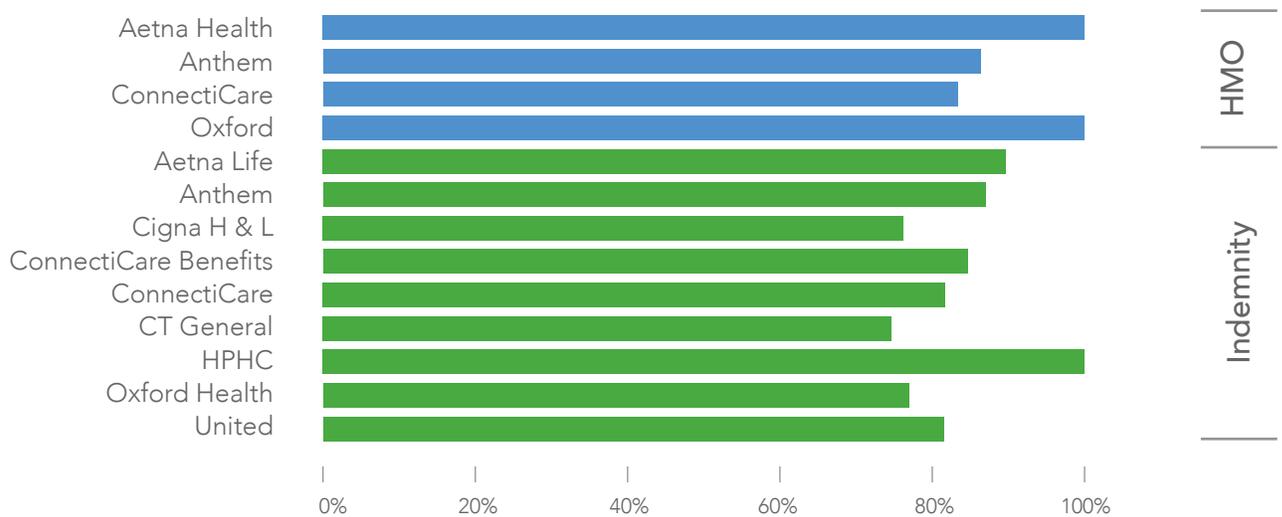
## Eye Exams for People with Diabetes



The percentage of all member with diabetes (Types II and I) who: (a) were enrolled on December 31, 2015; and (b) were 18 through 75 years of age during 2015; and (c) were continuously enrolled during 2015; and (d) had either a retinal or dilated eye examination in 2015 or a negative retinal or dilated eye examination in 2014.

Note: Golden Rule (Indemnity) and United Life (Indemnity) were excluded from chart as proportion served was 0%.

## Beta Blocker Treatment After a Heart Attack



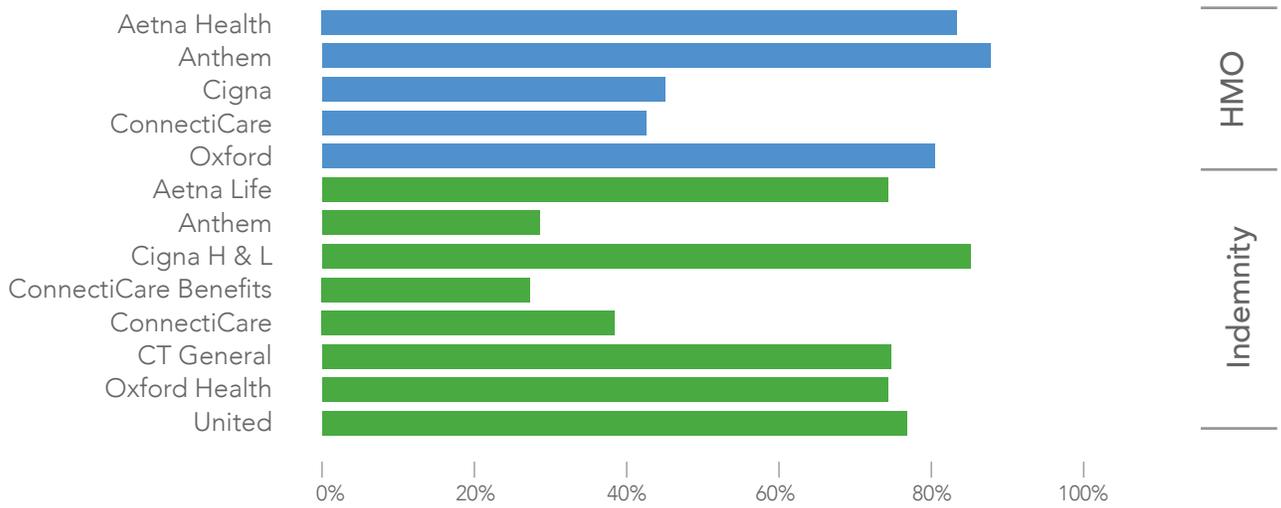
The percentage of all members who: (a) were age 18 years and older as of December 31, 2015; and (b) were hospitalized and discharged between July 1, 2014, and June 30, 2015; and (c) were continuously enrolled from the discharge date through 179 days after discharge; and (d) had a diagnosis of Acute Myocardial Infarction (AMI); and (e) received persistent beta blocker treatment for 6 months after discharge.

