# The Maryland Insurance Administration's 2011 Report

on

# The Health Care Appeals & Grievance Law

September, 2012

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**Insurance Commissioner** 

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### **Executive Summary**

In 1998, the Appeals and Grievance Law was enacted by the General Assembly to provide a fair process for resolving disputes regarding the medical necessity of a proposed or delivered health care service (See Title 15, Subtitle 10A of the Insurance Article). Until July 1, 2011, the Appeals and Grievance law applied only to individuals with insured health benefits<sup>1</sup>. However, effective July 1, 2011, the Department of Budget and Management for the State of Maryland voluntarily elected to use the Maryland Insurance Administration's external review process to provide external review for all of the self-funded State employee health benefit plans.

Under the Appeals and Grievance Law, nonprofit health service plans, insurers, health maintenance organizations and dental plan organizations are required to provide quarterly reports to the Maryland Insurance Administration ("Administration") regarding adverse decisions and grievance decisions. These quarterly reports coupled with the Administration's complaint data, allow for a comprehensive year over year review of this dispute resolution process. This report summarizes the statistical information the Administration has for adverse decisions, grievance decisions and complaints for 2011, noting changes in certain areas since 2008 for nonprofit health service plans, insurers and health maintenance organizations (hereinafter referred to as "carriers"<sup>2</sup>).

Carriers rendered 43,537 adverse decisions in 2011 and 43,230 in 2008, representing an increase of 0.7 percent over the four year period. When the 2011 data is compared to the 2010 data, there was an increase in adverse decisions of 34.7 percent (32,320 in 2010 and 43,537 in 2011). Physician services and laboratory and radiology services accounted for the majority of this increase. Adverse decisions for physician services increased by 61.1 percent from 2010 to 2011 (9,508 in 2010 and 15,313 in 2011). Adverse decisions for laboratory and radiology services increased by 113.9 percent from 2010 to 2011 (3,299 in 2010 and 7,057 in 2011).

Adverse decisions for inpatient hospital services decreased by 71.8 percent from 2008 to 2011 (16,809 in 2008 and 4,745 in 2011). This decrease represents a consistent downward trend. Adverse decisions for inpatient hospital services decreased by 39.6 percent from 2009 to 2010 (9,654 in 2009 and 5,828 in 2010) and by 18.6 percent from 2010 to 2011 (5,828 in 2010 and 4,745 in 2011).

In 2011, four categories of services accounted for over 75 percent of all adverse decisions: (1) physician services, (2) laboratory and radiology services, (3) podiatry, dental, optometry and chiropractic services, and (4) pharmacy services. In 2008, these same services accounted for only 44.1 percent of all adverse decisions. In 2008,

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<sup>&</sup>lt;sup>1</sup> The Maryland Insurance Administration's 2011 Health Benefit Plan Covered Lives Report indicates that in 2011, 24.7 percent of the population under the age of 65, or a little over 1 million individuals had insured health benefits.

<sup>&</sup>lt;sup>2</sup> Although dental plan organizations are required to follow Title 15, Subtitle 10A of the Insurance Article, the number of complaints attributable to these companies is very small. Because of the small volume and continuing data integrity issues, this report is limited to medical type coverage, and does not include dental only coverage.

inpatient hospital services ranked first in terms of the percentage of all adverse decisions at 38.9 percent (16,809). In 2011, physician services ranked first in terms of the percentage of all adverse decisions at 35.2 percent (15,313), while inpatient hospital services ranked fifth at 10.9 percent (4,745). In 2008, pharmacy services accounted for 15.7 percent of all adverse decisions (6,771), but in 2011 accounted for only 11.6 percent (5,051) of all adverse decisions, representing a decrease of 25.4 percent.

Over the years, policy makers have expressed concern about the denial of emergency room services and mental health services. The statistics provided by carriers indicates that there are still very few adverse decisions for these two types of services (0.8 percent and 1.9 percent of all adverse decisions in 2011 respectively) and that there has been a decrease in the number of adverse decisions for these services from 2008 to 2011. Adverse decisions for emergency room services decreased by 71.4 percent from 2008 to 2011 (1,239 in 2008 and 354 in 2011) and adverse decisions for mental health services decreased by 25.5 percent from 2008 to 2011 (1,092 in 2008 and 814 in 2011).

While the number of adverse decisions remained steady (0.7 percent increase) between 2008 and 2011, the number of grievances (the appeal by consumers of the carriers' adverse decisions) decreased by 14.8 percent. In 2008, over half of all grievances were for inpatient hospital services and physician services, 37.9 percent and 20.5 percent, respectively. In 2011, data illustrates that grievances for these two categories of services accounted for just less than 40 percent of all grievances. The percentage of grievances for physician services increased to 24.1 percent, while the percentage of grievances for inpatient hospital services decreased to only 15.3 percent. Although the number of grievances reported by carriers for emergency room services and mental health services are relatively small (59 and 213 in 2008 and 147 and 299 in 2011), the number of grievances for both services significantly increased between 2008 and 2011; by 149.2 percent and 40.4 percent, respectively.

Grievances decreased as a percentage of adverse decisions from 2008 to 2011 (13.2% to 11.2%). Carriers were more likely to reverse themselves during the internal grievance process in 2011 than in 2008. Carriers upheld adverse decisions 41.9 percent of the time in 2011 as compared to 53.1 percent in 2008, representing a decrease of 11.2 percent in carriers upholding their original adverse decisions at the grievance level.

Consistent with the reduction in the number of grievances filed with carriers by individuals between 2008 and 2011, the number of medical necessity complaints filed with the Administration decreased between 2008 and 2011. The Administration received 1022 complaints in 2008 and 825 complaints in 2011, representing a decrease of 19.3 percent. The number of reversals of the grievance decisions by the Administration or by the carrier during the investigation process increased to 66.7 percent in 2011 from 54.7 percent in 2008.

In 2011, the Administration issued 8 Orders and Consent Orders based on the medical necessity complaints which it received and imposed \$14,500 in administrative penalties. During this same year, the Administration recovered \$509,089 for complainants under the Appeals and Grievance law. By comparison in 2008, the Administration issued 19 Orders and Consent Orders based on medical necessity complaints it received, imposed \$4,403 in administrative penalties and recovered

\$815,338 for complainants. Since the enactment of the Appeals and Grievance law, the Administration has recovered more than \$6,500,000 for complainants.

Although the percentage of Maryland's population under the age of 65 protected by the Appeals and Grievance Law has continued to decline since 1998, the continued increase in the percentage of adverse decisions being reversed by the carrier after the internal grievance process, coupled with the increased carrier reversal rate by the Administration, demonstrates that the Appeals and Grievance law remains an important protection for Maryland consumers, providing a fair process for resolving disputes regarding the medical necessity of proposed or delivered health care services.

### **Background**

In 1998, the Appeals and Grievance Law was enacted by the General Assembly to provide a full and fair process for resolving disputes regarding the medical necessity of a proposed or delivered health care service. (See Title 15, Subtitle 10A of the Insurance Article.) The Appeals and Grievance law applies to individuals with insured health benefits.

When the Appeals and Grievance Law was enacted, the percentage of the population under the age of 65 with insured health benefits (42.8 percent) slightly exceeded the percentage of the population under the age of 65 with other employment based health benefits (37.9 percent). By 2011, the percentage of the population under the age of 65 with insured health benefits declined to just under 25 percent.<sup>3</sup>

The Appeals and Grievance process begins when a carrier makes an "adverse decision," a determination that a proposed or delivered health care service is not medically necessary. The member, the member's representative, or the treating provider on behalf of the member has the right to protest this decision through the carrier's internal review process. When the member files a protest with the carrier, this is a "grievance." If the carrier again concludes the proposed or delivered health care service is not medically necessary, the member may ask the Maryland Insurance Administration ("Administration") to review the carrier's grievance decision by filing a "complaint."

The Appeals and Grievance Law gives the Administration the ability to contract with independent review organizations to review these medical necessity complaints. When the Administration sends a complaint to an independent review organization for review, Maryland law requires that the review be performed by an unbiased provider in the same specialty as the area or areas appropriate to the subject of review. In addition, an independent review organization may not be a subsidiary of, or in any way be owned or controlled by, a health benefit plan, or a trade association of health benefit plans, or a trade association of health benefit plans, or a trade association of health care providers. Based on the independent review organization's medical opinion, the Administration reaches a decision. If the complainant remains dissatisfied with the Administration's decision, he or she may request in writing a hearing to challenge the Administration's decision.

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<sup>&</sup>lt;sup>3</sup> Maryland Insurance Administration's 2011 Health Benefit Plan Covered Lives Report.

The Appeals and Grievance Law also requires carriers to submit quarterly reports about their adverse decisions and grievance decisions. Specifically, carriers must provide to the Administration:

- The number of adverse decisions issued by the carrier;
- The outcome of each grievance filed with the carrier;
- The number and outcomes of cases that were considered emergency cases;
- The time within which the carrier made a grievance decision on all other cases that were not considered emergency cases;
- The number of grievances filed with the carrier that resulted from an adverse decision involving length of stay for inpatient hospitalization as related to the medical procedure involved; and
- The number and outcome of all other cases that resulted from an adverse decision involving the length of stay for inpatient hospitalization.

These quarterly reports, coupled with the Administration's data regarding complaints, allows for a comprehensive year over year review of this process. This report summarizes the statistical information the Administration has for adverse decisions, grievance decisions and complaints for 2011, noting changes in certain areas since 2008 for nonprofit health services plans, insurers and health maintenance organizations.

### **Adverse Decisions**

Table 1 provides an overview of the number and type of adverse decisions carriers made in 2008 and 2011. More detailed information about adverse decisions made by each carrier is provided in Appendix 1 for 2011.

