

Insurance Times: Aetna US Healthcare agree to re-evaluate NY claims

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NEW YORK — Insurance Superintendent Gregory V. Serio announced that an agreement has been reached between the state Insurance Department and Aetna U.S. Healthcare to create an appeals process for claims that had been partially or fully denied during certain time periods.

This agreement is a result of an examination that found failing to give proper notice of the right to appeal in the Explanation of Benefits Form and problems with the claims systems.

In a recent report, the department found that Aetna U.S. Healthcare had issued to certain policyholders defective Explanation of Benefits forms from July 1, 1994 to July 31, 2001.

As a result, Aetna U.S Healthcare has initiated an appeals process for certain policyholders insured under the defective forms.

Additionally, Aetna will reconsider certain claims that were partially or fully denied between January 1, 2000 and September 30, 2001 as a result of findings of a serious inadequacies in their claims processing system.

Advertisements detailing the appeals processes are now running in newspapers through June in the plan's service area.

The company has also paid a fine to the department.

Insurance Times: NH switches state workers plan to Anthem Blues Cross

CONCORD, N.H. (AP) — New Hampshire state workers have a new insurance company.

Beginning July 1, the \$103 million health insurance contract for state employees will be handled by Anthem Blue Cross Blue Shield.

Cigna HealthCare has held the state contract for the past five years.

Workers benefits will not change.

The state says the switch will save about \$4.5 million.