

Health (2024)

Ticular (2027)	
INTERROGATORIES	
	Response (Yes/No) Comments
01 In-Exchange - Does the company have Individual Health insurance coverage other than transitional, grandfathered, multi-state, catastrophic, or student data to report?	
02 In-Exchange - Does the company have Small Group Health insurance coverage other than transitional, grandfathered, or multi-state policies data to report?	==
03 In-Exchange - Does the company have Catastrophic data to report?	
04 In-Exchange - Does the company have Multi-State (Individual) data to report?	
05 In-Exchange - Does the company have Multi-State (Small Group) data to report?	
06 In-Exchange - Number of small groups in-force at the end of the reporting period.	
07 In-Exchange - Does the company have an additional voluntary level of review for grievances?	
08 In-Exchange Comments.	
09 Out-of-Exchange - Does the company have Individual Health insurance coverage other than transitional, grandfathered, multi-state, catastrophic, or student data to report?	-
10 Out-of-Exchange - Does the company have Small Group Health insurance coverage other than transitional, grandfathered, or multi-state policies data to report?	
11 Out-of-Exchange - Does the company have Grandfathered or Transitional plan data to report?	-
12 Out-of-Exchange - Does the company have Catastrophic data to report?	-
13 Out-of-Exchange - Does the company have Large Group comprehensive major medical and managed care (Minimum Essential Coverage policies) data to report?	.
14 Out-of-Exchange - Does the company have Student Coverage data to report?	
15 Out-of-Exchange - Number of small groups in-force at the end of the reporting period.	
16 Out-of-Exchange - Number of large groups in-force at the end of the reporting period.	
17 Out-of-Exchange - Does the company have an additional voluntary level of review for grievances?	-
18 Out-of-Exchange Comments.	

IN-EXCHANGE

Policy Administratio	r
----------------------	---

Policy Administration																
	Individual Health insurance	Small	Group	Healt	h insurai	nce										
	coverage other than transitional,	coverag	ge othe	er than	transition	onal,										
	grandfathered, multi-state,	grand	lfather	ed, or	multi-sta	ate										
	catastrophic or student		р	olicies	6	C	Catastrophic	1	Multi-State(Individua)		Multi-Stat	te (Small Gr	oup)	
	Bronze Silver Gold Platinum Tota	I Bronze S						Bronze	Silver		atinum Total	Bronze	Silver	Gold	Platinum	Total
19 Earned premiums for Reporting Year.																
20 Number of new policies issued during the period.																
21 Number of policies renewed during the period.																
22 Member months for policies issued during the period.																
23 Member months for policies renewed during the period.																
24 Number of policy terminations and cancellations initiated by the policyholder.																
25 Number of policy terminations and cancellations due to non-payment of premium.																
26 Number of insured lives impacted on terminations and cancellations initiated by the																
policyholder																
Number of insured lives impacted on policies terminated and cancelled due to non-																
payment.																
28 Number of rescissions.																
29 Number of insured lives impacted by rescissions.																

Prior Authorizations (Prospective Utilization Review Requests) Excluding Pharmacy Individual Health insurance

	Ind	lividua	il Health	ınsuran	ce	Small	Grou	p Healt	n insur	ance									
	covera	age ot	her thar	n transitio	onal,	coverag	ge oth	ner than	n transit	tional,									
	gra	indfatl	nered, n	nulti-stat	e,	grand	lfathe	red, or	multi-s	tate									
	С	atastr	ophic or	student				policies	5	Catastrophic		Multi-State(Individua	al)		Multi-State	(Small G	oup)	
	Bronze	Silver	Gold F	Platinum	Total B	ronze S	Silver	Gold P	Platinum	n Total	Bronze	Silver	Gold	Platinum Total	Bronze	Silver	Gold	Platinum	Total
30 Number of prior authorizations requested.																			
31 Number of prior authorizations approved.																			
32 Number of prior authorizations denied.																			
Number of prior authorizations requested for mental health benefits, behavioral health																			
benefits, and substance use disorders.																			
Number of prior authorizations for mental health benefits, behavioral health benefits,																			
and substance use disorders denied.																			