Carriers rendered 43,537 adverse decisions in 2011 and 43,230 in 2008, representing an increase of 0.7% percent over the four year period. When the 2011 data is compared to the 2010 data, there was an increase in adverse decisions of 34.7 percent (32,320 in 2010 and 43,537 in 2011). Physician services and laboratory and radiology services accounted for the majority of this increase. Adverse decisions for physician services increased by 61.1 percent from 2010 to 2011 (9,508 in 2010 and 15,313 in 2011). Adverse decisions for laboratory and radiology services increased by 113.9 percent from 2010 to 2011 (3,299 in 2010 and 7,057 in 2011).

Adverse decisions for inpatient hospital services decreased by 71.8 percent from 2008 to 2011 (16,809 in 2008 and 4,745 in 2011). This decrease continues to represent a downward trend for inpatient hospital services. Adverse decisions for inpatient hospital services decreased by 39.6 percent from 2009 to 2010 (9,654 in 2009 and 5,828 in 2010) and by 18.6 percent from 2010 to 2011 (5,828 in 2010 and 4,745 in 2011).

In 2011, four categories of services accounted for over 75 percent of all adverse decisions: (1) physician services, (2) laboratory and radiology services, (3) podiatry, dental, optometry, and chiropractic services, and (4) pharmacy services. In 2008, these same services accounted for only 44.1 percent of all adverse decisions. In 2008, inpatient hospital services ranked first in terms of the percentage of all adverse decisions at 38.9 percent (16,809). In 2011, physician services ranked first in terms of the

percentage of all adverse decisions at 35.2 percent (15,313), while inpatient hospital services ranked fifth at 10.9 percent (4,745). In 2008, pharmacy services accounted for 15.7 percent of all adverse decisions (6,771), but in 2011 accounted for only 11.6 percent (5,051) of all adverse decisions, representing a decrease of 25.4 percent.

Over the years, policy makers have expressed concern about the denial of emergency room services and mental health services. The statistics provided by carriers indicates that there are still very few adverse decisions for these two types of services (0.8 percent and 1.9 percent of all adverse decisions in 2011 respectively) and that there has been a decrease in the number of adverse decisions for these services from 2008 to 2011. Adverse decisions for emergency room services decreased by 71.4 percent from 2008 to 2011 (1,239 in 2008 and 354 in 2011) and adverse decisions for mental health services decreased by 25.5 percent from 2008 to 2011 (1,092 in 2008 and 814 in 2011).

**Table 1: Adverse Decisions** 

	I				
					Percent
	20	NΩ	20	11	Change
	Number	Percent	Number	Percent	Change
					<b>-</b> 4.007
Inpatient hospital services	16809	38.9%	4745	10.9%	-71.8%
Emergency room services	1239	2.9%	354	0.8%	-71.4%
Mental health services	1092	2.5%	814	1.9%	-25.5%
Physician services	6069	14.0%	15313	35.2%	152.3%
Laboratory, radiology					
services	2864	6.6%	7057	16.2%	146.4%
Pharmacy services	6771	15.7%	5051	11.6%	-25.4%
PT, OT, ST services					
(including inpatient rehab)	2745	6.3%	2049	4.7%	-25.4%
Skilled nursing facility	263	0.6%	101	0.2%	-61.6%
Durable medical equipment	1506	3.5%	2135	4.9%	41.8%
Podiatry, dental,					
optometry, chiropractic	3363	7.8%	5499	12.6%	63.5%
Home health services	120	0.3%	224	0.5%	86.7%
Other⁴	389	0.9%	195	0.4%	-49.9%
Total	43,230		43,537		0.7%

### **Grievance Decisions**

Table 2 provides an overview of the number and type of grievances carriers reviewed in 2008 and 2011. In 2008, there were 5,707 grievances, decreasing to 4,865 in 2011. While the number of adverse decisions remained steady (0.7 percent increase) between 2008 and 2011, the number of grievances decreased by 14.8 percent.

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<sup>&</sup>lt;sup>4</sup> Outpatient hospital services, education services, and transportation

In 2008, over half of all grievances were for inpatient hospital services and physician services, 37.9 percent and 20.5 percent, respectively. In 2011, data illustrates that grievances for these two services accounted for just less than 40 percent of all grievances. The percentage of grievances for physician services increased to 24.1 percent, while the percentage of grievances for inpatient hospital services decreased to only 15.3 percent.

While the number of grievances reported by carriers for emergency room services and mental health services are relatively small (59 and 213 in 2008 and 147 and 299 in 2011), the number of grievances for both services significantly increased between 2008 and 2011; by 149.2 percent and 40.4 percent, respectively. Over this same period, the number of grievances for podiatry, dental, optometry, and chiropractic services increased by 69.9 percent and the number of grievances for pharmacy services increased by 31.2%. Significant declines were noted in skilled nursing facility services, and physical therapy, occupational therapy, and speech therapy services. Just as the number of adverse decisions for these two categories of services decreased by 61.6 percent and 25.4 percent respectively since 2008, so did the grievances for these same two categories of services, 74.4 percent and 64.5 percent, respectively.

The number of grievances for services that fall under the "Other" category, which includes outpatient hospital services, education services and transportation, also increased by 804.3 percent in 2011, when compared to 2008. This increased is attributed to two companies, both of whom are owned by the same holding company (188 of the 208 grievances). Administration staff double checked with the companies about the accuracy of these numbers, in light of the fact that the grievances reported for this category outnumbered the number of adverse decisions. The companies maintained that the numbers were correct and attributed the higher grievance decision to adverse decision ratio to the decisions falling in different reporting years.

**Table 2: Grievances** 

	2008		2011		Percent Change 2008 to 2011
	Number	Percent	Number	Percent	
Inpatient hospital services	2163	37.9%	743	15.3%	-65.6%
Emergency room services	59	1.0%	147	3.0%	149.2%
Mental health services	213	3.7%	299	6.1%	40.4%
Physician services	1172	20.5%	1173	24.1%	0.09%
Laboratory, radiology					
services	597	10.5%	451	9.3%	-24.5%
Pharmacy services	554	9.7%	727	14.9%	31.2%
PT, OT, ST services					
(including inpatient rehab)	234	4.1%	83	1.7%	-64.5%
Skilled nursing facility	43	0.8%	11	0.2%	-74.4%
Durable medical equipment	143	2.5%	168	3.5%	17.5%
Podiatry, dental,					
optometry, chiropractic	495	8.7%	841	17.3%	69.9%
Home health services	11	0.2%	14	0.3%	27.3%
Other	23	0.4%	208	4.3%	804.3%
Total	5707		4865		-14.8%

Table 3 describes how the number of grievances received by carriers compares to the number of adverse decisions that carriers made in 2008 and 2011. Grievances decreased as a percentage of adverse decisions from 2008 to 2011 (13.2% to 11.2%). This appears to indicate that consumers were less likely to take advantage of the right to file a grievance in 2011 than in 2008.

Table 3: Grievances as a percent of adverse decisions

	2008	2011
Inpatient hospital services	12.9%	15.7%
Emergency room services	4.8%	41.5%
Mental health services	19.5%	36.7%
Physician services	19.3%	7.7%
Laboratory, radiology services	20.8%	6.4%
Pharmacy services	8.2%	14.4%
PT, OT, ST services (including		
inpatient rehab)	8.5%	4.1%
Skilled nursing facility	16.3%	10.9%
Durable medical equipment	9.5%	7.9%
Podiatry, dental, optometry,		
chiropractic	14.7%	15.3%
Home health services	9.2%	6.3%
Other	5.9%	106.7%
Total	13.2%	11.2%

Table 4 compares how carriers upheld their original decisions in 2008 and in 2011. More detailed information about grievance decisions for each carrier may be found in Appendices 2 and 3 for 2011. Carriers upheld adverse decisions 41.9 percent of the time in 2011 as compared to 53.1 percent in 2008, representing a decrease of 11.2 percent in carriers upholding their original adverse decision at the grievance level. This appears to indicate that carriers are becoming more likely to reverse their adverse decisions when a consumer files a grievance.

**Table 4: Grievance Decision** 

	2	2008	2011		
	Number	Percent	Number	Percent	
Carrier upheld adverse decision	3028	53.1%	2039	41.9%	
Carrier overturned adverse decision	2434	42.6%	2640	54.3%	
Carrier modified original adverse					
decision	245	4.3%	186	3.8%	
Total	5707		4865		

### Complaints

In 2011, the Administration entered into an agreement with the Maryland Department of Budget and Management to perform the external review for the medical necessity type complaints filed by State employees. This meant that beginning July 1, 2011, State employees could use the Administration's external review process for their medical necessity type complaints. Only 9 medical necessity type complaints were filed by State employees with the Administration in 2011.

Even with the additional ability to review State employee medical necessity type complaints in 2011, the number of complaints filed with the Administration decreased between 2008 and 2011. The Administration received 1022 complaints in 2008 and 825 complaints in 2011, representing a decrease of 19.3 percent. As summarized in Table 5, 36 percent of the complaints received in 2011 were outside of the Administration's jurisdiction, as were 26.4 percent of the complaints received in 2008. These non-jurisdiction cases included complaints filed by individuals covered under Medicare, Medicaid, the Federal Employee Health Benefit Plan, or under an employer group self-funded health plan; and contracts subject to the laws of states other than Maryland.

In 2008, the Administration modified or reversed the carrier's grievance decision (or the carrier reversed its own grievance decision during the course of the Administration's investigation) 54.7 percent of the time. In 2011, the data indicates that the Administration reversed or modified the carrier's grievance decision (or the carrier reversed or modified its own grievance decision during the investigation) 66.7 percent of

the time, representing an increase in reversals of 12 percent. All of the reversals of the carriers' grievance decisions resulted in more benefits for Maryland consumers.

