

**Department of Managed Health Care/Department of Insurance
Medical Loss Ratio Reporting Form
Dental Coverage**

1. MLR Reporting Year	2016
2. Enter DMHC Health Plan ID. Insurers may leave this field blank	
3. Legal Name	Connecticut General Life Insurance
4. DBA	
5. Federal Tax Exempt Status? Please enter Yes or No	No

Cell Key:

Blank cells require input from Health plan or Health insurer

Version 4.22.15

Revised Version 5.26.15

Revised Version 4.15.16 corrected dates for Cycle Year
(CY)2015-2016 on TABs Parts 1, 2 and 4.

Revised Version 5.10.17 12/31 and 3/31 Columns years to be
auto populated on TABs Parts 1 and 2.

Health Plan ID
 0
 Legal Name
 Connecticut General Life Insurance Company
 dBA
 MLR Reporting Year
 2016

Federal Tax Exempt
 No

Part 1

Part 1	Health Insurance Coverage DHMO Products						Health Insurance Coverage DPPD & Indemnity Products					
	Individual		Small Group		Large Group		Individual		Small Group		Large Group	
	Total as of 12/31/2016	Total as of 3/31/2017	Total as of 12/31/2016	Total as of 3/31/2017	Total as of 12/31/2016	Total as of 3/31/2017	Total as of 12/31/2016	Total as of 3/31/2017	Total as of 12/31/2016	Total as of 3/31/2017	Total as of 12/31/2016	Total as of 3/31/2017
1	2	3	4	5	6	7	8	9	10	11	12	
NOTE: REFER TO MLR INSTRUCTIONS FOR IMPORTANT INFORMATION ABOUT COMPLETING EACH COLUMN AND ROW.												
1. Premium												
1.1 Total direct premium earned	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,089,846	\$ 1,095,739	\$ -	\$ -	\$ 801,211	\$ 805,162
2. Claims												
2.1 Total incurred claims (MLR Form Part 2, Line 2.11)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 631,553	\$ 625,172	\$ -	\$ -	\$ 686,520	\$ 694,170
3. Federal and State Taxes and Licenses or Regulatory Fees												
3.1 Federal taxes and assessments incurred by the reporting health plan or health insurer during the MLR reporting year												
3.1 a Federal income taxes deductible from premium in MLR calculations							\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
3.1 b Other Federal Taxes (other than income tax) and assessments deductible from premium							\$ 40,916	\$ 40,916	\$ -	\$ -	\$ 26,030	\$ 26,030
3.2 State insurance, premium and other taxes incurred by the reporting health plan or health insurer during the MLR reporting year (deductible from premium in MLR calculation)												
3.2 a State income, excise, business, and other taxes							\$ 59,206	\$ 59,206	\$ -	\$ -	\$ 38,961	\$ 38,961
3.2 b State premium taxes							\$ 7,221	\$ 7,221	\$ -	\$ -	\$ 5,306	\$ 5,306
3.2 c Community benefit expenditures							\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
3.3 Regulatory authority licenses and fees							\$ (54)	\$ (54)	\$ -	\$ -	\$ (34)	\$ (34)
3.4 Total Federal and State Taxes and fees to be excluded from premium	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 100,288	\$ 100,288	\$ -	\$ -	\$ 69,963	\$ 69,963
4. Non-Claims Costs												
4.1 Direct sales salaries and benefits							\$ 1,439	\$ 1,439	\$ -	\$ -	\$ 915	\$ 915
4.2 Agents and brokers fees and commissions							\$ 60,304	\$ 60,304	\$ -	\$ -	\$ 7,944	\$ 7,944
4.3 Other taxes												
4.3 a Taxes and assessments (exclude amounts reported in Section 3 or Line 10)							\$ (42,925)	\$ (42,925)	\$ -	\$ -	\$ (27,306)	\$ (27,306)
4.3 b Fines and penalties of regulatory authorities (exclude amounts reported in Line 3.3)							\$ 54	\$ 54	\$ -	\$ -	\$ 34	\$ 34
4.4 Other general and administrative expenses							\$ (456,714)	\$ (456,714)	\$ -	\$ -	\$ (290,550)	\$ (290,550)
4.5 Total non-claims costs	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (437,842)	\$ (437,842)	\$ -	\$ -	\$ (308,965)	\$ (308,965)
5. Other Indicators or Information												
5.1 Number of covered lives							2,248	2,248	-	-	1,489	1,489
5.2 Member months							29,932	29,932	-	-	19,042	19,042
5.3 Number of life-years							2,494	2,494	-	-	1,587	1,587
	Grand Total as of 12/31/2016 for ALL markets in col. 1-12.											
6. Net investment income and other gain / (loss)							\$	7,527,892				
7. Other Federal income taxes (exclude taxes on Line 3.1a and 3.1b)							\$	18,981				