35 Number of prior authorizations for mental health benefits, behavioral health benefits,																			
and substance use disorders approved																			

		Health (2024)						
Prior Authorizations (Prospective Utilization Review Requests) Pharmacy Only		(2023)						
		grandfathered, or multi-state policies al Bronze Silver Gold Platinum Tota	Catastrophic I	Bronze	Multi-State(Individual) Silver Gold Platinur	n Total Bronze	Multi-State (Small Silver Gold	
36 Number of prior authorizations requested.								
37 Number of prior authorizations approved. 38 Number of prior authorizations denied.								
so Hamber of prior addionizations defined.								
Claims Administration (Excluding Pharmacy)	Individual Health insurance	Small Group Health insurance						
	coverage other than transitional, grandfathered, multi-state, catastrophic or student		Catastrophic I	Bronze	Multi-State(Individual) Silver Gold Platinur	n Total Bronze	Multi-State (Small Silver Gold	
39 Number of claims received.								
40 Number of claims submitted by network providers.								
41 Number of claims submitted by out-of-network providers. 42 Number of claim denials for in-network claims. 43 In-network claims denied within 0-30 days. 44 In-network Claims denied within 31-60 days. 45 In-network Claims denied within 61-90 days.								
46 In-network Claims denied beyond 90 days.								
47 Number of in-network denied, rejected or returned - Claims Submission Coding Error(s)) .							
48 Number of in-network denied, rejected or returned - Prior Authorization Needed.								
Number of in-network denied, rejected or returned - Non-Covered Benefit or Benefit Limitation.								
50 Number of in-network denied, rejected or returned - Not Medically Necessary (Excluding Behavioral Health Benefits).								
Number of in-network denied, rejected or returned - Not Medically Necessary (Behavioral Health Benefits Only).								
52 Number of claim denials for out-of-network claims. 53 Out-of-network claims denied within 0-30 days.								
54 Out-of-network Claims denied within 31-60 days.								
55 Out-of-network Claims denied within 61-90 days.								
56. Out-of-network Claims denied beyond 90 days								
57 Number of out-of-network denied, rejected or returned - Claims Submission Coding Error(s).								
58 Number of out-of-network denied, rejected or returned - Prior Authorization Needed.								
59 Number of out-of-network denied, rejected or returned - Non-Covered Benefit or Benefit Limitation.								
Number of out-of-network denied, rejected or returned - Not Medically Necessary (Excluding Behavioral Health Benefits).								
Number of out-of-network denied, rejected or returned - Not Medically Necessary (Behavioral Health Benefits Only).								
62 Number of paid claims for in-network services. 63 In-network claims paid within 0-30 days.								
64 In-network claims paid within 31-60 days.								
65 In-network claims paid within 61-90 days.								
66 In-network claims paid beyond 90 days.								
67 Number of paid claims for out-of-network services.								
68 Out-of-network claims paid within 0-30 days.								
69 Out-of-network claims paid within 31-60 days.								
70 Out-of-network claims paid within 61-90 days.								
71 Out-of-network claims paid beyond 90 days.								
72 Claims Paid. 73 Insured/beneficiary co-payment responsibility.								
74 Insured coinsurance responsibility.								
75 Insured deductible responsibility.								

			Healt	h (2024	1)										
laims Administration (Pharmacy Only)			House	(=0=	• /										
	Individual Hea coverage other the grandfathered catastrophic Bronze Silver Gold	nan transitional, , multi-state, or student	coverage grandfa	other than thered, or policies		Catastrophic	Bronze	Multi-State Silver		al) Platinum Total	Bronze	Multi-State Silver	e (Small Gro Gold		To
6 Number of claims received.															
7 Number of claim denials for in-network claims.															
Number of claim denials for out-of-network claims.															
Number of paid claims for in-network services.															
Number of paid claims for out-of-network services. Claims Paid.															
! Insured/beneficiary co-payment responsibility.															
Insured coinsurance responsibility.															
