

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

1. MLR Reporting Year	2015
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.

Health Plan ID \_\_\_\_\_  
 Legal Name \_\_\_\_\_  
 Connecticut General Life Insurance Company  
 dBA \_\_\_\_\_  
 MLR Reporting Year \_\_\_\_\_  
 2015

Federal Tax Exempt  
 No

# Part 1

Part 1 NOTE: REFER TO MLR INSTRUCTIONS FOR IMPORTANT INFORMATION ABOUT COMPLETING EACH COLUMN AND ROW.	Health Insurance Coverage						Health Insurance Coverage					
	Individual			DHPG Products			Individual			DHPG & Indemnity Products		
	Small Group		Large Group	Small Group		Large Group	Small Group		Large Group	Small Group		Large Group
	Total as of 12/31/15	Total as of 3/31/16	Total as of 12/31/15	Total as of 3/31/16	Total as of 12/31/15	Total as of 3/31/16	Total as of 12/31/15	Total as of 3/31/16	Total as of 12/31/15	Total as of 3/31/16	Total as of 12/31/15	Total as of 3/31/16
	1	2	3	4	5	6	7	8	9	10	11	12
1. Premium												
1.1 Total direct premium earned	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,681,976	\$ 1,694,277	\$ 0	\$ 0	\$ 1,941,644	\$ 1,944,342
2. Claims												
2.1 Total incurred claims (MLR Form Part 2, Line 2.11)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 761,500	\$ 798,444	\$ (2,463)	\$ -	\$ 1,920,305	\$ 1,643,562
3. Federal and State Taxes and Licensing or Regulatory Fees												
3.1 Federal taxes and assessments incurred by the reporting health plan or health insurer during the MLR reporting year							\$ 344,470	\$ 344,470	\$ 1,187	\$ 1,187	\$ (68,000)	\$ (68,000)
3.1 a Federal income taxes deductible from premium in MLR calculations							\$ 38,431	\$ 38,431	\$ -	\$ -	\$ 43,934	\$ 43,934
3.1 b Other Federal Taxes (other than income tax) and assessments deductible from premium												
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)							\$ 14,747	\$ 14,747	\$ 0	\$ 0	\$ 17,024	\$ 17,024
3.2 a State income, excise, business, and other taxes							\$ 12,449	\$ 12,449	\$ 0	\$ 0	\$ 14,371	\$ 14,371
3.2 b State premium taxes							\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
3.2 c Community benefit expenditures							\$ (156)	\$ (156)	\$ -	\$ -	\$ (178)	\$ (178)
3.3 Regulatory authority licenses and fees												
3.4 Total Federal and State Taxes and fees to be excluded from premium	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 409,941	\$ 409,941	\$ 1,187	\$ 1,187	\$ 8,170	\$ 8,170
4. Non-Claims Costs												
4.1 Direct sales salaries and benefits							\$ 7,474	\$ 7,474	\$ -	\$ -	\$ 8,544	\$ 8,544
4.2 Agents and brokers fees and commissions							\$ 89,373	\$ 89,373	\$ 0	\$ 0	\$ 25,774	\$ 25,774
4.3 Other taxes							\$ 1,483	\$ 1,483	\$ -	\$ -	\$ 1,695	\$ 1,695
4.3 a Taxes and assessments (exclude amounts reported in Section 3 or Line 10)							\$ 428	\$ 428	\$ -	\$ -	\$ 489	\$ 489
4.3 b Fees and penalties of regulatory authorities (exclude amounts reported in Line 3.3)							\$ 79,903	\$ 79,903	\$ -	\$ -	\$ 91,344	\$ 91,344
4.4 Other general and administrative expenses							\$ 177,660	\$ 177,660	\$ 0	\$ 0	\$ 127,846	\$ 127,846
4.5 Total non-claims costs	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 177,660	\$ 177,660	\$ 0	\$ 0	\$ 127,846	\$ 127,846
5. Other Indicators or Information												
5.1 Number of covered lives							3,501	3,501	-	-	2,971	2,971
5.2 Member months							47,275	47,275	-	-	54,044	54,044
5.3 Number of life-years							3,940	3,940	-	-	4,604	4,604
			Grand Total (or of 12/31/15 for ALL markets in col. 1-12)									
6. Net investment income and other gain / (loss)											\$ 2,721,296.08	
7. Other Federal income taxes (exclude taxes on Line 3, 1a and 3, 1b)											\$ 51,477.49	