Note: Cigna (HMO), Harvard (HMO), Golden Rule (Indemnity), and United Life (Indemnity) were excluded from chart as proportion served was 0%.

# Care Measures

2015 DATA

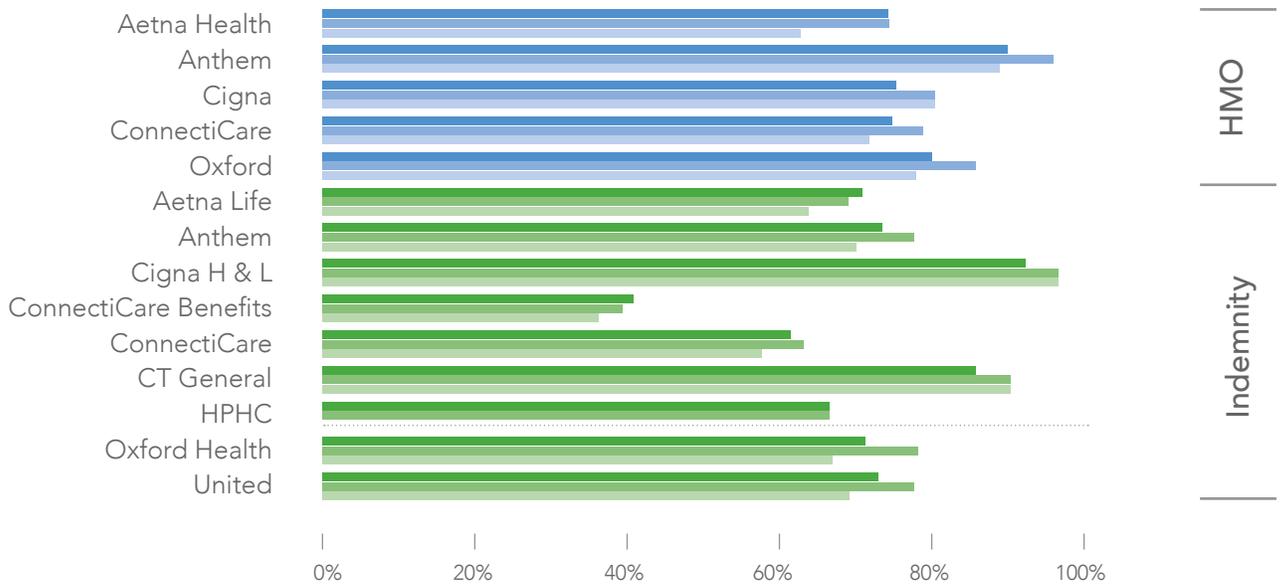
## Childhood Immunizations



The percentage of enrolled children who: (a) turned two years old during 2015; and (b) were continuously enrolled for the 12 months preceding their second birthday; and (c) have received recommended immunizations, including polio, measles, mumps, rubella, influenza type b, hepatitis b, diphtheria, tetanus, pertussis, chicken pox, and pneumococcal.

Note: Harvard (HMO), Golden Rule (Indemnity), HPHC (Indemnity), and United Life (Indemnity) were excluded from chart as proportion served was 0%.