4 Insured deductible responsibility.															
nsumer Requested Internal Reviews(Grievances - Including Pharmacy)															
Number of customer requests for internal reviews of grievances involving adverse determinations (1)o not include additional voluntary levels of reviews.)	Individual Hea coverage other th grandfathered catastrophic Bronze Silver Gold	nan transitional, , multi-state, or student	coverage grandfa	other than thered, or policies		Catastrophic	Bronze	Multi-State Silver		al) Platinum Total	Bronze	Multi-State Silver	e (Small Gro Gold	oup) Platinum	Т
Number of adverse determinations upheld upon request for internal review (Do not include additional voluntary levels of reviews.). Number of adverse determinations overturned upon request for internal review (Do not include additional voluntary levels of reviews.).	i														
Number of customer requests for internal reviews of grievances not involving adverse															
determinations.															
determinations. nsumer Requested External Reviews (Including Pharmacy)	Individual Hea coverage other th grandfathered catastrophic	nan transitional, , multi-state, or student	coverage grandfa	other than thered, or policies		Catastrophic		Multi-State					e (Small Gro		_
nsumer Requested External Reviews (Including Pharmacy) Number of customer requested appeals on final adverse determinations to an external	coverage other the grandfathered	nan transitional, , multi-state, or student	coverage grandfa	other than thered, or policies	transitional, multi-state		Bronze	Multi-State Silver 		al) Platinum Total 	Bronze	Multi-State Silver 	e (Small Gro Gold 		
nsumer Requested External Reviews (Including Pharmacy) Number of customer requested appeals on final adverse determinations to an external review organization.	coverage other the grandfathered catastrophic	nan transitional, , multi-state, or student	coverage grandfa	other than thered, or policies ver Gold Pl	transitional, multi-state		Bronze 				Bronze 	Silver			1
Number of customer requested appeals on final adverse determinations to an external review organization. Number of final adverse determinations upheld upon request for external review.	coverage other the grandfathered catastrophic Bronze Silver Gold	nan transitional, , multi-state, or student I Platinum Tota	coverage grandfa I Bronze Silv	other than thered, or policies ver Gold Pl 	transitional, multi-state			Silver	Gold I	Platinum Total		Silver 	Gold 	Platinum 	1
Number of customer requested appeals on final adverse determinations to an external review organization. Number of final adverse determinations upheld upon request for external review. Number of final adverse determinations overturned upon request for external review.	coverage other the grandfathered catastrophic Bronze Silver Gold	nan transitional, , multi-state, or student I Platinum Tota 	coverage grandfa I Bronze Silv 	other than thered, or policies ver Gold Pl 	transitional, multi-state latinum Total 			Silver 	Gold I	Platinum Total	 	Silver 	Gold 	Platinum 	
nsumer Requested External Reviews (Including Pharmacy) Number of customer requested appeals on final adverse determinations to an external review organization. Number of final adverse determinations upheld upon request for external review. Number of final adverse determinations overturned upon request for external review. IT-OF-EXCHANGE licy Administration	coverage other the grandfathered catastrophic Bronze Silver Gold	nan transitional, , multi-state, or student I Platinum Tota lth insurance nan transitional, , multi-state, or student	coverage grandfa I Bronze Silv Small G coverage grandfa	other than thered, or i policies ver Gold Pl roup Health other than thered, or i policies	transitional, multi-state latinum Total n insurance transitional, multi-state	Grandfa	 thered/Trar	Silver	Gold I	Platinum Total	 All Large major med	Silver 	Gold ehensive aged care	Platinum 	
Number of customer requested appeals on final adverse determinations to an external review organization. Number of final adverse determinations upheld upon request for external review. Number of final adverse determinations overturned upon request for external review. T-OF-EXCHANGE icy Administration Earned premiums for Reporting Year.	coverage other the grandfathered catastrophic Bronze Silver Gold	nan transitional, , multi-state, or student I Platinum Tota lth insurance nan transitional, , multi-state, or student	coverage grandfa I Bronze Silv Small G coverage grandfa	other than thered, or i policies ver Gold Pl roup Health other than thered, or i policies	transitional, multi-state latinum Total n insurance transitional, multi-state	Grandfa	 thered/Trar	Silver	Gold I	Platinum Total 	 All Large major med	Silver Group compre	Gold ehensive aged care	Platinum For Stu	ıde