In 2011, the Administration issued 8 Orders and Consent Orders based on the medical necessity complaints which it received and imposed \$14,500 in administrative penalties. During this same year, the Administration recovered \$509,089 for complainants. By comparison in 2008, the Administration issued 19 Orders and Consent Orders based on medical necessity complaints it received, imposed \$4,403 in administrative penalties and recovered \$815,338 for complainants. Since the enactment of the Appeals and Grievance law, the Administration has recovered more than \$6,500,000 for complainants. Summaries of the Orders and Consent Orders for 2011 are found in Appendix 9.

**Table 5: Complaints** 

	2008	2011	Percent
			Change
Total complaints received	1022	825	-19.3%
No Jurisdiction	270	297	10.0%
Withdrawn	2	2	0.0%
Insufficient Information	61	53	-13.1%
No action required	86	92	7.0%
Referred to HEAU	148	81	-45.3%
Complaints investigated by MIA	455	300	-34.1%
Percent of total complaints investigated by the MIA	44.5%	36.4%	-8.1%
Number of complaints carrier or MIA reversed or			
modified grievance decision	249	200	-19.7%
Percent of total complaints investigated by MIA where			
carrier or MIA reversed or modified grievance decision	54.7%	66.7%	12.0%

### **Conclusions**

Between 2008 and 2011, the number of adverse decisions increased by 0.7 percent, the number of grievance decisions decreased by 14.8 percent, and the number of medical necessity complaints investigated<sup>5</sup> by the Administration decreased by 19.7 percent.

For the four year period (2008 – 2011), three categories of services accounted for more than 60 percent of all adverse decisions: physician services, inpatient hospital services and pharmacy services. Between 2008 and 2011, there was a decrease in adverse decisions for the following six categories: (1) inpatient hospital services; (2) emergency room services; (3) mental health services; (4) pharmacy services; (5) physical therapy, occupational therapy and speech therapy services; and (6) skilled

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<sup>&</sup>lt;sup>5</sup> As set forth in Appendix 8, a number of the complaints received by the Appeals and Grievance unit can not be investigated by the staff of the Appeals and Grievance unit due to a variety of reasons including the complainant being covered under a contract that is not subject to the jurisdiction of the Maryland Insurance Administration, the complainant not previously exhausting the carrier's internal complaint process, the complainant withdrawing the complaint, and the complainant's refusal to provide a medical release.

nursing facility services. Between 2008 and 2011, there was an increase in adverse decisions for physician services, laboratory and radiology services, durable medical equipment, podiatry, dental, optometry and chiropractic services and home health services. Between 2008 and 2011, the largest decline in the number of adverse decisions was for inpatient hospital services and the largest increase in the number of adverse decisions was for physician services.

Grievances decreased as a percentage of adverse decisions from 2008 to 2011 (13.2% to 11.2%), suggesting that consumers were less likely to take advantage of the carriers' internal grievance process in 2011 than in 2008. When consumers did file grievances regarding an initial adverse decision, carriers overturned their adverse decision 54.3 percent of the time in 2011, compared to 42.6 percent in 2008. This continues to suggest that carriers are becoming more likely to reverse their adverse decision when a consumer files a grievance.

In 2011, the Administration achieved a carrier reversal percentage of 66.7 percent of complaints that were investigated by the Administration, compared to 54.7 percent in 2008. In 2010, that number was 62.1 percent. In 2011, the Administration recovered \$509,089 for complainants under the Appeals and Grievance Law. Since the Appeals and Grievance Law was enacted by the General Assembly, the Administration has recovered more than \$6,500,000.00 for complainants. The Appeals and Grievance Law remains an important protection for Maryland consumers, providing a fair and balanced process for resolving disputes regarding the medical necessity of proposed or delivered health care services.

	ADVERS	E DECISIONS	A INI	PATIENT	D EME	RGENCY
COMPANY	COMPANY	% OF ALL	HOSPITAL SERVICES		ROOM SERVICES	
NAME	TOTAL	COMPANIES	NUMBER	% TOTAL	NUMBER	% TOTAL
Aetna Health, Inc.	674	1.55%	442	65.6%	0	0.0%
Aetna Life Insurance Company	827	1.90%	508	61.4%	0	0.0%
American Republic Insurance Company	1	0.00%	0	0.0%	0	0.0%
Ameritas Life Insurance Corp.	166	0.38%	0	0.0%	0	0.0%
CareFirst BlueChoice, Inc.	12311	28.28%	240	1.9%	35	0.3%
CareFirst of Maryland, Inc.	5093	11.70%	155	3.0%	0	0.0%
CIGNA Healthcare of the Mid-Atlantic, Inc.	6	0.01%	2	33.3%	0	0.0%
Connecticut General Life Insurance Company	1108	2.54%	146	13.2%	0	0.0%
Coventry Health Care of Delaware, Inc.	2026	4.65%	651	32.1%	252	12.4%
Fidelity Security Life Insurance Company	2	0.00%	0	0.0%	0	0.0%
Golden Rule Insurance Company	11	0.03%	1	9.1%	0	0.0%
Graphic Arts Benefit Corporation	1	0.00%	0	0.0%	0	0.0%
Group Hospitalization & Medical Services, Inc.	8921	20.49%	206	2.3%	24	0.3%
Guarantee Trust Life Insurance Company	1	0.00%	0	0.0%	0	0.0%
Guardian Life Ins Company of America	662	1.52%	6	0.9%	0	0.0%
John Alden Life Insurance Company	4	0.01%	0	0.0%	0	0.0%
Kaiser Foundation Health Plan-Mid-Atlantic	901	2.07%	2	0.2%	0	0.0%
Kaiser Permanente Insurance Company	121	0.28%	8	6.6%	0	0.0%
Lincoln National Life Insurance Company	22	0.05%	0	0.0%	0	0.0%
MAMSI Life & Health Insurance Company	78	0.18%	23	29.5%	0	0.0%
MD-Individual Practice Association, Inc.	5171	11.88%	1708	33.0%	29	0.6%
Optimum Choice, Inc.	2008	4.61%	433	21.6%	14	0.7%
Reliance Standard Life Insurance Company	16	0.04%	0	0.0%	0	0.0%
Security Life Insurance Company of America	1	0.00%	0	0.0%	0	0.0%
Standard Insurance Company	1	0.00%	0	0.0%	0	0.0%
Sun Life Assurance Company of Canada	7	0.02%	0	0.0%	0	0.0%
Time Insurance Company	5	0.01%	2	40.0%	0	0.0%
Trustmark Life Insurance Company	1	0.0%	0	0.0%	0	0.0%
Union Security Insurance Company	24	0.06%	0	0.0%	0	0.0%
United Concordia Life and Health Insurance Company	1016	2.33%	0	0.0%	0	0.0%
UnitedHealthcare Insurance Company	1674	3.85%	162	9.7%	0	0.0%
UnitedHealthcare of the Mid-Atlantic, Inc.	677	1.56%	50	7.4%	0	0.0%
Total	43537	100.00%	4745	10.9%	354	0.8%

COMPANY	C. MENTAL H	EALTH SERVICES	D. PHYSICI	AN SERVICES	E. LABORATORY, RADIOLOGY SERVICES		
NAME	NUMBER	% TOTAL	NUMBER	% TOTAL	NUMBER	% TOTAL	
Aetna Health, Inc.	15	2.2%	163	24.2%	0	0.0%	
Aetna Life Insurance Company	33	4.0%	255	30.8%	0	0.0%	
American Republic Insurance Company	0	0.0%	0	0.0%	0	0.0%	
Ameritas Life Insurance Corp.	0	0.0%	0	0.0%	0	0.0%	
CareFirst BlueChoice, Inc.	287	2.3%	5360	43.5%	2813	22.8%	
CareFirst of Maryland, Inc.	49	1.0%	2236	43.9%	715	14.0%	
CIGNA Healthcare of the Mid-Atlantic, Inc.	0	0.0%	1	16.7%	3	50.0%	
Connecticut General Life Insurance Company	7	0.6%	50	4.5%	660	59.6%	
Coventry Health Care of Delaware, Inc.	0	0.0%	234	11.5%	107	5.3%	
Fidelity Security Life Insurance Company	0	0.0%	0	0.0%	0	0.0%	
Golden Rule Insurance Company	0	0.0%	2	18.2%	5	45.5%	
Graphic Arts Benefit Corporation	0	0.0%	1	100.0%	0	0.0%	
Group Hospitalization & Medical Services, Inc.	216	2.4%	3517	39.4%	910	10.2%	
Guarantee Trust Life Insurance Company	0	0.0%	1	100.0%	0	0.0%	
Guardian Life Ins Company of America	0	0.0%	37	5.6%	4	0.6%	
John Alden Life Insurance Company	0	0.0%	0	0.0%	1	25.0%	
Kaiser Foundation Health Plan-Mid-Atlantic	12	1.3%	427	47.4%	46	5.1%	
Kaiser Permanente Insurance Company	0	0.0%	17	14.0%	41	33.9%	
Lincoln National Life Insurance Company	0	0.0%	0	0.0%	0	0.0%	
MAMSI Life & Health Insurance Company	0	0.0%	39	50.0%	0	0.0%	
MD-Individual Practice Association, Inc.	35	0.7%	1528	29.5%	787	15.2%	
Optimum Choice, Inc.	5	0.2%	435	21.7%	279	13.9%	
Reliance Standard Life Ins Company	0	0.0%	0	0.0%	0	0.0%	
Security Life Insurance Company of America	0	0.0%	0	0.0%	0	0.0%	
Standard Insurance Company	0	0.0%	0	0.0%	0	0.0%	
Sun Life Assurance Company of Canada	0	0.0%	0	0.0%	0	0.0%	
Time Insurance Company	0	0.0%	0	0.0%	2	0.0%	
Trustmark Life Insurance Company	0	0.0%	1	100.0%	0	0.0%	
Union Security Insurance Company	0	0.0%	0	0.0%	0	0.0%	
United Concordia Life and Health Insurance Company	0	0.0%	0	0.0%	0	0.0%	
UnitedHealthcare Insurance Company	10	0.6%	792	47.3%	465	27.8%	
UnitedHealthcare of the Mid-Atlantic, Inc.	145	21.4%	217	32.1%	219	32.3%	
Total	814	1.9%	15313	35.2%	7057	16.2%	