## Immunizations for Adolescents



The percentage of members who turned 13 years of age during 2015, were continuously enrolled for the 12 months prior to their 13th birthday, and had the following vaccinations by their 13th birthday: (A) one dose of meningococcal vaccine and one tetanus; (B) diphtheria toxoids and acellular pertussis vaccine (Tdap) or one tetanus; or (C) diphtheria toxoids vaccine (Td).

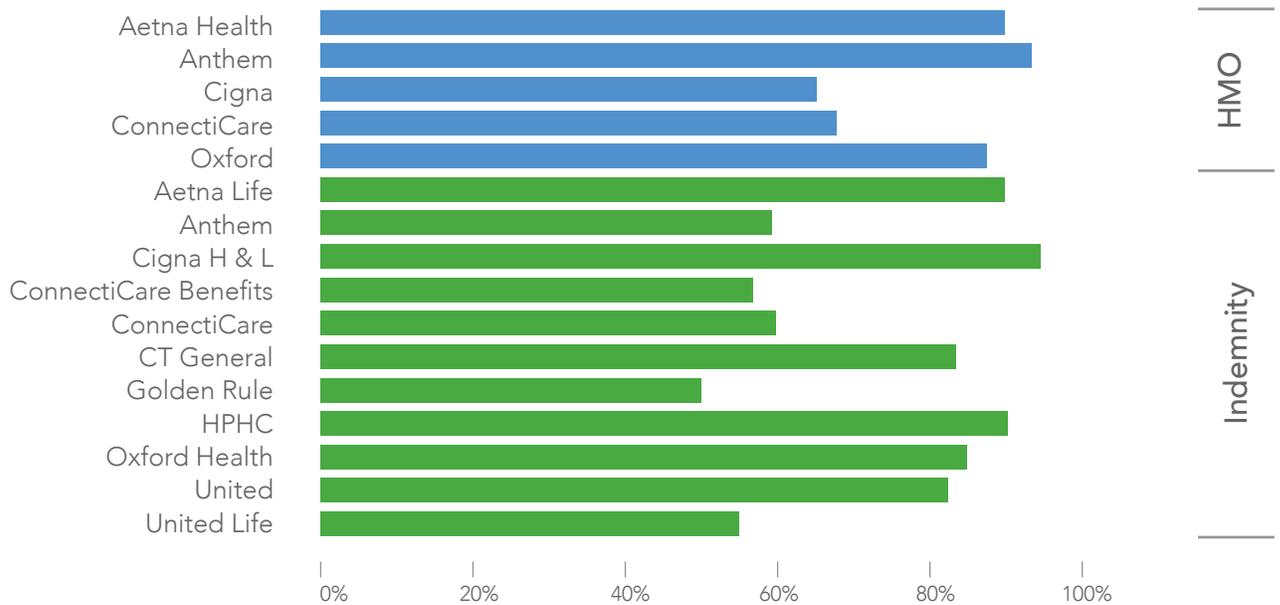
Note: Harvard (HMO), Golden Rule (Indemnity), and United Life (Indemnity) were excluded from chart as proportion served was 0%.

■ A      ■ A  
■ B      ■ B  
■ C      ■ C  
⋯ Did not report      ⋯ Did not report