Number of customer requested appeals on final adverse determinations to an external review organization. Number of final adverse determinations upheld upon request for external review. Number of final adverse determinations overturned upon request for external review. T-OF-EXCHANGE icy Administration Earned premiums for Reporting Year. Number of new policies issued during the period.	coverage other the grandfathered catastrophic Bronze Silver Gold	nan transitional, , multi-state, or student I Platinum Tota lth insurance nan transitional, , multi-state, or student	coverage grandfa I Bronze Silv Small G coverage grandfa	other than thered, or i policies ver Gold Pl roup Health other than thered, or i policies	transitional, multi-state latinum Total n insurance transitional, multi-state	Grandfa	 thered/Trar	Silver	Gold I	Platinum Total 	 All Large major med	Silver Group compre	Gold ehensive aged care	Platinum For Stu	ıde
Number of customer requested appeals on final adverse determinations to an external review organization. Number of final adverse determinations upheld upon request for external review. Number of final adverse determinations overturned upon request for external review. T-OF-EXCHANGE icy Administration Earned premiums for Reporting Year. Number of new policies issued during the period. Number of policies renewed during the period.	coverage other the grandfathered catastrophic Bronze Silver Gold	nan transitional, , multi-state, or student I Platinum Tota lth insurance nan transitional, , multi-state, or student	coverage grandfa I Bronze Silv Small G coverage grandfa	other than thered, or i policies ver Gold Pl roup Health other than thered, or i policies	transitional, multi-state latinum Total n insurance transitional, multi-state	Grandfa	 thered/Trar	Silver	Gold I	Platinum Total 	 All Large major med	Silver Group compre	Gold ehensive aged care	Platinum For Stu	ıde
Number of customer requested appeals on final adverse determinations to an external review organization. Number of final adverse determinations upheld upon request for external review. Number of final adverse determinations overturned upon request for external review. T-OF-EXCHANGE (cy Administration) Earned premiums for Reporting Year. Number of new policies issued during the period. Number of policies renewed during the period. Member months for policies issued during the period.	coverage other the grandfathered catastrophic Bronze Silver Gold	nan transitional, , multi-state, or student I Platinum Tota lth insurance nan transitional, , multi-state, or student	coverage grandfa I Bronze Silv Small G coverage grandfa	other than thered, or i policies ver Gold Pl roup Health other than thered, or i policies	transitional, multi-state latinum Total n insurance transitional, multi-state	Grandfa	 thered/Trar	Silver	Gold I	Platinum Total 	 All Large major med	Silver Group compre	Gold ehensive aged care	Platinum For Stu	ıde
Number of customer requested appeals on final adverse determinations to an external review organization. Number of final adverse determinations upheld upon request for external review. Number of final adverse determinations overturned upon request for external review. Number of final adverse determinations overturned upon request for external review. T-OF-EXCHANGE icy Administration Earned premiums for Reporting Year. Number of new policies issued during the period. Number of policies renewed during the period. Member months for policies issued during the period. Member months for policies renewed during the period.	coverage other the grandfathered catastrophic Bronze Silver Gold	nan transitional, , multi-state, or student I Platinum Tota lth insurance nan transitional, , multi-state, or student	coverage grandfa I Bronze Silv Small G coverage grandfa	other than thered, or i policies ver Gold Pl roup Health other than thered, or i policies	transitional, multi-state latinum Total n insurance transitional, multi-state	Grandfa	 thered/Trar	Silver	Gold I	Platinum Total 	 All Large major med	Silver Group compre	Gold ehensive aged care	Platinum For Stu	ıde
Number of customer requested appeals on final adverse determinations to an external review organization. Number of final adverse determinations upheld upon request for external review. Number of final adverse determinations overturned upon request for external review. Number of final adverse determinations overturned upon request for external review. T-OF-EXCHANGE icy Administration Earned premiums for Reporting Year. Number of new policies issued during the period. Number of policies renewed during the period. Member months for policies renewed during the period. Number of policy terminations and cancellations initiated by the policyholder. Number of policy terminations and cancellations initiated by the policyholder.	coverage other the grandfathered catastrophic Bronze Silver Gold	nan transitional, , multi-state, or student I Platinum Tota lth insurance nan transitional, , multi-state, or student	coverage grandfa I Bronze Silv Small G coverage grandfa	other than thered, or i policies ver Gold Pl roup Health other than thered, or i policies	transitional, multi-state latinum Total n insurance transitional, multi-state	Grandfa	 thered/Trar	Silver	Gold I	Platinum Total 	 All Large major med	Silver Group compre	Gold ehensive aged care	Platinum For Stu	ıde