COMPANY	F. PHARM	ACY SERVICES		ST SERVICES AT REHAB)	H. SKILLED NURS FAC, Sub Acute, Nurs Home		
NAME	NUMBER	% TOTAL	NUMBER	% TOTAL	NUMBER	% TOTAL	
Aetna Health, Inc.	0	0.0%	9	1.3%	45	6.7%	
Aetna Life Insurance Company	0	0.0%	2	0.2%	27	3.3%	
American Republic Insurance Company	0	0.0%	1	0.0%	0	0.0%	
Ameritas Life Insurance Corp.	0	0.0%	0	0.0%	0	0.0%	
CareFirst BlueChoice, Inc.	1850	15.0%	316	2.6%	1	0.0%	
CareFirst of Maryland, Inc.	374	7.3%	391	7.7%	0	0.0%	
CIGNA Healthcare of the Mid-Atlantic, Inc.	0	0.0%	0	0.0%	0	0.0%	
Connecticut General Life Insurance Company	184	16.6%	12	1.1%	0	0.0%	
Coventry Health Care of Delaware, Inc.	572	28.2%	55	2.7%	17	0.8%	
Fidelity Security Life Insurance Company	2	100.0%	0	0.0%	0	0.0%	
Golden Rule Insurance Company	0	0.0%	0	0.0%	0	0.0%	
Graphic Arts Benefits Corporation	0	0.0%	0	0.0%	0	0.0%	
Group Hospitalization & Medical Services, Inc.	1832	20.5%	334	3.7%	3	0.0%	
Guarantee Trust Life Insurance Company	0	0.0%	0	0.0%	0	0.0%	
Guardian Life Ins Company of America	86	13.0%	10	1.5%	0	0.0%	
John Alden Life Insurance Company	0	0.0%	0	0.0%	0	0.0%	
Kaiser Foundation Health Plan-Mid-Atlantic	0	0.0%	10	1.1%	3	0.3%	
Kaiser Permanente Insurance Company	0	0.0%	19	15.7%	0	0.0%	
Lincoln National Life Insurance Company	0	0.0%	0	0.0%	0	0.0%	
MAMSI Life & Health Insurance Company	0	0.0%	1	1.3%	0	0.0%	
MD-Individual Practice Association, Inc.	57	1.1%	344	6.7%	4	0.1%	
Optimum Choice, Inc.	4	0.2%	521	25.9%	0	0.0%	
Reliance Standard Life Insurance Company	0	0.0%	0	0.0%	0	0.0%	
Security Life Insurance Company of America	0	0.0%	0	0.0%	0	0.0%	
Standard Insurance Company	0	0.0%	0	0.0%	0	0.0%	
Sun Life Assurance Company of Canada	0	0.0%	0	0.0%	0	0.0%	
Time Insurance Company	0	0.0%	0	0.0%	0	0.0%	
Trustmark Life Insurance Company	0	0.0%	0	0.0%	0	0.0%	
Union Security Insurance Company	0	0.0%	0	0.0%	0	0.0%	
United Concordia Life and Health Insurance Company	0	0.0%	0	0.0%	0	0.0%	
UnitedHealthcare Insurance Company	74	4.4%	17	1.0%	1	0.1%	
UnitedHealthcare of the Mid-Atlantic, Inc.	16	2.4%	7	1.0%	0	0.0%	
Total	5051	11.6%	2049	4.7%	101	0.2%	

	I. DURABLE MEDICAL EQUIPMENT SERVICES J. PODIATRY, DENTAL, OPTOMETRY, CHIRO			K. HOME SERV		*L. OTHER		
COMPANY NAME	NUMBER	%TOTAL	NUMBER	% TOTAL	NUMBER	% TOTAL	NUMBER	% TOTAL
Aetna Health, Inc.	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Aetna Life Insurance Company	2	0.2%	0	0.0%	0	0.0%	0	0.0%
American Republic Insurance Company	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Ameritas Life Insurance Corp.	0	0.0%	166	0.0%	0	0.0%	0	0.0%
CareFirst BlueChoice, Inc.	523	4.2%	818	6.6%	27	0.2%	41	0.3%
CareFirst of Maryland, Inc.	254	5.0%	915	18.0%	1	0.0%	3	0.1%
CIGNA Healthcare of the Mid-Atlantic, Inc.	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Connecticut General Life Insurance Co.	11	1.0%	36	3.2%	2	0.2%	0	0.0%
Coventry Health Care of Delaware, Inc.	127	6.3%	4	0.2%	7	0.3%	0	0.0%
Golden Rule Insurance Company	0	0.0%	1	9.1%	0	0.0%	2	18.2%
Graphic Arts Benefit Corporation	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Group Hospitalization & Medical Serv., Inc.	303	3.4%	1563	17.5%	12	0.1%	1	0.0%
Guarantee Trust Life Insurance Company	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Guardian Life Insurance Co. of America	12	1.8%	499	75.4%	0	0.0%	8	1.2%
John Alden Life Insurance Company	0	0.0%	3	75.0%	0	0.0%	0	0.0%
Kaiser Foundation Health Plan-Mid-Atlantic	137	15.2%	238	26.4%	6	0.7%	20	2.2%
Kaiser Permanente Insurance Company	6	5.0%	0	0.0%	0	0.0%	30	24.8%
Lincoln National Life Insurance Company	0	0.0%	22	100.0%	0	0.0%	0	0.0%
MAMSI Life & Health Insurance Company	9	11.5%	3	3.8%	3	3.8%	0	0.0%
MD-Individual Practice Association, Inc.	471	9.1%	46	0.9%	99	1.9%	63	1.2%
Optimum Choice, Inc.	184	9.2%	95	4.7%	31	1.5%	7	0.3%
Reliance Standard Life Insurance Company	0	0.0%	16	100.0%	0	0.0%	0	0.0%
Security Life Insurance Co. of America	0	0.0%	1	100.0%	0	0.0%	0	0.0%
Sun Life Assurance Company of Canada	0	0.0%	0	0.0%	0	0.0%	7	100.0%
Standard Insurance Company	0	0.0%	1	0.0%	0	0.0%	0	0.0%
Time Insurance Company	0	0.0%	1	20.0%	0	0.0%	0	0.0%
Trustmark Life Insurance Company	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Union Security Insurance Company	0	0.0%	24	100.0%	0	0.0%	0	0.0%
United Concordia Life and Health Ins. Co.	0	0.0%	1016	100.0%	0	0.0%	0	0.0%
UnitedHealthcare Insurance Company	87	5.2%	20	1.2%	35	2.1%	11	0.0%
UnitedHealthcare of the Mid-Atlantic, Inc.	9	1.3%	11	1.6%	1	0.1%	2	0.3%
Total	2135	4.9%	5499	12.6%	224	0.5%	195	0.4%

<sup>\*</sup>L=Outpatient Hospital Services, Education Services, and Transportation

### **APPENDIX 2 GRIEVANCE DECISIONS BY CARRIER COMPANY NAME GRIEVANCES FILED** A. INPATIENT HOSPITAL **B. EMERGENCY ROOM SERVICES SERVICES** NUMBER % TOTAL NUMBER % TOTAL **COMPANY** % OF ALL TOTAL **COMPANIES** 47 Aetna Health, Inc. 1.0% 5 10.6% 0 0.0% 4 0 Aetna Life Insurance Company 68 1.4% 5.9% 0.0% American General Life Ins. Co. of Delaware 0.0% 0 0.0% 0 0.0% 1 0.0% 0 0.0% 0 American Republic Insurance Company 1 0.0% Ameritas Life Insurance Corp. 40 0.8% 0 0.0% 0 0.0% 203 0.7% 8 CareFirst BlueChoice, Inc. 1136 23.4% 17.9% 408 8.4% 58 14.2% 0 0.0% CareFirst of Maryland, Inc. CIGNA Healthcare of the Mid-Atlantic, Inc. 0.0% 100.0% 0 0.0% Connecticut General Life Insurance Company 80 1.6% 38 47.5% 0 0.0% Coventry Health Care of Delaware, Inc. 576 11.8% 283 49.1% 69 12.0% Fidelity Security Life Insurance Company 0.0% 0.0% 0.0% 2 0 0 Golden Rule Insurance Company 11 0.2% 9.1% 0 0.0% 1 27 **Graphic Arts Benefit Corporation** 0.6% 0 0.0% 0 0.0% Group Hospitalization & Medical Services, Inc. 525 68 13.0% 8 1.5% 10.8% Guarantee Trust Life Insurance Company 0.0% 0 0 1 0.0% 0.0% Guardian Life Insurance Company of America 239 4.9% 1 0 0.0% 0.4% Kaiser Foundation Health Plan-Mid-Atlantic 112 2.3% 2 0 1.8% 0.0% Kaiser Permanente Insurance Company 28 0.6% 8 28.6% 0 0.0% Lincoln National Life Insurance Company 2 0.0% 0 0.0% 0 0.0% 0.0% 0 0.0% 0 Madison National Life Insurance Company 1 0.0% 100.0% 2 0.0% 2 0 MAMSI Life & Health Insurance Company 0.0% 43 5.8% 45 MD-Individual Practice Association, Inc. 745 15.3% 6.0% 223 23 10.3% 7.2% Optimum Choice, Inc. 4.6% 16 Pan-American Life Insurance Company 0.0% 0.0% 0.0% 2 0 0 Reliance Standard Life Insurance Company 4 0.1% 0 0.0% 0 0.0% Security Life Insurance Company of America 0.0% 0 0.0% 0 0.0% 1 Standard Security Life Insurance Co. of NY 10 0.2% 10.0% 1 10.0% 1 Standard Insurance Company 1 0.0% 0 0.0% 0 0.0% 0.0% 0 0.0% 0 0.0% Time Insurance Company 1 24 0.5% 0 0.0% 0 0.0% Union Security Insurance Company United Concordia Life & Health Insurance Co. 302 6.2% 0 0.0% 0 0.0% 0.0% 0 0 United States Life Ins. Co. In the City of NY 1 0.0% 0.0% United HealthCare Insurance Company 150 3.1% 1 0.7% 0 0.0% 1.9% 0 0.0% United HealthCare of the Mid-Atlantic, Inc. 93 1 1.1% TOTAL 743 15.3% 147 3.0% 4865 100.0%