Cell Keys:  
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Health Plan ID  
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 Legal Name  
 Connecticut General Life Insurance Company  
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 MLR Reporting Year  
 2015

# Part 2

Part 2 NOTE: REFER TO MLR INSTRUCTIONS FOR IMPORTANT INFORMATION ABOUT	Health Insurance Coverage						Health Insurance Coverage					
	Dental Products						Dental Products					
	Individual		Small Group		Large Group		Individual		Small Group		Large Group	
	Total as of 12/31/15	Total as of 3/31/16	Total as of 12/31/15	Total as of 3/31/16	Total as of 12/31/15	Total as of 3/31/16	Total as of 12/31/15	Total as of 3/31/16	Total as of 12/31/15	Total as of 3/31/16	Total as of 12/31/15	Total as of 3/31/16
	1	2	3	4	5	6	7	8	9	10	11	12
1. Premium:												
1.1 Direct premium written							\$ 1,676,754	\$ 1,668,801	\$ (197)	\$ (197)	\$ 1,963,492	\$ 1,940,944
1.2 Unearned premium prior year							\$ 24,775	\$ 24,775	\$ 197	\$ 197	\$ 4,745	\$ 4,745
1.3 Unearned premium MLR Reporting year							\$ 19,251	\$ -	\$ -	\$ -	\$ 24,765	\$ -
1.4 Premium balances written off							\$ 302	\$ (701)	\$ -	\$ -	\$ 1,828	\$ 1,347
2. Claims:												
2.1 Claims Paid:												
2.1a Claims paid during the MLR reporting year regardless of incurred date							\$ 866,052	\$ 1,230	\$ -	\$ -	\$ 2,199,523	\$ -
2.1b Claims incurred only during the MLR reporting year, paid through 3/31 of the following year							\$ 783,361	\$ -	\$ -	\$ -	\$ 1,626,150	\$ -
2.2 Direct claim liability:												
2.2a Liability as of 12/31 of MLR reporting year for all claims regardless of incurred date							\$ 74,443	\$ -	\$ -	\$ -	\$ 85,935	\$ -
2.2b Liability for claims incurred only during the MLR reporting year, calculated as of 3/31 of the following year							\$ 15,083	\$ -	\$ -	\$ -	\$ 17,412	\$ -
2.3 Direct claim reserves:												
2.3a Reserves for claims incurred only during the MLR reporting year, calculated as of 3/31 of the following year							\$ 179,035	\$ 3,753	\$ -	\$ -	\$ 365,153	\$ -
2.3b Reserves for claims incurred only during the MLR reporting year, calculated as of 3/31 of the following year							\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2.4 Direct claim reserves prior year							\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2.5 Experience rating refunds (rate credits) paid:												
2.5a Experience rating refunds, with all incurred dates, paid in the MLR reporting year							\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2.5b 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 Reserved 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 Contingent benefit and lawsuit reserves							\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2.11 Total incurred claims	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 761,500	\$ 798,444	\$ (2,483)	\$ -	\$ 1,920,305	\$ 1,643,562

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### Part 3

Description of Expense Element (by Type)	NEW	Detailed Description of Expense Allocation Methods
<b>1. Incurred Claims</b>		
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.
<b>2. Federal and State Taxes and Licensing or Regulatory Fees</b>		
<b>2 a. Federal taxes and assessments</b>		
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, Hill Fee and in some instances goodwill amortization.
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 all federal taxes and assessments allocated to health 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, fees and penalties of regulatory authorities, and fees for examinations by any Federal departments other than as specified in 45 CFR §158.162(a) as other non-claims costs, that are not included as an adjustment to premium revenue.
<b>2 b. State insurance, premium and other taxes</b>		
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, Hill Fee and in some instances goodwill amortization.
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.
Allocation		Premium earned by segment (i.e., individual, small group, large group) by contract situs state is used to allocate guaranty fund assessments.
Description		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.
<b>2 c. Community benefit expenditures</b>		
Description		N/A
<b>2 d. Regulatory authority licenses and fees</b>		
Allocation		Assessments were allocated by state based on actual payment details.
Allocation		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 fees and penalties of regulatory authorities, and any fees for examinations by any State or Federal regulatory departments other than as specifically included in this line.
<b>3. Non-Claims costs</b>		
<b>3 a. Direct sales salaries and benefits</b>		
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 administrative portion of the contract.
Description		Includes compensation (including but not limited to salary and benefits) to employees engaged in soliciting and generating sales to policyholders for the issuer.
<b>3 b. Agents and brokers fees and commissions</b>		
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.
<b>3 c. Other taxes</b>		
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 administrative portion of the contract.
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.
<b>3 d. Other general and administrative expenses</b>		
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 administrative portion of the contract.
Description		General and Administrative Expenses not already included in other lines.