Number of customer requested appeals on final adverse determinations to an external review organization. Number of final adverse determinations upheld upon request for external review. Number of final adverse determinations overturned upon request for external review. Number of final adverse determinations overturned upon request for external review. TO-FEXCHANGE licy Administration E Earned premiums for Reporting Year. Number of policies issued during the period. Mumber of policies issued during the period. Member months for policies issued during the period. Member months for policies issued during the period. Member months for policies issued during the period. Number of policy terminations and cancellations initiated by the policyholder. Number of policy terminations and cancellations due to non-payment of premium. Number of insured lives impacted on terminations and cancellations initiated by the	coverage other the grandfathered catastrophic Bronze Silver Gold	nan transitional, , multi-state, or student I Platinum Tota lth insurance nan transitional, , multi-state, or student	coverage grandfa I Bronze Silv Small G coverage grandfa	other than thered, or i policies ver Gold Pl roup Health other than thered, or i policies	transitional, multi-state latinum Total n insurance transitional, multi-state	Grandfa	thered/Tran Small Grou	Silver	Gold I	Platinum Total 	 All Large major med	Silver Group compre	Gold ehensive aged care	Platinum For Stu	ıde
Number of customer requested appeals on final adverse determinations to an external review organization. Number of final adverse determinations upheld upon request for external review. Number of final adverse determinations overturned upon request for external review. Number of final adverse determinations overturned upon request for external review. IT-OF-EXCHANGE licy Administration Earned premiums for Reporting Year. Number of new policies issued during the period. Member months for policies renewed during the period. Member months for policies issued during the period. Member of policy terminations and cancellations initiated by the policyholder. Number of insured lives impacted on terminations and cancellations initiated by the policyholder. Number of insured lives impacted on policies terminated and cancelled due to non-	coverage other the grandfathered catastrophic Bronze Silver Gold	nan transitional, , multi-state, or student I Platinum Tota lth insurance nan transitional, , multi-state, or student	coverage grandfa I Bronze Silv Small G coverage grandfa	other than thered, or i policies ver Gold Pl roup Health other than thered, or i policies	transitional, multi-state latinum Total n insurance transitional, multi-state	Grandfa	thered/Tran Small Grou	Silver	Gold I	Platinum Total 	 All Large major med	Silver Group compre	Gold ehensive aged care	Platinum For Stu	ıde
Number of customer requested appeals on final adverse determinations to an external review organization. Number of final adverse determinations upheld upon request for external review. Number of final adverse determinations overturned upon request for external review. Number of final adverse determinations overturned upon request for external review. IT-OF-EXCHANGE licy Administration Earned premiums for Reporting Year. Number of new policies issued during the period. Member months for policies renewed during the period. Member months for policies renewed during the period. Member of policy terminations and cancellations initiated by the policyholder. Number of insured lives impacted on terminations and cancellations initiated by the policyholder insured lives impacted on terminations and cancellations initiated by the policyholder.	coverage other the grandfathered catastrophic Bronze Silver Gold	nan transitional, , multi-state, or student I Platinum Tota lth insurance nan transitional, , multi-state, or student	coverage grandfa I Bronze Silv Small G coverage grandfa	other than thered, or i policies ver Gold Pl roup Health other than thered, or i policies	transitional, multi-state latinum Total n insurance transitional, multi-state	Grandfa	thered/Tran Small Grou	Silver	Gold I	Platinum Total 	 All Large major med	Silver Group compre	Gold ehensive aged care	Platinum For Stu	ıde

		Health (2024)				
Prior Authorizations (Prospective UtilizationReview Requests) Excluding Pharmac						
	Individual Health insurance coverage other than transitional, grandfathered, multi-state, catastrophic or student Bronze Silver Gold Platinum Total	Small Group Health insurance coverage other than transitional, grandfathered, or multi-state policies Bronze Silver Gold Platinum Total Larg	Grandfathered/Transitional Plans ge Group Small Group Individual Total	Catastrophic	All Large Group comprehensive major medical and managed care (Minimum Essential Coverage) policies	For Studen Coverage
03 Number of prior authorizations requested.						
04 Number of prior authorizations approved.						
.05 Number of prior authorizations denied.						