APPENDIX 2 GRIEVANCE DECISIONS BY CARRIER									
COMPANY NAME	C. MENTAL HEALTH SERVICES		D. PHYSICIA	N SERVICES	E. LABORATORY, RADIOLOGY SERVICES				
	NUMBER	% TOTAL	NUMBER	% TOTAL	NUMBER	% TOTAL			
Aetna Health, Inc.	1	2.1%	19	40.4%	19	40.4%			
Aetna Life Insurance Company	11	16.2%	19	27.9%	19	27.9%			
American General Life Ins. Co. of Delaware	0	0.0%	0	0.0%	0	0.0%			
American Republic Insurance Company	0	0.0%	0	0.0%	0	0.0%			
Ameritas Life Insurance Corp.	0	0.0%	0	0.0%	0	0.0%			
CareFirst BlueChoice, Inc.	144	12.7%	322	28.3%	322	28.3%			
CareFirst of Maryland, Inc.	18	4.4%	85	20.8%	85	20.8%			
CIGNA Healthcare of the Mid-Atlantic, Inc.	0	0.0%	0	0.0%	0	0.0%			
Connecticut General Life Insurance Company	1	1.3%	20	25.0%	20	25.0%			
Coventry Health Care of Delaware, Inc.	0	0.0%	73	12.7%	73	12.7%			
Fidelity Security Life Insurance Company	0	0.0%	0	0.0%	0	0.0%			
Golden Rule Insurance Company	0	0.0%	2	18.2%	2	18.2%			
Graphic Arts Benefit Corporation	1	3.7%	25	92.6%	25	92.6%			
Group Hospitalization & Medical Services, Inc.	35	6.7%	108	20.6%	108	20.6%			
Guarantee Trust Life Insurance Company	0	0.0%	1	100.0%	1	100.0%			
Guardian Life Insurance Company of America	0	0.0%	4	1.7%	4	1.7%			
Kaiser Foundation Health Plan-Mid-Atlantic	14	12.5%	54	48.2%	54	48.2%			
Kaiser Permanente Insurance Company	0	0.0%	3	10.7%	3	10.7%			
Lincoln National Life Insurance Company	0	0.0%	0	0.0%	0	0.0%			
Madison National Life Insurance Company	0	0.0%	0	0.0%	0	0.0%			
MAMSI Life & Health Insurance Company	0	0.0%	0	0.0%	0	0.0%			
MD-Individual Practice Association, Inc.	10	1.3%	306	41.1%	306	41.1%			
Optimum Choice, Inc.	2	0.9%	78	35.0%	78	35.0%			
Pan-American Life Insurance Company	0	0.0%	0	0.0%	0	0.0%			
Reliance Standard Life Insurance Company	0	0.0%	0	0.0%	0	0.0%			
Security Life Insurance Company of America	0	0.0%	0	0.0%	0	0.0%			
Standard Security Life Insurance Co. of NY	0	0.0%	4	40.0%	4	40.0%			
Standard Insurance Company	0	0.0%	0	0.0%	0	0.0%			
Time Insurance Company	0	0.0%	0	0.0%	0	0.0%			
Union Security Insurance Company	0	0.0%	0	0.0%	0	0.0%			
United Concordia Life & Health Insurance Co.	0	0.0%	0	0.0%	0	0.0%			
United States Life Ins. Co. In the City of NY	0	0.0%	0	0.0%	0	0.0%			
United HealthCare Insurance Company	5	3.3%	35	23.3%	35	23.3%			
United HealthCare of the Mid-Atlantic, Inc.	57	61.3%	15	16.1%	15	16.1%			
TOTAL	299	6.1%	1173	24.1%	1173	24.1%			

APPENDIX 2 GRIEVANCE DECISIONS BY CARRIER									
COMPANY NAME	F. PHARMACY SERVICES		G. PT. OT, S1	T SERVICES	H. SKILLED NURSING FACILITY, Sub Acute, Nursing Home				
	NUMBER	% TOTAL	NUMBER	% TOTAL	NUMBER	% TOTAL			
Aetna Health, Inc.	7	14.9%	0	0.0%	1	2.1%			
Aetna Life Insurance Company	7	10.3%	1	1.5%	0	0.0%			
American General Life Ins. Co. of Delaware	0	0.0%	0	0.0%	0	0.0%			
American Republic Insurance Company	0	0.0%	1	0.0%	0	0.0%			
Ameritas Life Insurance Corp.	0	0.0%	0	0.0%	0	0.0%			
CareFirst BlueChoice, Inc.	250	22.0%	15	1.3%	4	0.4%			
CareFirst of Maryland, Inc.	33	8.1%	4	1.0%	2	0.5%			
CIGNA Healthcare of the Mid-Atlantic, Inc.	0	0.0%	0	0.0%	0	0.0%			
Connecticut General Life Insurance Company	7	8.8%	1	1.3%	1	1.3%			
Coventry Health Care of Delaware, Inc.	27	4.7%	30	5.2%	2	0.3%			
Fidelity Security Life Insurance Company	2	100.0%	0	0.0%	0	0.0%			
Golden Rule Insurance Company	0	0.0%	0	0.0%	0	0.0%			
Graphic Arts Benefit Corporation	0	0.0%	0	0.0%	0	0.0%			
Group Hospitalization & Medical Services, Inc.	168	32.0%	6	1.1%	0	0.0%			
Guarantee Trust Life Insurance Company	0	0.0%	0	0.0%	0	0.0%			
Guardian Life Insurance Company of America	32	13.4%	4	1.7%	0	0.0%			
Kaiser Foundation Health Plan-Mid-Atlantic	0	0.0%	7	6.3%	1	0.9%			
Kaiser Permanente Insurance Company	0	0.0%	5	17.9%	0	0.0%			
Lincoln National Life Insurance Company	0	0.0%	0	0.0%	0	0.0%			
Madison National Life Insurance Company	0	0.0%	0	0.0%	0	0.0%			
MAMSI Life & Health Insurance Company	0	0.0%	0	0.0%	0	0.0%			
MD-Individual Practice Association, Inc.	101	13.6%	5	0.7%	0	0.0%			
Optimum Choice, Inc.	6	2.7%	1	0.4%	0	0.0%			
Pan-American Life Insurance Company	0	0.0%	0	0.0%	0	0.0%			
Reliance Standard Life Insurance Company	0	0.0%	0	0.0%	0	0.0%			
Security Life Insurance Company of America	0	0.0%	0	0.0%	0	0.0%			
Standard Security Life Insurance Co. of NY	0	0.0%	0	0.0%	0	0.0%			
Standard Insurance Company	0	0.0%	0	0.0%	0	0.0%			
Time Insurance Company	0	0.0%	0	0.0%	0	0.0%			
Union Security Insurance Company	0	0.0%	0	0.0%	0	0.0%			
United Concordia Life & Health Insurance Co.	0	0.0%	0	0.0%	0	0.0%			
United States Life Ins. Co. In the City of NY	0	0.0%	0	0.0%	0	0.0%			
United HealthCare Insurance Company	74	49.3%	3	2.0%	0	0.0%			
United HealthCare of the Mid-Atlantic, Inc.	13	14.0%	0	0.0%	0	0.0%			
TOTAL	727	14.9%	83	1.7%	11	0.2%			