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Health Plan ID
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 MLR Reporting Year
 2016

Part 2

Part 2 NOTE: REFER TO MLR INSTRUCTIONS FOR IMPORTANT INFORMATION ABOUT COMPLETING EACH COLUMN AND ROW.		Health Insurance Coverage						Health Insurance Coverage					
		DHMO Products						DPPD & Indemnity Products					
		Individual		Small Group		Large Group		Individual		Small Group		Large Group	
		Total as of 12/31/2016	Total as of 3/31/2017	Total as of 12/31/2016	Total as of 3/31/2017	Total as of 12/31/2016	Total as of 3/31/2017	Total as of 12/31/2016	Total as of 3/31/2017	Total as of 12/31/2016	Total as of 3/31/2017	Total as of 12/31/2016	Total as of 3/31/2017
	1	2	3	4	5	6	7	8	9	10	11	12	
1.	Premium:												
1.1	Direct premium written						\$ 1,093,166	\$ 1,078,342	\$ -	\$ -	\$ 808,796	\$ 778,445	
1.2	Unearned premium prior year						\$ 19,251	\$ 19,251	\$ -	\$ -	\$ 26,717	\$ 26,717	
1.3	Unearned premium MLR Reporting year						\$ 9,502	\$ -	\$ -	\$ -	\$ 28,561	\$ -	
1.4	Premium balances written off						\$ 13,069	\$ 1,854	\$ -	\$ -	\$ 5,731	\$ -	
2.	Claims:												
2.1	Claims Paid						\$ 654,349	\$ -	\$ -	\$ -	\$ 734,486	\$ -	
2.1a	Claims paid during the MLR reporting year regardless of incurred date						\$ 614,491	\$ -	\$ -	\$ -	\$ 686,317	\$ -	
2.1b	Claims incurred only during the MLR reporting year, paid through 3/31 of the following year												
2.2	Direct claim liability						\$ 51,547	\$ -	\$ -	\$ -	\$ 37,969	\$ -	
2.2a	Liability as of 12/31 of MLR reporting year for all claims regardless of incurred date						\$ 10,661	\$ -	\$ -	\$ -	\$ 7,853	\$ -	
2.2b	Liability for claims incurred only during the MLR reporting year, calculated as of 3/31 of the following year												
2.3	Direct claim liability prior year						\$ 74,443	\$ -	\$ -	\$ -	\$ 85,935	\$ -	
2.4	Direct claim reserves						\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
2.4a	Reserves as of 12/31 of MLR reporting year for all claims regardless of incurred date						\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
2.4b	Reserves for claims incurred only during the MLR reporting year, calculated as of 3/31 of the following year												
2.5	Direct claim reserves prior year						\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
2.6	Experience rating refunds (rate credits) paid						\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
2.6a	Experience rating refunds, with all incurred dates, paid in the MLR reporting year						\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
2.6b	Experience rating refunds associated with premium earned only in the reporting year and paid through 3/31 of the following year						\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
2.7	Reserve for experience rating refunds (rate credits)						\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
2.7a	Reserve in MLR reporting year regardless of incurred date						\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
2.7b	Reserves specific to the MLR reporting year through 3/31 of the following year						\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
2.8	Reserve for experience rating refunds (rate credits) prior year						\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
2.9	Incurred dental incentive pool and bonuses						\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
2.9a	Paid dental incentive pools and bonuses MLR Reporting year						\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
2.9b	Accrued dental incentive pools and bonuses MLR Reporting year						\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
2.9c	Accrued dental incentive pools and bonuses prior year						\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
2.10	Contract benefit and lawsuit reserves						\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
2.11	Total incurred claims	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 631,553	\$ 625,172	\$ -	\$ -	\$ 686,520	\$ 694,170	