# Care Measures

2015 DATA

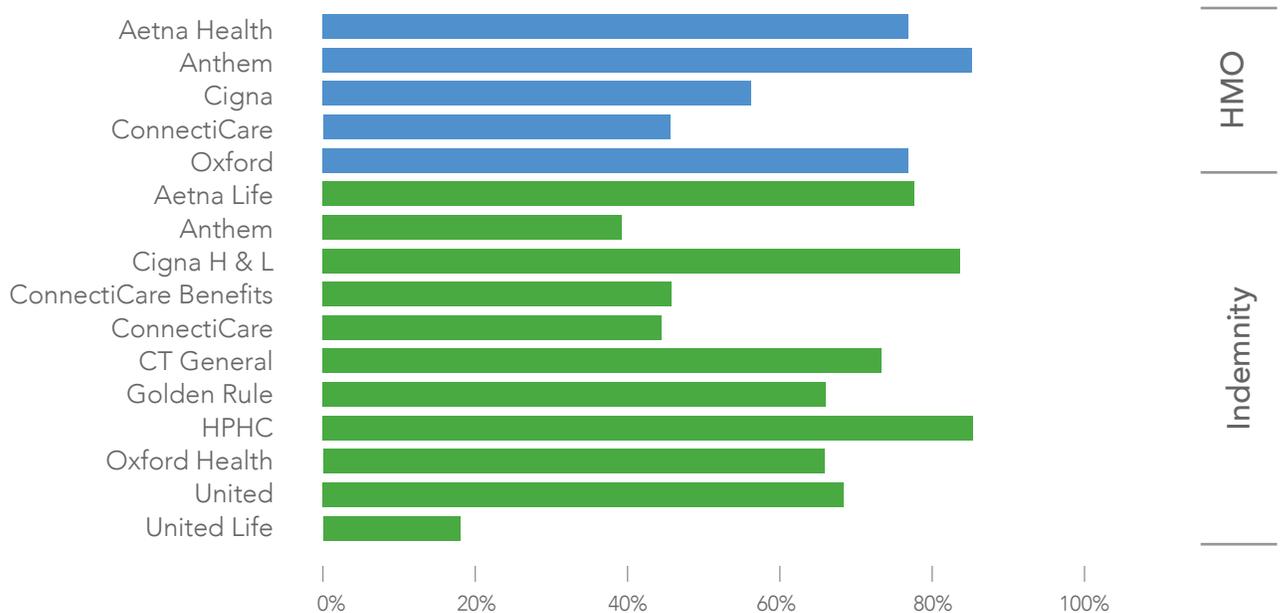
## Prenatal Care in the First Trimester



The percentage of enrolled women who: (a) delivered a live birth between November 6, 2014, and November 5, 2015; and (b) were continuously enrolled for 43 days prior to delivery through 56 days after delivery; and (c) had at least one prenatal care visit in the first trimester or within 42 days of enrollment in the MCO.

Note: Harvard (HMO) was excluded from chart as proportion served was 0%.

## Postpartum Care Following Delivery



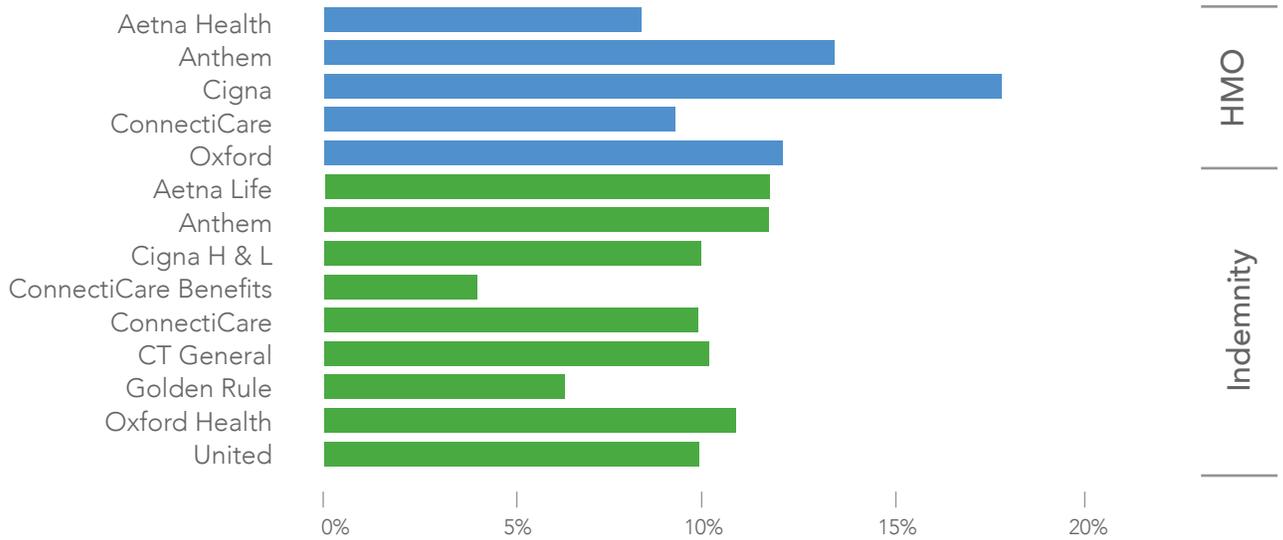
The percentage of enrolled women who: (a) delivered a live birth between November 6, 2014, and November 5, 2015; and (b) were continuously enrolled for 43 days prior to delivery through 56 days after delivery; and (c) had a postpartum visit on or between 21 and 56 days after delivery.

