

## Other Health Insurance (2024)

Other Health Insurance Interrogatories

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						Other He	ealth Ins	surance (2024	<b>!</b> )							
Pol	cy/Certificate Administration							•								
		Accident Only	Accidental Death and Dismemberment	Individual Specified Disease - Limited Benefit/ Critical Illness	Hospital/ Other Indemnity	Hospital/ Surgical/ Medical Expense	Accident Only	Accidental Death and Dismemberment	Association Specified Disease - Limited Benefit/ Critical Illness	Hospital/ Other Indemnity	Hospital/ Surgical/ Medical Expense	Accident Only	Accidental Death and Dismemberment	Employer Group Specified Disease - Limited Benefit/ Critical Illness	Hospital/ Other Indemnity	Hospital/ Surgical/ Medical Expense
45	Direct Written Premium.															
46	Earned premiums for reporting year															
47	Number of policies/certificates in force at the beginning of the period															
48	Number of covered lives on policies/certificates in force at the beginning of the period															
49	Number of new policy/certificate applications/enrollments received during the period															
50	Number of new policy/certificates issued during the period															
51	Number of new policies/certificates denied during the neriod															
52	Number of covered lives on new policies/certificates issued during the period															
53	Number of policy/certificate terminations and cancellations initiated by the policyholder/certificate holder during the period															
54	Number of policies/certificates cancelled during the free look period															
55	Number of covered lives on policies/certificates cancelled at the initiation of the policyholder/certificate holder during the free look period during the period															
56	Number of policy/certificate terminations and cancellations due to non-payment of premium during the period															
57	Number of policies/certificates cancelled by the company for any reason other than non-payment of premium during the period															
58	Number of rescissions during the period															
59	Number of covered lives impacted on terminations and cancellations initiated by the policyholder/certificate															
60	Number of covered lives impacted on terminations and cancellations due to nonpayment															
61	Number of covered lives impacted by rescissions															
62	Number of policies/certificates in force at the end of the period															
63	Number of covered lives on policies/certificates in force at the end of the period															

					Other He	ealth Ins	surance (2024	<b>!</b> )							
Claims Administration (Including Pharmacy)	Accident Only	Accidental Death and Dismemberment	Individual Specified Disease - Limited Benefit/ Critical Illness	Hospital/ Other Indemnity	Hospital/ Surgical/ Medical Expense		Accidental Death and Dismemberment	Association Specified Disease - Limited Benefit/ Critical Illness	Hospital/ Other Indemnity	Hospital/ Surgical/ Medical Expense	Accident Only	Accidental Death and Dismemberment	Employer Group Specified Disease - Limited Benefit/ Critical Illness	Hospital/ Other Indemnity	Hospital/ Surgical, Medical Expense
Number of claims pending at the beginning of the period															
65 Number of claims received (include non-clean claims) 66 Total number of claims denied, rejected or returned 67 Number denied, rejected, or returned as non-covered or 68 Number denied, rejected, or returned as subject to pre-															
existina condition exclusion  Number denied, rejected, or returned due to failure to provide adequate documentation  Number denied, rejected, or returned due to being within															
the waiting period  Number denied, rejected, or returned (in whole or in part)- because maximum 5 limit exceeded  Number of claims pending at the end of the period Median number of days from receipt of claim to decision															
for denied claims  Average number of days from receipt of claim to decision for denied claims  Median number of days from receipt of claim to decision for approved claims															
75 Average number of days from receipt of claim to decision for approved claims Number of claims paid Aggregate dollar amount of paid claims during the period															
78 Number of claims where the claims payment was reduced by premium owed 79 Dollar amount of claims payments applied to unpaid premiums.															
Consumer Complaints and Lawsuits															
	Accident Only	Accidental Death and Dismemberment	Individual Specified Disease - Limited Benefit/ Critical Illness	Hospital/ Other Indemnity	Hospital/ Surgical/ Medical Expense	Accident Only	Accidental Death and Dismemberment	Association Specified Disease - Limited Benefit/ Critical Illness	Hospital/ Other Indemnity	Hospital/ Surgical/ Medical Expense	Accident Only	Accidental Death and Dismemberment	Employer Group Specified Disease - Limited Benefit/ Critical Illness	Hospital/ Other Indemnity	Hospital/ Surgica Medical Expense
80 Number of complaints received by Company (other than through the DOI) 81 Number of complaints received through DOI 82 Number of complaints resulting in claims reprocessing															
Number of lawsuits open at the beginning of the period															
Mumber of lawsuits opened during the period Number of lawsuits closed during the period Number of lawsuits closed during the period with consideration for the consumer															
Number of lawsuits open at the end of the period															

					Other He	aith the	oui alice (202-	T)						
Marketing and Sales							•	•						
	Accident Only	Accidental Death and Dismemberment	Individual Specified Disease - Limited Benefit/ Critical Illness	Hospital/ Other Indemnity	Hospital/ Surgical/ Medical Expense	Accident Only	Accidental Death and Dismemberment	Association Specified Disease - Limited Benefit/ Critical Illness	Hospital/ Other Indemnity	Hospital/ Surgical/ Medical Expense	Accidental Death and Dismemberment	Employer Group Specified Disease - Limited Benefit/ Critical Illness	Hospital/ Other Indemnity	Hospital/ Surgion
88 Number of individual applications/enrollments pending at the beginning of the period														
Number of individual applications/enrollments denied during the period for any reason														
Number of individual applications/enrollments denied during the period - health status or condition														
Number of individual applications/enrollments approved during the period														
Number of individual applications/enrollments pending at the end of the period														
Number of applications/enrollments received via phone (audio only)											 			
4 Number of applications/enrollments received in person or via video application (e.g., Zoom, WebEx)											 			
5 Number of applications/enrollments received online (electronically)											 			
6 Number of applications/enrollments received by mail during the period											 			
7 Number of applications/enrollments received by any other method during the period											 			
8 Commissions paid during reporting period (dollar amount of commissions incurred during the period)														
9 Unearned commissions returned to company on policies/certificates sold during the period														
Other Health Insurance Attestation				First Name		Maidalla Niasa				6.5	I			
.00 First Attestor Information				First Name		Middle Nam	e	Last Name		Suffix	Title		Comments	
101 Second Attestor Information														
102 Overall Comments for the Filing Period														

Other Health Insurance (2024)