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Part 3

Health Plan ID
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 Legal Name
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 MLR Reporting Year
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Description of Expense Element (by Type)	NEW	Detailed Description of Expense Allocation Methods
1	2	3
1. Incurred Claims		
1.a Federal taxes and assessments		
Allocation		Paid claims are assigned to the contract situs state. Claim liabilities are allocated to the contract situs state based on premium except for minimum premium accounts which were specifically assigned to situs states.
Description		Includes claims paid or payable to physicians and non-clinical providers for services and supplies covered by the policy, including estimates of losses incurred, but not yet reported.
2. Federal and State Taxes and Licensing or Regulatory Fees		
2.a Federal taxes and assessments		
Allocation		Federal income taxes, excluding federal income taxes on net investment income, capital gains and the medical loss rebate liability, were allocated by state and by segment (i.e., individual, small group, large group) based on their pro rata share of pre-federal tax income excluding net investment income, capital gains, medical loss rebate liability, HEI Fee and in some cases, other taxes and assessments allocated to related insurance coverage reported under Section 2718 of the Public Health Service Act and excludes federal income taxes on investment income, capital gains and the medical loss rebate liability, fines and penalties of regulatory
Description		
2.b State insurance, premium and other taxes		
Allocation		State income taxes are allocated to the state to which the tax was paid and then allocated to segments (i.e., individual, small group, large group) based on their pro rata share of pre-tax income, excluding net investment income, capital gains, medical loss rebate liability, HEI Fee and in some cases, other taxes and assessments allocated to related insurance coverage reported under Section 2718 of the Public Health Service Act and excludes federal income taxes on investment income, capital gains and the medical loss rebate liability, fines and penalties of regulatory
Allocation		Premium earned by segment by contract situs state is used to allocate state and municipal premium taxes.
Allocation		Property taxes are allocated pro rata based on membership associated with contracts in each segment (i.e., individual, small group, large group) situated in each state.
Description		Premium earned by segment (i.e., individual, small group, large group) by contract situs state is used to allocate quarterly fund assessments.
		Includes State income, excise, business, and other taxes that may be excluded from earned premium under 45 CFR §158.162(b)(1), also includes State premium taxes, and Community Benefit Expenditures
2.c Community benefit expenditures		
Description		N/A
2.d Regulatory authority licenses and fees		
Allocation		Assessments were allocated by state based on actual payment detail. Assessments were further allocated to segments (i.e., individual, small group, large group) pro rata based on the proportion of membership associated with contracts in each segment situated in a state.
Description		Includes statutory assessments to defray operating expenses of any State or Federal regulatory department, and examination fees in lieu of premium taxes as specified by State law, and excludes fines and penalties of regulatory authorities, and any fees for examinations by any State or Federal
3. Non-Claims costs		
3.a Direct sales salaries and benefits		
Allocation		Expenses are allocated pro rata based on the proportion of enrollee months associated with contracts in each segment (i.e., individual, small group, large group) that are situated in a state. For minimum premium contracts, enrollee member months are split between the insured and
Description		Includes compensation (including but not limited to salary and benefits) to employees engaged in soliciting and generating sales to policyholders for the issuer.
3.b Agents and brokers fees and commissions		
Allocation		Expenses are allocated pro rata based on the proportion of enrollee months associated with contracts in the small and large group segment that are situated in a state.
Description		All expenses incurred by the issuer payable to a licensed agent, broker, or producer who is not an employee of the issuer in relation to the sale and solicitation of policies for the company.
3.c Other taxes		
Allocation		Other taxes are specifically identified by state, if specific identification was not possible, remaining taxes were allocated based on a ratio of total specifically identified state tax payments.
Allocation		Expenses are allocated pro rata based on the proportion of enrollee months associated with contracts in each segment (i.e., individual, small group, large group) that are situated in a state. For minimum premium contracts, enrollee member months are split between the insured and
Allocation		Federal payroll tax is assigned to a product and then allocated on a pro rata basis to the proper segment (i.e., individual, small group, large group) within a state based on membership associated with contracts in each segment situated in each state.
Description		Includes other taxes, fines and penalties of regulatory authorities, and fees for examinations by any State or Federal departments not already included in other lines.
3.d Other general and administrative expenses		
Allocation		Expenses are allocated pro rata based on the proportion of enrollee months associated with contracts in each segment (i.e., individual, small group, large group) that are situated in a state. For minimum premium contracts, enrollee member months are split between the insured and
Description		General and Administrative Expenses not already included in other lines.