Note: Harvard (HMO) was excluded from chart as proportion served was 0%.

# Care Measures

2015 DATA

## Human Papillomavirus Vaccine for Female Adolescents



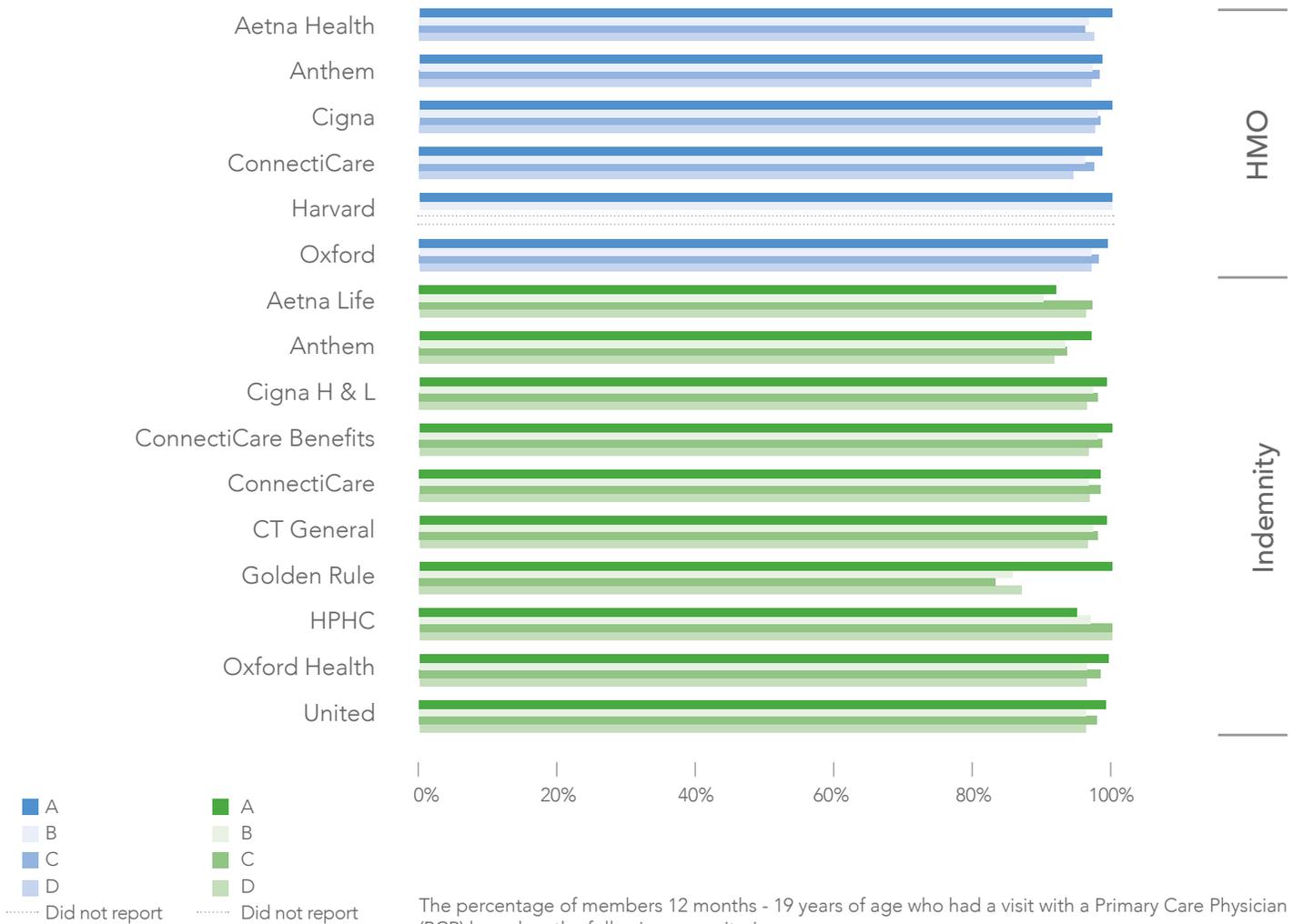
The percentage of female members who: (a) turned 13 years of age during 2015; and (b) were continuously enrolled for the 12 months prior to their 13th birthday; and (c) had three doses of the human papillomavirus (HPV) vaccine by their 13th birthday.

