

Health Net Plan Level Claims Data

Plan Level Data	
<p>1. Number of Plan Level Claims with DOS in 2018 That Were Also Received in Calendar Year 2018</p>	<p>LEX HNCA 67138: Platinum 90 CommunityCare HMO: 189,756 Gold 80 CommunityCare HMO: 229,077 Silver 70 CommunityCare HMO: 615,807 Silver 73 CommunityCare HMO: 515,466 Silver 87 CommunityCare HMO: 1,708,277 Silver 94 CommunityCare HMO: 1,167,597 Bronze 60 PureCare HSP: 32,823 Minimum Coverage PureCare HSP: 3,941</p> <p>LEX HNL 99110: Platinum 90 EnhancedCare PPO: 9,986 Gold 80 EnhancedCare PPO: 16,951 Silver 70 EnhancedCare PPO: 28,577 Silver 73 EnhancedCare PPO: 14,444 Silver 87 EnhancedCare PPO: 43,648 Silver 94 EnhancedCare PPO: 41,136 Bronze 60 EnhancedCare PPO: 139,479 Minimum Coverage EnhancedCare PPO: 10,701 Platinum 90 PureCare One EPO: 6,915 Gold 80 PureCare One EPO: 6,975 Silver 70 PureCare One EPO: 16,032 Silver 73 PureCare One EPO: 4,563 Silver 87 PureCare One EPO: 10,334 Silver 94 PureCare One EPO: 6,820 Bronze 60 PureCare One EPO: 21,768 Minimum Coverage PureCare One EPO: 999</p> <p>CCSB 99110: Platinum PPO 90 0/15 + Child Dental: 3,063 Platinum 90 PPO 0/15 + Child Dental INF: 167 Gold 80 PPO 0/25 + Child Dental: 10,447 Gold 80 PPO 0/25 + Child Dental INF: 289 Gold 80 Value PPO 750/10 + Child Dental Alt: 310 Silver 70 PPO 2000/45 + Child Dental: 11,975 Silver 70 PPO 2000/45 + Child Dental INF: 222 Silver 70 Value PPO 1700/30 + Child Dental Alt: 1,047 Silver 70 HDHP 1350/40 PPO + Child Dental Alt: 795 Health Net Silver 70 HDHP 1350/40 PPO + Child Dental Alt INF: 105 Bronze 60 PPO 6300/75 + Child Dental: 1,091 Bronze 60 PPO 6300/75 + Child Dental INF: 13 Bronze 60 HDHP 5600/15 PPO + Child Dental Alt: 469 Silver 70 HDHP 1350/40 EnhancedCare PPO + Child Dental Alt: 88 Bronze 60 HDHP 5600/15 EnhancedCare PPO + Child Dental Alt: 13</p>
<p>2. Number of Plan Level Claims with DOS in 2018 That Were Also Denied in Calendar Year 2018 (Plan Level Claims Denials)</p>	<p>LEX HNCA 67138: Platinum 90 CommunityCare HMO: 54,158 Gold 80 CommunityCare HMO: 64,607 Silver 70 CommunityCare HMO: 167,634 Silver 73 CommunityCare HMO: 134,481 Silver 87 CommunityCare HMO: 434,818 Silver 94 CommunityCare HMO: 286,153 Bronze 60 PureCare HSP: 9,156 Minimum Coverage PureCare HSP: 1,173</p>