APPENDIX 2 GRIEVANCE DECISIONS BY CARRIER											
COMPANY NAME	I. DURABLE EQUIPMENT	MEDICAL	J. PODIATR OPTOMETRY, C		K. HOME HEAL	K. HOME HEALTH SERVICES					
	NUMBER	% TOTAL	NUMBER	% TOTAL	NUMBER	% TOTAL					
Aetna Health, Inc.	4	8.5%	6	12.8%	0	0.0%					
Aetna Life Insurance Company	0	0.0%	10	14.7%	0	0.0%					
American General Life Ins. Co. of Delaware	0	0.0%	0	0.0%	0	0.0%					
American Republic Insurance Company	0	0.0%	0	0.0%	0	0.0%					
Ameritas Life Insurance Corp.	0	0.0%	40	100.0%	0	0.0%					
CareFirst BlueChoice, Inc.	24	2.1%	17	1.5%	3	0.3%					
CareFirst of Maryland, Inc.	5	1.2%	131	32.1%	0	0.0%					
CIGNA Healthcare of the Mid-Atlantic, Inc.	0	0.0%	0	0.0%	0	0.0%					
Connecticut General Life Insurance Company	2	2.5%	8	10.0%	1	1.3%					
Coventry Health Care of Delaware, Inc.	38	6.6%	12	2.1%	6	1.0%					
Fidelity Security Life Insurance Company	0	0.0%	0	0.0%	0	0.0%					
Golden Rule Insurance Company	0	0.0%	1	9.1%	0	0.0%					
Graphic Arts Benefit Corporation	0	0.0%	1	3.7%	0	0.0%					
Group Hospitalization & Medical Services, Inc.	13	2.5%	63	12.0%	0	0.0%					
Guarantee Trust Life Insurance Company	0	0.0%	0	0.0%	0	0.0%					
Guardian Life Insurance Company of America	4	1.7%	194	81.2%	0	0.0%					
Kaiser Foundation Health Plan-Mid-Atlantic	11	9.8%	13	11.6%	1	0.9%					
Kaiser Permanente Insurance Company	0	0.0%	0	0.0%	0	0.0%					
Lincoln National Life Insurance Company	0	0.0%	2	100.0%	0	0.0%					
Madison National Life Insurance Company	0	0.0%	1	100.0%	0	0.0%					
MAMSI Life & Health Insurance Company	0	0.0%	0	0.0%	0	0.0%					
MD-Individual Practice Association, Inc.	36	4.8%	2	0.3%	3	0.4%					
Optimum Choice, Inc.	23	10.3%	2	0.9%	0	0.0%					
Pan-American Life Insurance Company	0	0.0%	0	0.0%	0	0.0%					
Reliance Standard Life Insurance Company	0	0.0%	4	100.0%	0	0.0%					
Security Life Insurance Company of America	0	0.0%	1	100.0%	0	0.0%					
Standard Security Life Insurance Co. of NY	0	0.0%	0	0.0%	0	0.0%					
Standard Insurance Company	0	0.0%	1	0.0%	0	0.0%					
Time Insurance Company	1	100.0%	0	0.0%	0	0.0%					
Union Security Insurance Company	0	0.0%	24	100.0%	0	0.0%					
United Concordia Life & Health Insurance Co.	0	0.0%	302	100.0%	0	0.0%					
United States Life Ins. Co. In the City of NY	0	0.0%	0	0.0%	0	0.0%					
United HealthCare Insurance Company	7	4.7%	4	2.7%	0	0.0%					
United HealthCare of the Mid-Atlantic, Inc.	0	0.0%	2	2.2%	0	0.0%					
TOTAL	168	3.5%	841	17.3%	14	0.3%					

## APPENDIX 2 GRIEVANCE DECISIONS BY CARRIER

COMPANY NAME	L. OTI	HER
	(Outpatient Hos Education Se Transpor	pital Services, ervices and rtation)
	NUMBER	% TOTAL
Aetna Health, Inc.	0	0.0%
Aetna Life Insurance Company	0	0.0%
American General Life Ins. Co. of Delaware	1	0.0%
American Republic Insurance Company	0	0.0%
Ameritas Life Insurance Corp.	0	0.0%
CareFirst BlueChoice, Inc.	0	0.0%
CareFirst of Maryland, Inc.	2	0.5%
CIGNA Healthcare of the Mid-Atlantic, Inc.	0	0.0%
Connecticut General Life Insurance Company	0	0.0%
Coventry Health Care of Delaware, Inc.	0	0.0%
Fidelity Security Life Insurance Company	0	0.0%
Golden Rule Insurance Company	2	18.2%
Graphic Arts Benefit Corporation	0	0.0%
Group Hospitalization & Medical Services, Inc.	1	0.2%
Guarantee Trust Life Insurance Company	0	0.0%
Guardian Life Insurance Company of America	0	0.0%
Kaiser Foundation Health Plan-Mid-Atlantic	3	2.7%
Kaiser Permanente Insurance Company	8	28.6%
Lincoln National Life Insurance Company	0	0.0%
Madison National Life Insurance Company	0	0.0%
MAMSI Life & Health Insurance Company	0	0.0%
MD-Individual Practice Association, Inc.	148	19.9%
Optimum Choice, Inc.	40	17.9%
Pan-American Life Insurance Company	0	0.0%
Reliance Standard Life Insurance Company	0	0.0%
Security Life Insurance Company of America	0	0.0%
Standard Security Life Ins. Co. of New York	0	0.0%
Standard Insurance Company	0	0.0%
Time Insurance Company	0	0.0%
Union Security Insurance Company	0	0.0%
United Concordia Life & Health Insurance Co.	0	0.0%
United States Life Ins. Co. In the City of NY	1	100.0%
United HealthCare Insurance Company	2	1.3%
United HealthCare of the Mid-Atlantic, Inc.	0	0.0%
TOTAL	208	4.3%

# APPENDIX 3 DISPOSITION OF CARRIER GRIEVANCE DECISIONS

	GRIEVAN	CES FILED	ORIGINAL DECISION OF INSURANCE COMPANY WAS						
COMPANY	COMPANY	% OF ALL	UPHE	LD	OVER	RTURNED	МО	DIFIED	
				%					
NAME	TOTAL	COMPANIES	NUMBER	TOTAL	NUMBER	% TOTAL	NUMBER	% TOTAL	
Aetna Health, Inc.	47	1.0%	22	46.8%	23	48.9%	2	4.3%	
Aetna Life Insurance Company	68	1.4%	40	58.8%	26	38.2%	2	2.9%	
American Republic Insurance Co.	1	0.0%	1	100.0%	0	0.0%	0	0.0%	
American General Life Ins. Co. of									
DE	1	0.0%	1	100.0%	0	0.0%	0	0.0%	
Ameritas Life Insurance Corp.	40	0.8%	20	50.0%	17	42.5%	3	7.5%	
CareFirst BlueChoice, Inc.	1136	23.4%	357	31.4%	753	66.3%	26	2.3%	
CareFirst of Maryland, Inc.	408	8.4%	125	30.6%	268	65.7%	15	3.7%	
CIGNA Healthcare of the Mid-									
Atlantic, Inc.	1	0.0%	1	100.0%	0	0.0%	0	0.0%	
Connecticut General Life Ins. Co.	80	1.6%	52	65.0%	28	35.0%	0	0.0%	
Coventry Health Care of									
Delaware, Inc.	576	11.8%	375	65.1%	201	34.9%	0	0.0%	
Fidelity Security Life Ins. Co.	2	0.0%	1	50.0%	1	50.0%	0	0.0%	
Golden Rule Insurance Company	11	0.2%	8	72.7%	3	27.3%	0	0.0%	
Graphic Arts Benefit Corporation	27	0.6%	19	70.4%	7	25.9%	1	3.7%	
Group Hospitalization & Medical									
Services, Inc.	525	10.8%	146	27.8%	365	69.5%	14	2.7%	
Guarantee Trust Life Ins. Co.	1	0.0%	1	100.0%	0	0.0%	0	0.0%	
Guardian Life Ins. Co. of America	239	4.9%	80	33.5%	62	25.9%	97	40.6%	
Kaiser Foundation Health Plan-									
Mid-Atlantic	112	2.3%	59	52.7%	53	47.3%	0	0.0%	
Kaiser Permanente Insurance Co.	28	0.6%	14	50.0%	14	50.0%	0	0.0%	
Lincoln National Life Ins. Co.	2	0.0%	1	50.0%	1	50.0%	0	0.0%	
Madison National Life Ins. Co.	1	0.0%	1	100.0%	0	0.0%	0	0.0%	
MAMSI Life & Health Ins. Co.	2	0.0%	2	100.0%	0	0.0%	0	0.0%	
MD-Individual Practice									
Association, Inc.	745	15.3%	289	38.8%	453	60.8%	3	0.4%	

### **APPENDIX 3 DISPOSITION OF CARRIER GRIEVANCE DECISIONS GRIEVANCES FILED** ORIGINAL DECISION OF INSURANCE COMPANY WAS... **COMPANY** % OF ALL **UPHELD OVERTURNED** MODIFIED **COMPANY** % % % **TOTAL NUMBER TOTAL TOTAL** NAME **TOTAL** COMPANIES **NUMBER NUMBER** Optimum Choice, Inc. 223 4.6% 99 44.4% 55.6% 0.0% 124 0 2 2 100.0% 0 0.0% 0 Pan-American Life Insurance Co. 0.0% 0.0% 75.0% Reliance Standard Life Ins. Co. 0 4 0.1% 3 1 25.0% 0.0% 0.0% Security Life Ins. Co. of America 1 0.0% 1 100.0% 0 0 0.0% 1 0 Standard Insurance Company 0.0% 1 100.0% 0 0.0% 0.0% Standard Security Life Ins. Co. In 10 0.2% 8 80.0% 2 20.0% 0 the City of New York 0.0% 1 1 0 0 **Time Insurance Company** 0.0% 100.0% 0.0% 0.0% Union Security Insurance Co. 6 7 29.2% 24 25.0% 11 45.8% 0.5% United Concordia Life & Health Insurance Company 302 6.2% 136 45.0% 153 50.7% 13 4.3% United States Life Ins. Co. In the 0.0% 0.0% 0 City of NY 1 100.0% 0 0.0% 1 UnitedHealthcare Insurance Co. 150 3.1% 90 60.0% 59 39.3% 1 0.7% UnitedHealthcare of the Mid-93 81.7% 2.2% Atlantic, Inc. 1.9% 76 15 16.1% Total 4865 100% 2039 41.9% 2640 54.3% 186 3.8%