Note: Harvard (HMO), HPHC (Indemnity), and United Life (Indemnity) were excluded from chart as proportion served was 0%.

# Care Measures

2015 DATA

## Child and Adolescent Access to Care



The percentage of members 12 months - 19 years of age who had a visit with a Primary Care Physician (PCP) based on the following age criteria:

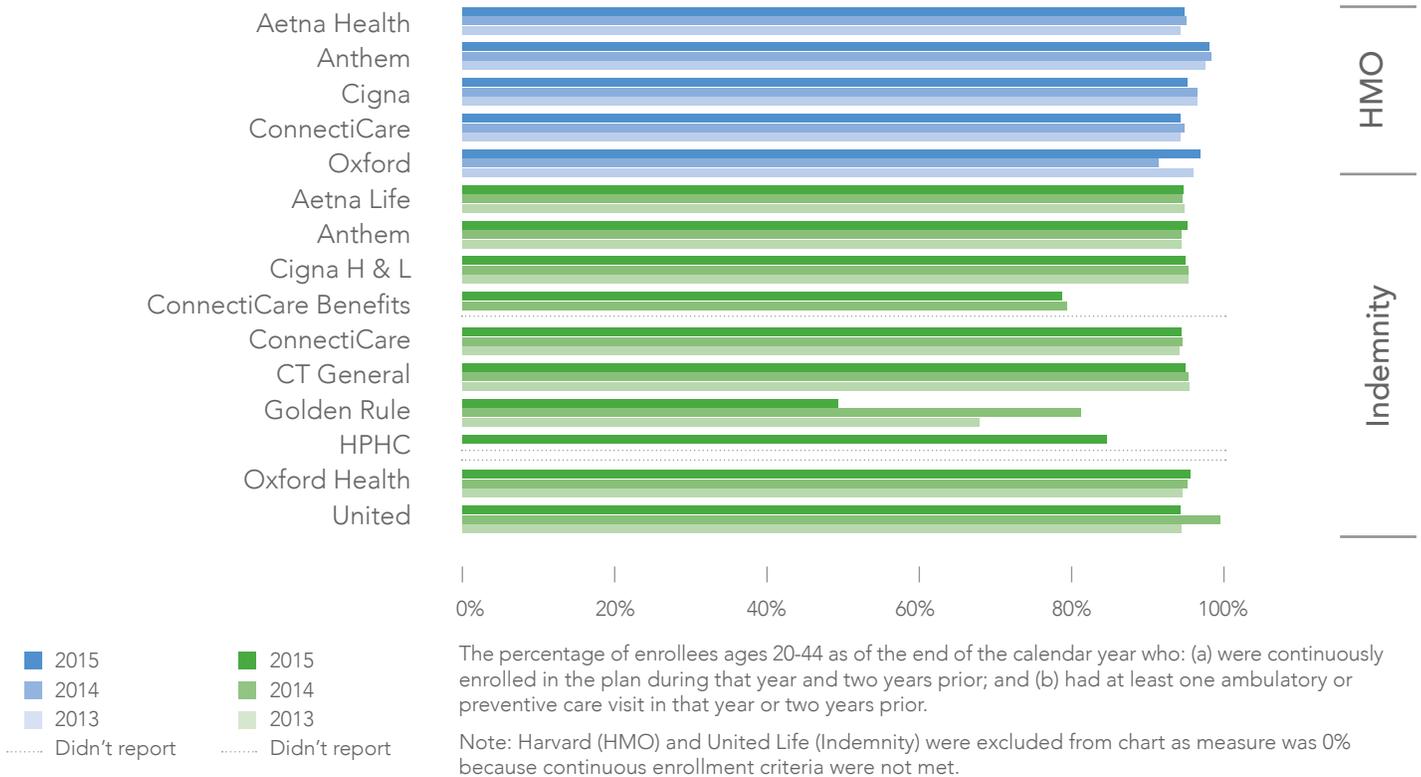
- (A) 12-24 months of age as of December 31, 2015, who were continuously enrolled in the plan during 2015 and had a PCP visit during 2015;
- (B) 25 months - 6 years of age as of December 31, 2015, who were continuously enrolled in the plan during 2015 and had a PCP visit during 2015;
- (C) 7 - 11 years of age as of December 31, 2015, who were continuously enrolled in 2014 and 2015 and had a PCP visit during 2014 or 2015; or
- (D) 12 - 19 years of age as of December 31, 2015, who were continuously enrolled in 2014 and 2015 and had a PCP visit during 2014 or 2015.