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	<p> IEX HNL 99110: Platinum 90 EnhancedCare PPO: 2,202 Gold 80 EnhancedCare PPO: 2,461 Silver 70 EnhancedCare PPO: 3,795 Silver 73 EnhancedCare PPO: 1,657 Silver 87 EnhancedCare PPO: 6,311 Silver 94 EnhancedCare PPO: 6,536 Bronze 60 EnhancedCare PPO: 17,330 Minimum Coverage EnhancedCare PPO: 1,452 Platinum 90 PureCare One EPO: 2,279 Gold 80 PureCare One EPO: 2,027 Silver 70 PureCare One EPO: 4,809 Silver 73 PureCare One EPO: 1,194 Silver 87 PureCare One EPO: 2,809 Silver 94 PureCare One EPO: 1,829 Bronze 60 PureCare One EPO: 5,625 Minimum Coverage PureCare One EPO: 250 </p> <p> CCSB 99110: Platinum PPO 90 0/15 + Child Dental: 369 Platinum 90 PPO 0/15 + Child Dental INF: 12 Gold 80 PPO 0/25 + Child Dental: 1,649 Gold 80 PPO 0/25 + Child Dental INF: 24 Gold 80 Value PPO 750/10 + Child Dental Alt: 77 Silver 70 PPO 2000/45 + Child Dental: 1,388 Silver 70 PPO 2000/45 + Child Dental INF: 22 Silver 70 Value PPO 1700/30 + Child Dental Alt: 127 Silver 70 HDHP 1350/40 PPO + Child Dental Alt: 153 Silver 70 HDHP 1350/40 PPO + Child Dental Alt INF: 26 Bronze 60 PPO 6300/75 + Child Dental: 120 Bronze 60 PPO 6300/75 + Child Dental INF: 1 Bronze 60 HDHP 5600/15 PPO + Child Dental Alt: 50 Silver 70 HDHP 1350/40 EnhancedCare PPO + Child Dental Alt: 17 Bronze 60 HDHP 5600/15 EnhancedCare PPO + Child Dental Alt: 1 </p>
<p>Plan Level Claims Denied</p>	
<p>1. Number of Plan Level Claims with DOS in 2018 That Were Also Denied Due to Prior Authorization or Referral Required in Calendar Year 2018</p>	<p> IEX HNCA 67138: Platinum 90 CommunityCare HMO: 8 Gold 80 CommunityCare HMO: 82 Silver 70 CommunityCare HMO: 163 Silver 73 CommunityCare HMO: 108 Silver 87 CommunityCare HMO: 322 Silver 94 CommunityCare HMO: 249 Bronze 60 PureCare HSP: 1 </p> <p> IEX HNL 99110: Platinum 90 EnhancedCare PPO: 5 Gold 80 EnhancedCare PPO: 47 Silver 70 EnhancedCare PPO: 17 Silver 73 EnhancedCare PPO: 15 Silver 87 EnhancedCare PPO: 3 Silver 94 EnhancedCare PPO: 10 Bronze 60 EnhancedCare PPO: 27 Platinum 90 PureCare One EPO: 3 </p>

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	<p>Silver 70 PureCare One EPO: 6 Silver 73 PureCare One EPO: 2 Silver 94 PureCare One EPO: 1 Bronze 60 PureCare One EPO: 3</p> <p>CCSB 99110:0</p>
<p>2. Number of Plan Level Claims with DOS in 2018 That Were Also Denied Due to an Out-of-Network Provider/Claims in Calendar Year 2018</p>	<p>TEX HNCA 67138: Platinum 90 CommunityCare HMO: 1,008 Gold 80 CommunityCare HMO: 1,418 Silver 70 CommunityCare HMO: 3,980 Silver 73 CommunityCare HMO: 3,756 Silver 87 CommunityCare HMO: 10,583 Silver 94 CommunityCare HMO: 8,447 Bronze 60 PureCare HSP: 22 Minimum Coverage PureCare HSP: 187</p> <p>TEX HNL 99110: EnhancedCare PPO: N/A, plan includes OON tier Platinum 90 PureCare One EPO: 127 Gold 80 PureCare One EPO: 99 Silver 70 PureCare One EPO: 324 Silver 73 PureCare One EPO: 86 Silver 87 PureCare One EPO: 255 Silver 94 PureCare One EPO: 197 Bronze 60 PureCare One EPO: 722 Minimum Coverage PureCare One EPO: 45</p> <p>CCSB 99110: N/A, plan includes OON tier</p>
<p>3. Number of Plan Level Claims with DOS in 2018 That Were Also Denied Due to Exclusion of a Service in Calendar Year 2018</p>	<p>TEX HNCA 67138: Platinum 90 CommunityCare HMO: 23 Gold 80 CommunityCare HMO: 87 Silver 70 CommunityCare HMO: 219 Silver 73 CommunityCare HMO: 122 Silver 87 CommunityCare HMO: 568 Silver 94 CommunityCare HMO: 387 Bronze 60 PureCare HSP: 16 Minimum Coverage PureCare HSP: 5</p> <p>TEX HNL 99110: Platinum 90 EnhancedCare PPO: 10 Gold 80 EnhancedCare PPO: 34 Silver 70 EnhancedCare PPO: 45 Silver 73 EnhancedCare PPO: 47 Silver 87 EnhancedCare PPO: 65 Silver 94 EnhancedCare PPO: 88 Bronze 60 EnhancedCare PPO: 314 Minimum Coverage EnhancedCare PPO: 33 Platinum 90 PureCare One EPO: 5 Gold 80 PureCare One EPO: 1 Silver 70 PureCare One EPO: 5 Silver 73 PureCare One EPO: 2 Silver 87 PureCare One EPO: 2 Silver 94 PureCare One EPO: 4 Bronze 60 PureCare One EPO: 26</p>