# APPENDIX 4 GRIEVANCE DECISIONS BY CARRIER FOR HOSPITAL LENGTH OF STAY ("LOS")

COMPANY*	HOSPITAL LOS	HOSPITAL LOS	UPH	ELD	OVERT	URNED	MODIFIED		
NAME	TOTAL*	OUTCOME**	Number	Percent	Number	Percent	Number	Percent	
Aetna Life Insurance Company	4	4	3	75.00%	1	25.00%	0	0.00%	
Aetna Health, Inc.	4	4	2	50.00%	1	25.00%	1	25.00%	
CareFirst BlueChoice, Inc.	241	104	72	69.23%	26	25.00%	6	5.77%	
CareFirst of Maryland, Inc.	65	40	29	72.50%	8	20.00%	3	7.50%	
CIGNA Healthcare of the Mid-Atlantic, Inc.	1	1	1	100.00%	0	0.00%	0	0.00%	
Connecticut General Life Insurance Co.	34	21	9	42.86%	12	57.14%	0	0.00%	
Coventry Health Care of Delaware, Inc.	69	19	11	57.89%	8	42.11%	0	0.00%	
Group Hospitalization & Medical Services, Inc.	66	34	23	67.65%	8	23.53%	3	8.82%	
Kaiser Foundation Health Plan-Mid- Atlantic	11	11	9	81.82%	2	18.18%	0	0.00%	
Kaiser Permanente Insurance Company	6	4	4	100.00%	0	0.00%	0	0.00%	
MAMSI Life & Health Insurance Company	1	1	1	100.00%	0	0.00%	0	0.00%	
MD-Individual Practice Association, Inc.	15	11	4	36.36%	6	54.55%	1	9.09%	
Optimum Choice, Inc.	19	9	8	88.89%	1	11.11%	0	0.00%	
Standard Security Life Ins. in the City of New York	1	1	1	100.00%	0	0.00%	0	0.00%	
UnitedHealthcare Insurance Company	2	2	1	50.00%	1	50.00%	0	0.00%	
UnitedHealthcare of the Mid-Atlantic, Inc.	16	16	13	81.25%	3	18.75%	0	0.00%	

<sup>\*</sup> This chart only includes those carriers who received grievances involving hospital length of stay during calendar year 2011.

<sup>\*\*</sup> Represents the number of grievances that were resolved in calendar year 2011.

# APPENDIX 5 TIME FRAME FOR RENDERING A GRIEVANCE DECISION BY CARRIER EMERGENCY CASES

COMPANY**	EMERGENCY CASES - RESOLUTION TIME*								
NAME	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter					
CareFirst BlueChoice, Inc.	24	24	24	24					
CareFirst of Maryland, Inc.	24	24	24	24					
Connecticut General Life Insurance Co.	0	0	72.2	22					
Coventry Health Care of Delaware, Inc.	6	0.5	0	0					
Group Hospitalization & Medical Services, Inc.	24	24	24	24					
Kaiser Foundation Health Plan-Mid- Atlantic	22	20	13	20					
MD-Individual Practice Association, Inc.	24	0	0	56					

<sup>\*\*</sup> This report only includes carriers who had grievances which were considered emergency cases during calendar year 2011.

<sup>\*</sup> Reported as hours

# APPENDIX 6 TIME FRAME FOR RENDERING A GRIEVANCE DECISION BY CARRIER, NON-EMERGENCY CASES

COMPANY	NON-EME	RGENCY CASE	S - RESOLUT	ION TIME*
NAME	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
Aetna Health, Inc.	20.7	16.6	16.8	15
Aetna Life Insurance Company	12.7	27.4	19.2	19.2
Ameritas Life Insurance Company	15	18	9.2	9.8
American Republic Insurance Company	0	37	0	0
CareFirst BlueChoice, Inc.	43.2	40.6	39.6	34
CareFirst of Maryland, Inc.	70.4	86.7	77.4	75.3
CIGNA Healthcare of the Mid-Atlantic, Inc.	0	1	0	0
Connecticut General Life Insurance Company	21	24.8	25	29
Coventry Health Care of Delaware, Inc.	24.8	26	0	0
Dental Benefit Providers of Illinois, Inc.	2	2	2	2
Fidelity Security Life Insurance Company	0	8	0	0
Golden Rule Insurance Company	18	14	20	13
Group Dental Service of Maryland, Inc.	11.5	11.2	14.5	12
Group Hospitalization & Medical Services, Inc.	48.4	43	41.4	48.1
Guarantee Trust Life Insurance Company	0	0	0	1
Guardian Life Insurance Company of America	5.1	5.4	1	1.8
HumanaDental Insurance Company	28	56	33	0
John Alden Life Insurance Company	24	0	12	12
Kaiser Foundation Health Plan-Mid-Atlantic	15	26	23	24
Kaiser Permanente Insurance Company	0	0	0	6.3
MAMSI Life & Health Insurance Company	26	0	0	0
Madison National Life Insurance Company, Inc.	0	0	0	8
MD-Individual Practice Association, Inc.	24	28.7	29	19
Metropolitan Life Insurance Company	13.4	12.6	12.6	13.1
Optimum Choice, Inc.	22	22.2	18	33
Pan-American Life Insurance Company	2	0	0	1
Reliance Standard Life Insurance Company	13	17	18	16
Standard Security Life Insurance Co. of New York	30	0	0	0

# APPENDIX 6 TIME FRAME FOR RENDERING A GRIEVANCE DECISION BY CARRIER, NON-EMERGENCY CASES

COMPANY	NON-EMERGENCY CASES – RESOLUTION TIME*									
NAME	1 <sup>ST</sup> Quarter	2 <sup>ND</sup> Quarter	3 <sup>RD</sup> Quarter	4 <sup>™</sup> Quarter						
Time Insurance Company	30	0	0	0						
Union Security Insurance Company	31	64	76.2	86.2						
United Concordia Life and Health Insurance Co.	9	7.1	7	6						
UnitedHealthcare Insurance Company	29	25.2	29	24						
UnitedHealthcare of the Mid-Atlantic, Inc.	20	13.5	20	12						

<sup>\*</sup>Reported as Calendar Days

# APPENDIX 7 INTERNAL GRIEVANCES FILED CONSIDERED EMERGENCY CASES AS REPORTED BY CARRIER

COMPANY*	*TOTAL COMPANY* NUMBER OF		UPHELD		OVERT	URNED	MODIFIED	
NAME	"EMERGENCIES" CASES	OUTCOME**	Number	Percent	Number	Percent	Number	Percent
CareFirst BlueChoice, Inc.	36	36	22	61.1%	14	38.9%	0	0.0%
CareFirst of Maryland, Inc.	2	2	2	100.0%	0	0.0%	0	0.0%
Connecticut General Life Insurance Company	2	2	1	50.0%	1	50.0%	0	0.0%
Coventry Health Care of Delaware, Inc.	2	2	2	100.0%	0	0.0%	0	0.0%
Group Hospitalization & Medical Services, Inc.	15	15	12	80.0%	3	20.0%	0	0.0%
Kaiser Foundation Health Plan- Mid-Atlantic	24	20	12	60.0%	8	40.0%	0	0.0%
MD-Individual Practice Association, Inc.	7	7	2	28.6%	5	71.4%	0	0.0%
Optimum Choice, Inc.	3	3	3	100.0%	0	0.0%	0	0.0%
Standard Security Life Ins. Co. of NY	2	2	2	100.0%	0	0.0%	0	0.0%
Total	93	89	58	65.17%	31	34.83%	0	0.00%

<sup>\*</sup>This chart only includes carriers who had grievances which were considered emergency cases during calendar year 2011.

<sup>\*\*</sup>Represents the emergency cases that were resolved in calendar year 2011.

### APPENDIX 8 ADMINISTRATION COMPLAINTS

### Appeals and Grievance Statistics Totals for Complaints Filed January 1, 2011 – December 31, 2011

COMPLAINTS FILED		825
NO JURISDICTION	2	297
Referred to DOL (ERISA)	114	<del></del>
Referred to OPM (FEHBP)	57	
Referred to Medicaid	21	
Referred to Medicare	14	
Referred to Insurance Department		
in Another State	70	
Referred to Other*	21	
*Includes complaints referred to Workers		
Compensation Commissioner and Other State Agencies		
COMPLAINT WITHDRAWN		2
INSUFFICIENT INFORMATION		<u>53</u>
No Action Required		92
Includes cases transferred to Complaint Unit (non-medical	necessity of	complaints),
Duplicate file, Advised Complainant, Inquiries		
ADVERSE DECISION		381
Referred to HEAU to		
Exhaust Internal Remedy	81	
MIA Conducted Investigation:	300	
Carrier Reversed Itself		
During Investigation	143	
Carrier Upheld by MIA	100	
Carrier Reversed by MIA	<u>42</u>	
Decision Modified Carrier Upheld in Part/		
Carrier Reversed in Part	<u> 15</u>	