Note: Harvard (HMO) reported 0% for (C) and (D) based on the criteria. United Life (Indemnity) were excluded from chart as proportion served was 0%.

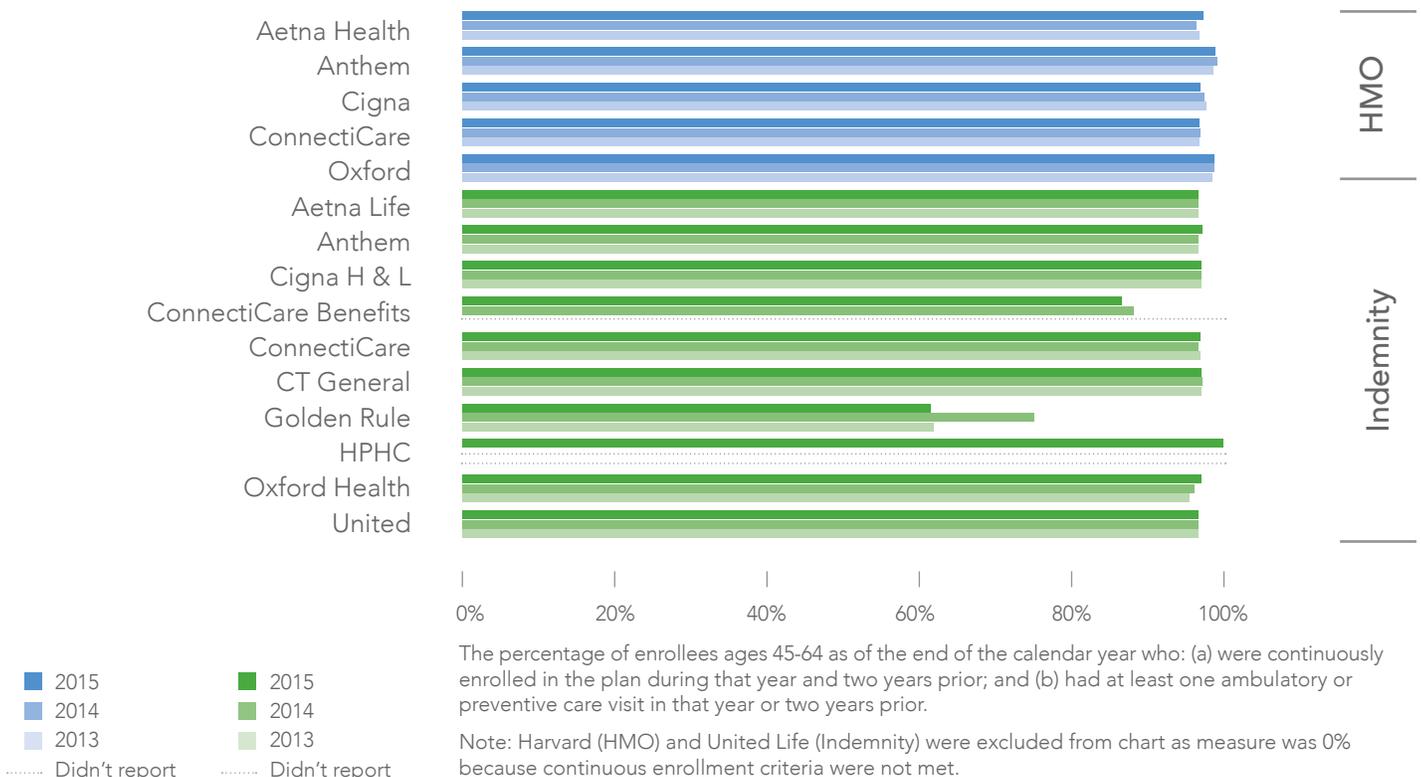
# Care Measures

2015 DATA

## Adult Access to Care, Ages 20-44



## Adult Access to Care, Ages 45-64



## Help and Additional Information

The following state agencies, federal agencies, or nonprofit organizations also provide information concerning specific health insurance issues.

Agency	Type of Inquiry	Telephone	Website
<b>Connecticut Insurance Department Consumer Affairs</b>	Insurance policies, companies, producers and external appeals	(800) 203-3447 (860) 297-3900	<a href="http://www.ct.gov/cid">www.ct.gov/cid</a>
<b>Office of the Healthcare Advocate</b>	Managed care problems or questions	(866) HMO-4446	<a href="http://www.ct.gov/oha">www.ct.gov/oha</a>
<b>CT Department of Public Health</b>	Providers and medical facilities	(800) 842-0038	<a href="http://www.ct.gov/dph">www.ct.gov/dph</a>
<b>U.S. Department of Labor</b>	Employer self-funded or self-insured health plans	(617) 565-9600	<a href="http://www.dol.gov">www.dol.gov</a>
<b>National Committee for Quality Assurance (NCQA)</b>	Care measures	(800) 839-6487 (888) 275-7585	<a href="http://www.ncqa.org">www.ncqa.org</a>
<b>CT Health Channel</b>	A single online source for CT public and private health insurance information	(877) 263-1997	<a href="http://www.cthealthchannel.org">www.cthealthchannel.org</a>
<b>CT Department of Social Services</b>	HUSKY Healthcare	(800) 842-1508	<a href="http://www.ct.gov/dss">www.ct.gov/dss</a>
<b>U.S. Department of Health &amp; Human Services</b>	Information on healthcare reform and insurance options		<a href="http://www.healthcare.gov">www.healthcare.gov</a>
<b>Access Health CT (CT Insurance Exchange)</b>	Online source for health insurance	855-805-HEALTH	<a href="http://www.accesshealthct.com">www.accesshealthct.com</a>