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	<p>CCSB 99110: Platinum PPO 90 0/15 + Child Dental: 2 Gold 80 PPO 0/25 + Child Dental: 29 Gold 80 PPO 0/25 + Child Dental INF: 3 Gold 80 Value PPO 750/10 + Child Dental Alt: 3 Silver 70 PPO 2000/45 + Child Dental: 16 Silver 70 PPO 2000/45 + Child Dental INF: 1 Silver 70 HDHP 1350/40 PPO + Child Dental Alt INF: 8 Bronze 60 PPO 6300/75 + Child Dental: 1 Bronze 60 HDHP 5600/15 PPO + Child Dental Alt: 2</p>
<p>4. Number of Plan Level Claims with DOS in 2018 That Were Also Denied Due to Lack of Medical Necessity, <u>Excluding Behavioral Health</u> in Calendar Year 2018</p>	<p>EX HNCA 67138: Platinum 90 CommunityCare HMO: 63 Gold 80 CommunityCare HMO: 98 Silver 70 CommunityCare HMO: 283 Silver 73 CommunityCare HMO: 290 Silver 87 CommunityCare HMO: 925 Silver 94 CommunityCare HMO: 707 Bronze 60 PureCare HSP: 53</p> <p>EX HNL 99110: Platinum 90 EnhancedCare PPO: 3 Gold 80 EnhancedCare PPO: 29 Silver 70 EnhancedCare PPO: 23 Silver 73 EnhancedCare PPO: 16 Silver 87 EnhancedCare PPO: 31 Silver 94 EnhancedCare PPO: 76 Bronze 60 EnhancedCare PPO: 232 Minimum Coverage EnhancedCare PPO: 2 Platinum 90 PureCare One EPO: 3 Gold 80 PureCare One EPO: 4 Silver 70 PureCare One EPO: 5 Silver 73 PureCare One EPO: 7 Silver 87 PureCare One EPO: 5 Bronze 60 PureCare One EPO: 30</p> <p>CCSB 99110: 0</p>
<p>5. Number of Plan Level Claims with DOS in 2018 That Were Also Denied Due to Lack of Medical Necessity, <u>Behavioral Health only</u>, in Calendar Year 2018</p>	<p>EX HNCA 67138: N/A certification not required</p> <p>EX HNL 99110: N/A certification not required</p> <p>CCSB 99110: N/A certification not required</p>
<p>6. Number of Plan Level Claims with DOS in 2018 That Were Also Denied for “Other” Reasons in Calendar Year 2018</p>	<p>EX HNCA 67138: Platinum 90 CommunityCare HMO: 11,314 Gold 80 CommunityCare HMO: 18,631 Silver 70 CommunityCare HMO: 39,456 Silver 73 CommunityCare HMO: 41,035 Silver 87 CommunityCare HMO: 134,833 Silver 94 CommunityCare HMO: 89,856 Bronze 60 PureCare HSP: 2539 Minimum Coverage PureCare HSP:536</p> <p>EX HNL 99110: Platinum 90 EnhancedCare PPO: 2,192</p>

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Gold 80 EnhancedCare PPO: 2,422
Silver 70 EnhancedCare PPO: 3,549
Silver 73 EnhancedCare PPO: 1,610
Silver 87 EnhancedCare PPO: 6,218
Silver 94 EnhancedCare PPO: 6,347
Bronze 60 EnhancedCare PPO: 16,749
Minimum Coverage EnhancedCare PPO: 1,422
Platinum 90 PureCare One EPO: 427
Gold 80 PureCare One EPO: 396
Silver 70 PureCare One EPO: 1,117
Silver 73 PureCare One EPO: 539
Silver 94 PureCare One EPO: 668
Bronze 60 PureCare One EPO: 1,584
Minimum Coverage PureCare One EPO: 21

LEX CCSB 99110:
Platinum PPO 90 0/15 + Child Dental: 367
Platinum 90 PPO 0/15 + Child Dental INF: 12
Gold 80 PPO 0/25 + Child Dental: 1,607
Gold 80 PPO 0/25 + Child Dental INF: 21
Gold 80 Value PPO 750/10 + Child Dental Alt: 71
Silver 70 PPO 2000/45 + Child Dental: 1,301
Silver 70 PPO 2000/45 + Child Dental INF: 21
Silver 70 Value PPO 1700/30 + Child Dental Alt: 127
Silver 70 HDHP 1350/40 PPO + Child Dental Alt: 147
Silver 70 HDHP 1350/40 PPO + Child Dental Alt INF: 18
Bronze 60 PPO 6300/75 + Child Dental: 118
Bronze 60 PPO 6300/75 + Child Dental INF: 1
Bronze 60 HDHP 5600/15 PPO + Child Dental Alt: 48
Silver 70 HDHP 1350/40 EnhancedCare PPO + Child Dental Alt: 17
Bronze 60 HDHP 5600/15 EnhancedCare PPO + Child Dental Alt: 1