Number of prior authorizations requested for mental health benefits, behavioral health						
benefits, and substance use disorders.						
Number of prior authorizations for mental health benefits, behavioral health benefits,						
and substance use disorders denied. Number of prior authorizations for mental health benefits, behavioral health benefits,						
and substance use disorders approved.						
Prior Authorizations (Prospective Utilization Review Requests) Pharmacy Only						
	Individual Health insurance	Small Group Health insurance			All Large Group comprehensive	
	coverage other than transitional,	coverage other than transitional,			major medical and managed care	
	grandfathered, multi-state,	grandfathered, or multi-state			(Minimum Essential Coverage)	For Studer
	catastrophic or student	policies	Grandfathered/Transitional Plans	Catastrophic	policies	Coverage
	Bronze Silver Gold Platinum Total	Bronze Silver Gold Platinum Total Larg	ge Group Small Group Individual Total			
.09 Number of prior authorizations requested10 Number of prior authorizations approved.						
.11 Number of prior authorizations denied.						
22 Number of prior dudionizations defined						
Claims Administration (Excluding Pharmacy)						
	Individual Health insurance	Small Group Health insurance			All Large Group comprehensive	
	coverage other than transitional, grandfathered, multi-state, catastrophic or student	coverage other than transitional, grandfathered, or multi-state policies	Grandfathered/Transitional Plans	Catastrophic	major medical and managed care (Minimum Essential Coverage) policies	For Studer Coverage
		Bronze Silver Gold Platinum Total Larg		catastropriic	policies	coverage
112 Number of claims received.						
113 Number of claims submitted by network providers.						
14 Number of claims submitted for by out-of-network providers.						
115 Number of claim denials for in-network claims.						
116 In-network claims denied within 0-30 days. 117 In-network Claims denied within 31-60 days.						
.18 In-network Claims denied within 61-90 days.						
19 In-network Claims denied beyond 90 days.						
.20 Number of in-network denied, rejected or returned - Claims Submission Coding						
121 Number of in-network denied, rejected or returned - Prior Authorization Needed.						
Number of in-network denied, rejected or returned - Non-Covered Benefit or Benefit Limitation.						
Number of in-network denied, rejected or returned - Not Medically Necessary (Excluding Behavioral Health Benefits).						
Number of in-network denied, rejected or returned - Not Medically Necessary						
(benavioral realin Benefits Univ).						
(Behavioral Health Benefits Only). 25 Number of claim denials for out-of-network claims.						
.25 Number of claim denials for out-of-network claims. .26 Out-of-network claims denied within 0-30 days.						
125 Number of claim denials for out-of-network claims. 126 Out-of-network claims denied within 0-30 days. 127 Out-of-network Claims denied within 31-60 days.						
125 Number of claim denials for out-of-network claims. 126 Out-of-network claims denied within 0-30 days. 127 Out-of-network Claims denied within 31-60 days. 128 Out-of-network Claims denied within 61-90 days.						
125 Number of claim denials for out-of-network claims. 126 Out-of-network claims denied within 0-30 days. 127 Out-of-network Claims denied within 31-60 days. 128 Out-of-network Claims denied within 61-90 days. 129 Out-of-network Claims denied beyond 90 days. 129 Out-of-network denied, rejected or returned - Claims Submission Coding						
125 Number of claim denials for out-of-network claims. 126 Out-of-network claims denied within 0-30 days. 127 Out-of-network Claims denied within 31-60 days. 128 Out-of-network Claims denied within 61-90 days. 129 Out-of-network Claims denied beyond 90 days. 129 Out-of-network Claims denied beyond 90 days.						

