



STATE OF CONNECTICUT

INSURANCE DEPARTMENT

JUNE 29, 2016

TO: ALL INSURANCE COMPANIES, FRATERNAL BENEFIT SOCIETIES, HOSPITAL SERVICE CORPORATIONS, MEDICAL SERVICE CORPORATIONS AND HEALTH CARE CENTERS THAT DELIVER OR ISSUE INDIVIDUAL AND GROUP HEALTH INSURANCE POLICIES IN CONNECTICUT

RE: Benchmark Database

Public Act 15-146 requires that if emergency services are rendered to an insured by an out-of-network health care provider, such health care provider may bill the health carrier directly. The health carrier shall reimburse such health care provider the greatest of the following amounts: (i) The amount the insured's health care plan would pay for such services if rendered by an in-network health care provider; (ii) the usual, customary and reasonable rate for such services, or (iii) the amount Medicare would reimburse for such services. "Usual, customary and reasonable rate" means the eightieth percentile of all charges for the particular health care service performed by a health care provider in the same or similar specialty and provided in the same geographical area, as reported by FAIR Health, Inc. The contact information for FAIR Health, Inc. is:

FAIR Health, Inc.
530 Fifth Avenue, 18th Floor
New York, NY 10036

855-301- 3247

www.fairhealth.org

QUESTIONS

Please contact the Insurance Department Life and Health Division at cid.lh@ct.gov with any questions about this notice.

Katharine L. Wade
Insurance Commissioner