### Companies Not Included in this Report

Listed here are additional licensed companies that have managed care plans in Connecticut but were not included in this guide. These companies are not currently issuing new business. The same information found in this guide is available directly from the companies or at the offices of CID.

#### Name

#### Address

#### Celtic Insurance Company

77 West Wacker Drive  
Chicago, IL 60601

#### HealthyCT Inc.

35 Thorpe Avenue  
Wallingford, CT 06492

#### John Alden Life Insurance Company

501 West Michigan Street  
Milwaukee, WI 53203

#### Time Insurance Company

501 West Michigan Street  
Milwaukee, WI 53203

#### Trustmark Insurance Company

400 Field Drive  
Lake Forest, IL 60045

# Worksheet

**Use the worksheet to compare options.**

In addition to this report card, you will need provider directories, premium rates, and descriptions of benefits for each plan you are considering.

		Option 1	Option 2	Option 3	Option 4
<b>Company or Plan Name</b>					
SERVICE PROVIDERS	Includes my current physician(s)				
	Includes the hospital I prefer				
	Referral needed to see a specialist				
	Out of network coverage included				
COVERAGE INCLUDED	Family planning				
	Prescription drug				
	Hospice care				
	Physical therapy				
	Medical equipment				
	Routine eye exam				
	Routine hearing exam				
	Mental health benefits				
	My other health needs				
COSTS	Premium or employee contribution				
	Deductible amount				
	Coinsurance				
	Lifetime maximum benefit that plan pays				
COPAYMENT AMOUNTS	Physician office visit				
	Specialist office visit				
	Emergency room				
	Urgent care facility				
	Hospital inpatient				
	Outpatient surgical facility				
	Prescription drugs				



800-203-3447

PO Box 816  
Hartford, CT 06142-0816

[www.ct.gov/cid](http://www.ct.gov/cid)