		Health (2024)				
Claims Administration (Excluding Pharmacy) Continued						
	Individual Health insurance coverage other than transitional, grandfathered, multi-state, catastrophic or student Bronze Silver Gold Platinum Total	Small Group Health insurance coverage other than transitional, grandfathered, or multi-state policies Bronze Silver Gold Platinum Tota	Grandfathered/Transitional Plans Large Group Small Group Individual Total	Catastrophic	All Large Group comprehensive major medical and managed care (Minimum Essential Coverage) policies	For Student Coverage
133 Number of out-of-network denied, rejected or returned - Not Medically Necessary (Excluding Behavioral Health Benefits).						
134 Number of out-of-network denied, rejected or returned - Not Medically Necessary (Behavioral Health Benefits Only).						
135 Number of paid claims for in-network services. 136 In-network claims paid within 0-30 days.						
137 In-network claims paid within 31-60 days. 138 In-network claims paid within 61-90 days.						
139 In-network claims paid beyond 90 days.						
140 Number of paid claims for out-of-network services.141 Out-of-network claims paid within 0-30 days.						
142 Out-of-network claims paid within 31-60 days.143 Out-of-network claims paid within 61-90 days.						
144 Out-of-network claims paid beyond 90 days.						
145 Claims Paid.146 Insured/beneficiary co-payment responsibility.						
146 Insured beneficiary co-payment responsibility.						
148 Insured deductible responsibility.						
Claims Administration (Pharmacy Only)	Individual Health insurance	Small Group Health insurance			All Large Group comprehensive	
	coverage other than transitional,	coverage other than transitional,			major medical and managed care	
	grandfathered, multi-state,	grandfathered, or multi-state			(Minimum Essential Coverage)	For Student
	catastrophic or student Bronze Silver Gold Platinum Total	policies Bronze Silver Gold Platinum Tota	Grandfathered/Transitional Plans I Large Group Small Group Individual Total	Catastrophic	policies	Coverage
149 Number of claims received.						
150 Number of claim denials for in-network claims. 151 Number of claim denials for out-of-network claims.						
152 Number of paid claims for in-network services.						
153 Number of paid claims for out-of-network services. 154 Claims Paid.						
155 Insured/beneficiary co-payment responsibility.						
156 Insured coinsurance responsibility. 157 Insured deductible responsibility.						
137 Insured deductible responsibility.		Health (2024)				
Consumer Requested Internal Reviews (Grievances - Including Pharmacy)						
	Individual Health insurance coverage other than transitional, grandfathered, multi-state,	Small Group Health insurance coverage other than transitional, grandfathered, or multi-state	Confello of Tone Visual New	Calantanakia	All Large Group comprehensive major medical and managed care (Minimum Essential Coverage)	For Student
	catastrophic or student Bronze Silver Gold Platinum Total	policies Bronze Silver Gold Platinum Tota	Grandfathered/Transitional Plans I Large Group Small Group Individual Total	Catastrophic	policies	Coverage
158 Number of customer requests for internal reviews of grievances involving adverse determinations (Do not include additional voluntary levels of reviews.). 150 Number of adverse determinations upheld upon request for internal review (Do not						
include additional voluntary levels of reviews.).	•					
include additional voluntary levels of reviews.).						
determinations.						
Consumer Requested External Reviews (Including Pharmacy)						
	Individual Health insurance coverage other than transitional, grandfathered, multi-state,	Small Group Health insurance coverage other than transitional, grandfathered, or multi-state			All Large Group comprehensive major medical and managed care (Minimum Essential Coverage)	For Student
	catastrophic or student	policies	Grandfathered/Transitional Plans Large Group Small Group Individual Total	Catastrophic	policies	Coverage
162 Number of customer requested appeals on final adverse determinations to an external review organization.						
163 Number of final adverse determinations upheld upon request for external review.						
164 Number of final adverse determinations overturned upon request for external review.						
Health Attestation		-	irst Name Middle Name Las	t Name	Suffix Title	Comments
165 First Attestor Information		r	ii se ivanie iviidale ivanie Las	LINGILIE	Juna Title	Comments
166 Second Attestor Information 167 Overall Comments for the Filing Period						
107 Overall Comments for the Filling Period						