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Department of Managed Health Care/Department of Insurance
 Medical Loss Ratio Reporting Form: Dental Coverage
 Part 4 - MLR Calculation

Health Plan ID
 0
 Legal Name
 Connecticut General Life Insurance Company
 dBA
 0
 MLR Reporting Year
 2016

Part 4 NOTE: REFER TO MLR INSTRUCTIONS FOR IMPORTANT INFORMATION ABOUT COMPLETING EACH COLUMN AND ROW.		Health Insurance Coverage DPPO & Indemnity Products											
		Individual				Small Group				Large Group			
		PY2	PY1	CY	Total	PY2	PY1	CY	Total	PY2	PY1	CY	Total
		13	14	15	16	17	18	19	20	21	22	23	24
1.	Medical Loss Ratio Numerator												
1.1	Adjusted incurred claims as reported on MLR Form for prior year(s)	\$ 1,983,928	\$ 798,444			\$ 45,307	\$ -			\$ 5,888,854	\$ 1,643,562		
1.2	Adjusted incurred claims as of 3/31 of the year following the MLR reporting year (Part 1 Line 2.1)	\$ 1,981,827	\$ 802,542	\$ 625,172	\$ 3,409,541	\$ 43,986	\$ -	\$ -	\$ 43,986	\$ 5,868,988	\$ 1,643,890	\$ 694,170	\$ 8,207,048
1.3	MLR numerator (Line 1.2)	\$ 1,981,827	\$ 802,542	\$ 625,172	\$ 3,409,541	\$ 43,986	\$ -	\$ -	\$ 43,986	\$ 5,868,988	\$ 1,643,890	\$ 694,170	\$ 8,207,048
2.	Medical Loss Ratio Denominator												
2.1	Premium earned (Part 1 Line 1.1)	\$ 3,577,928	\$ 1,694,277	\$ 1,095,739	\$ 6,367,944	\$ 75,001	\$ 0	\$ -	\$ 75,001	\$ 7,376,291	\$ 1,944,342	\$ 805,162	\$ 10,125,796
2.2	Federal and State taxes and licensing or regulatory fees (Part 1 Line 3.4)	\$ (584,113)	\$ 409,941	\$ 100,289	\$ (73,883)	\$ (5,522)	\$ 1,187	\$ -	\$ (4,334)	\$ 238,517	\$ 8,170	\$ 69,663	\$ 316,349
2.3	MLR Denominator (Line 2.1 - Line 2.2)	\$ 4,162,041	\$ 1,284,337	\$ 995,450	\$ 6,441,828	\$ 80,523	\$ (1,187)	\$ -	\$ 79,336	\$ 7,137,774	\$ 1,936,173	\$ 735,499	\$ 9,809,446
3.	3.1 Life-years (Part 1 Line 5.3)	8,717	3,940	2,494	15,151	125	0	0	125	17,325	4,504	1,587	23,416
4.	MLR Calculation (for Health plans or health insurers with at least 1,000 life years in the Total column of Line 3.1)												
4.1	MLR				52.9%				Not Required to Calculate				83.7%

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Department of Managed Health Care/Department of Insurance
 Medical Loss Ratio Reporting Form: Dental Coverage
 Part 5 - Additional Responses

Health Plan ID

0

Legal Name

Connecticut General Life Insurance Company

dBA

0

MLR Reporting Year

2016

Part 5

		Tax Rate
1. If a health plan or health insurer uses the highest premium tax rate in the State, the health plan or health insurer must report applicable highest State health premium tax		
2. If the health plan or health insurer included deferred experience for prior year and excluded deferred experience for current year, provide the total direct written premium and total incurred claims for the deferred experience by market.		
Deferred experience for prior year		
Deferred experience for current year		
3. If the health plan or health insurer novated any business in the MLR reporting year effective during the reporting year provide the name of the entity to whom the business was sold or transferred and the date of the sale or transfer.		
Name of Entity to whom business was sold or transferred	Effective date of sale or transfer	
Cigna Health and Life Insurance Company	various	

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**Department of Managed Health Care
Medical Loss Ratio Reporting Form: Dental Coverage
Attestation**

Health Plan ID

0

Legal Name

Connecticut General Life Insurance Company

dBA

0

MLR Reporting Year

2016

Attestation

Attestation Statement

The officers of this reporting Health plan being duly sworn, each attest that he/she is the described officer of the reporting Health plan, and that this MLR Reporting Form, the Company/Health plan Associations, and any supplemental submission that the Health plan includes are full and true statements of all the elements included therein for the MLR reporting year stated above, and that the MLR Reporting Form has been completed in accordance with the Department of Managed Health Care's guidance and reporting instructions, according to the best of his/her information, knowledge and belief. Furthermore, the scope of this attestation by the described officer includes any related electronic filings and postings for the MLR reporting year stated above and which are required by Department of Managed Health Care.

Steve Crooke
Chief Executive Officer/President

Scott Lambert
Chief Financial Officer