**Administration Complaints (Continued)** 

Administration complaints		,	_		Car	_		rier	Car Reve	ersed	
	COMP	LAINTS	Car	rier	Revers	sed by	Modif	Modified by		Itself During	
	INVEST	IGATED	Upheld by MIA MIA		MIA		<b>Investigation</b>				
Carrier	Total	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	
Aetna Health, Inc.	8	2.7%	1	12.5%	1	12.5%	0	0.0%	6	75.0%	
Aetna Life Insurance Company	15	5.0%	7	46.7%	1	6.7%	0	0.0%	7	46.7%	
American Republic Insurance Co.	1	0.3%	1	100.0%	0	0.0%	0	0.0%	0	0.0%	
Carefirst BlueChoice, Inc.	54	18.0%	13	24.1%	9	16.8%	4	7.4%	28	51.9%	
Carefirst of Maryland, Inc.	25	8.3%	6	24.0%	2	8.0%	2	8.0%	15	60.0%	
Cigna Dental Health of Maryland, Inc.	1	0.3%	0	0.0%	0	0.0%	0	0.0%	1	100.0%	
Connecticut General Life Ins. Co.	3	1.0%	3	100.0%	0	0.0%	0	0.0%	0	0.0%	
Coventry Health and Life Ins. Co.	11	3.7%	3	27.3%	0	0.0%	1	9.1%	7	63.6%	
Coventry Health Care of DE, Inc.	33	11.0%	9	27.3%	10	30.3%	3	9.1%	11	33.3%	
Group Hospitalization & Medical											
Services, Inc.	31	10.3%	14	45.2%	5	16.1%	2	6.5%	10	32.3%	
Guardian Life Ins. Co. of America	6	2.0%	3	50.0%	1	16.7%	0	0.0%	2	33.3%	
Kaiser Foundation Health Plan	11	3.7%	6	54.5%	1	9.1%	0	0.0%	4	36.4%	
Kaiser Permanente Insurance Co.	3	1.0%	2	66.7%	0	0.0%	0	0.0%	1	33.3%	
MAMSI Life and Health Insurance Co.	5	1.7%	4	80.0%	0	0.0%	0	0.0%	1	20.0%	
Maryland Health Insurance Plan	16	5.3%	3	18.8%	1	6.3%	0	0.0%	12	75.0%	
Metropolitan Life Insurance Company	2	0.7%	0	0.0%	0	0.0%	0	0.0%	2	100.0%	
Optimum Choice, Inc.	19	6.3%	10	52.6%	4	21.1%	1	5.3%	4	21.1%	
Principal Life Insurance Company	1	0.3%	0	0.0%	0	0.0%	0	0.0%	1	100.0%	
United Concordia Dental Plans, Inc.	3	1.0%	1	33.3%	1	33.3%	0	0.0%	1	33.3%	
United Concordia Life & Health Ins.											
Co.	19	6.3%	7	36.8%	2	10.5%	0	0.0%	10	52.6%	
United Healthcare Insurance Company	30	10.0%	7	23.3%	3	10.0%	2	6.7%	18	60.0%	
United Healthcare of the Mid-Atlantic,	_	4.007		0.001	_	00.004		0.007	_	00.764	
Inc.	3	1.0%	0	0.0%	1	33.3%	0	0.0%	2	66.7%	
TOTAL	300	99.9%	100	33.3%	42	14.0%	15	5.0%	143	47.7%	

**Administration Complaints (Continued)** 

•	Carrier	,	Car	rior	Car		Car		Car Reve Itself I	rsed
	Code**		i	Carrier Reversed by Mula Reversed by MIA				Investi	•	
Type of Procedure		Total	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Cosmetic	D	7	3	42.9%	1	14.3%	0	0.0%	3	42.9%
Denial of Hospital Days	Α	34	14	41.2%	9	26.5%	1	2.9%	10	29.4%
Dental Care Services	J	46	14	30.4%	7	15.2%	2	4.3%	23	50.0%
Durable Medical Equipment	I	14	4	28.6%	2	14.3%	1	7.1%	7	50.0%
Emergency Room Denial	В	4	1	25.0%	0	0.0%	0	0.0%	3	75.0%
Emergency Treatment Denial	В	4	1	25.0%	0	0.0%	0	0.0%	3	75.0%
Experimental	D	21	5	23.8%	6	28.6%	0	0.0%	10	47.6%
Eye Care Services	J	2	0	0.0%	0	0.0%	0	0.0%	2	100.0%
Habilitative Services	G	1	0	0.0%	1	100.0%	0	0.0%	0	0.0%
In-Patient Rehabilitation	G	2	1	50.0%	0	0.0%	1	50.0%	0	0.0%
Lab, Imaging, Testing	Е	11	4	36.4%	0	0.0%	0	0.0%	7	63.6%
Medical Food	F	1	1	100.0%	0	0.0%	0	0.0%	0	0.0%
Mental Health Partial Hospitalization	С	1	0	0.0%	1	100.0%	0	0.0%	0	0.0%
Mental Health (Inpatient) Services	С	25	13	52.0%	1	4.0%	3	12.0%	8	32.0%
Mental Health (Outpatient) Services	С	4	1	25.0%	0	0.0%	1	25.0%	2	50.0%
Morbid Obesity	L	1	1	100.0%	0	0.0%	0	0.0%	0	0.0%
No Preauthorization	G	2	0	0.0%	0	0.0%	0	0.0%	2	100.0%
Nursing Home Services	K	1	0	0.0%	0	0.0%	1	100.0%	0	0.0%
Out Patient Services	G	2	1	50.0%	0	0.0%	0	0.0%	1	50.0%
Out-of-Network Benefits	L	2	2	100.0%	0	0.0%	0	0.0%	0	0.0%
PCP Referrals	L	1	0	0.0%	0	0.0%	0	0.0%	1	100.0%
Pharmacy	F	65	13	20.0%	10	15.4%	1	1.5%	41	63.1%
Physician Services	D	34	15	44.1%	3	8.8%	1	2.9%	15	44.1%
Podiatry Services	J	1	0	0.0%	0	0.0%	0	0.0%	1	100.0%
PT, OT, Speech Therapy	G	8	5	62.5%	1	12.5%	0	0.0%	2	25.0%
Retroactive Denial	D	2	0	0.0%	0	0.0%	2	100.0%	0	0.0%
Skilled Nursing Facility Care Services	G	2	1	50.0%	0	0.0%	0	0.0%	1	50.0%
Transportation Services	L	2	0	0.0%	0	0.0%	1	50.0%	1	50.0%
TOTAL		300	100		42		15		143	

<sup>\*\*</sup> All carrier data is divided into categories A-L. The MIA's data is more specific in nature. All charts which compare Carrier and MIA data have combined the MIA categories to fit within the carrier's A-L categories. The letters above identify which MIA category corresponds to the carrier code.

# Appendix 9 Summaries of Appeals and Grievance Orders

Coventry Health Care of Delaware, Inc. ("Coventry")

Case No.: 2011-06-001 Effective Date: June 2, 2011

Penalty: \$2,000.00

The Administration ordered that Coventry pay an administrative penalty of \$2,000.00 for violations of §§ 15-10A-02(f)(2)(iv) and (v) and 15-10A-02(i)(1)(ii)4 of the Insurance Article for failure to provide the required statutory information in its adverse and grievance decision letters.

CareFirst BlueChoice, Inc. ("BlueChoice")

Case No.: 2011-06-043

Effective Date: June 28, 2011

The Administration ordered BlueChoice to submit new criteria that are objective, clinically valid, compatible with established principles of health care and flexible enough to allow deviations from norms when justified on a case by case basis, regarding the use of a PET scan for distinguishing Alzheimer's disease from other fronto-temporal dementias, in accordance with § 15-10B-11(8) of the Insurance Article.

**Group Hospitalization and Medical Services, Inc. ("GHMSI")** 

Case No.: 2011-07-004 Effective Date: July 6, 2011

The Administration ordered GHMSI to submit new criteria regarding Liprotein-Associated Phospholipase testing that are objective, clinically valid and compatible with established principles of health care, in accordance with § 15-10B-11(8) of the Insurance Article.

UnitedHealthcare of the Mid-Atlantic, Inc. ("UnitedHealthcare")

Case No.: 2011-07-036 Effective Date: July 22, 2011

Penalty: \$2,500.00

The Administration ordered UnitedHealthcare to pay an administrative penalty of \$2,500.00 for violation of §15-10A-02(i) of the Insurance Article by failing to send a notice of grievance decision to the member after the grievance decision was made and by failing to provide the required information to the complainant in its notice of grievance decision.

CareFirst BlueChoice, Inc. Case No.: 2011-09-002

Effective Date: September 12, 2011

The Administration and BlueChoice entered into a Consent Order wherein BlueChoice authorized payment for a cranial orthosis device, subject to the payment terms and conditions of the member's policy.

American Republic Insurance Company ("American Republic")

Case No.: 2011-09-025

Effective Date: September 19, 2011

Penalty: \$1,000.00

The Administration ordered that American Republic immediately authorize payment for a laboratory test ("Chemo Fx® Assay") for the member, pursuant to § 15-1001(c) of the Insurance Article. The Administration ordered that American Republic pay a penalty of \$500.00 for violation of § 15-10A-02(f)(2) of the Insurance Article by failing to provide the required information in its notice of adverse decision to the member and a penalty of \$500.00 for violation of § 15-10A-02(i)(1)(ii)4.B. of the Insurance Article by failing in its notice of grievance decision to include the correct address of the Commissioner.

United Concordia Life and Health Insurance Company ("United Concordia")

Case No.: 2011-09-040

Effective Date: September 30, 2011

Penalty: \$2,500.00

The Administration ordered that United Concordia pay an administrative penalty of \$2,500.00 for violation of § 15-10A-02(f)(2)(v) of the Insurance Article by failing to provide the required information in its notice of adverse decision to the member.

CareFirst of Maryland, Inc. ("CareFirst")

Case No.: 2011-10-029

Effective Date: October 26, 2011

Penalty: \$6,500.00

The Administration ordered CareFirst to pay an administrative penalty of \$500.00 for violation of § 15-1005(c) of the Insurance Article by failing to transmit payment of a facility claim within 30 days of receipt, and that the violation was arbitrary and capricious. The Administration ordered that CareFirst pay an administrative penalty of \$500.00 for violation of § 15-1005(c) of the Insurance Article by failing to transmit payment or notice of the status of a provider claim within 30 days of receipt, and that the violation was arbitrary and capricious. The Administration ordered CareFirst to pay an administrative penalty of \$500.00 for violation of § 15-1005(e) of the Insurance Article by failing to transmit payment of a provider claim or send a notice of the status of the provider claim within 30 days after the receipt of the requested additional information from the provider and that the violation was arbitrary and capricious. The Administration ordered that CareFirst pay an administrative penalty of \$2,500.00 for violation of § 15-1008(c)(1)(ii) of the Insurance Article in its April 15, 2011 retroactive denial of a facility claim that CareFirst had originally paid on May 21, 2010. The Administration ordered that CareFirst pay an administrative penalty of \$2,500.00 for violation of \$15-10A-02(f)(2) of the Insurance Article, by failing to send within 5 working days after an adverse decision had been made, a written notice of the adverse decision to the member and provider.