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# Part 4

Part 4 NOTE: REFER TO MLR INSTRUCTIONS FOR IMPORTANT INFORMATION ABOUT COMPLETING EACH COLUMN AND ROW.		Health Insurance Coverage - Dental Products												Health Insurance Coverage - Other Insurance Products																
		Individual				Small Group				Large Group				Individual				Small Group				Large Group								
		PY2	PY1	CY	Total	PY2	PY1	CY	Total	PY2	PY1	CY	Total	PY2	PY1	CY	Total	PY2	PY1	CY	Total	PY2	PY1	CY	Total					
1.1	Medical Loss Ratio Numerator																													
1.2	Adjusted incurred claims as reported on MLR Form for prior year(s) (Part 1 Line 2.1)		\$ -	\$ -	\$ -		\$ -	\$ -	\$ -		\$ -	\$ -	\$ -	\$ 1,981,928	\$ 798,444	\$ 2,779,890	\$ 43,986	\$ -	\$ -	\$ 43,986	\$ 5,888,854	\$ 1,643,562	\$ 7,510,013	\$ 43,986	\$ -	\$ -	\$ 43,986	\$ 5,888,854	\$ 1,643,562	\$ 7,510,013
1.3	MLR numerator (Line 1.2)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,981,436	\$ 798,444	\$ 2,779,890	\$ 43,986	\$ -	\$ -	\$ 43,986	\$ 5,886,451	\$ 1,643,562	\$ 7,510,013	\$ 43,986	\$ -	\$ -	\$ 43,986	\$ 5,886,451	\$ 1,643,562	\$ 7,510,013
2	Medical Loss Ratio Denominator																													
2.1	Premium earned (Part 1 Line 1.1)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,577,898	\$ 1,694,277	\$ 5,272,205	\$ 75,001	\$ 0	\$ 75,001	\$ 7,376,591	\$ 1,944,342	\$ 9,320,833	\$ 75,001	\$ 0	\$ 75,001	\$ 7,376,591	\$ 1,944,342	\$ 9,320,833		
2.2	Federal and State taxes and licensing or regulatory fees (Part 1 Line 3.4)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (584,113)	\$ 409,941	\$ (174,172)	\$ (5,221)	\$ 1,187	\$ 4,334	\$ 238,517	\$ 8,170	\$ 246,686	\$ (5,221)	\$ 1,187	\$ 4,334	\$ 238,517	\$ 8,170	\$ 246,686		
2.3	MLR Denominator (Line 2.1 - Line 2.2)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,162,041	\$ 2,104,337	\$ 5,446,378	\$ 69,780	\$ 1,187	\$ 79,335	\$ 7,137,774	\$ 1,936,173	\$ 9,073,947	\$ 69,780	\$ 1,187	\$ 79,335	\$ 7,137,774	\$ 1,936,173	\$ 9,073,947		
3	Life-years (Part 1 Line 5.3)	0	0	0	0	0	0	0	0	0	0	0	0	8,717	3,968	3,860	105	0	105	17,025	4,904	4,504	105	0	105	17,025	4,904	4,504		
4	MLR Calculation (for Health plans or health insurers with at least 1,000 life years in the Total column of Line 3.1)	Not Required to Calculate				Not Required to Calculate				Not Required to Calculate				51.04%				Not Required to Calculate				82.76%								

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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

2015

# 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**

2015

## 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