# Quarterly Small Employer Group Carrier-Reported Estimates of Earned Premiums and Enrollment as of January 1 – March 31, 2014

This information is compiled from financial statement and enrollment data filed by each Small Employer Group Carrier. It has not been audited or independently verified.



Florida Office of Insurance Regulation Market Research Unit Data Retrieval Date: July 24, 2014 Data Source: NAIC OLTPPROD and FLOIR DCAM schema

The Florida Office of Insurance Regulation (Office) releases this report on a quarterly basis to provide information on the number of basic, standard, and other small employer group health benefit plans in force. Information includes the number of plans with a Health Savings Account (HSA) and a Health Reimbursement Arrangement (HRA). The report also provides the number of enrollees (by employers, employees and their dependents), the total amount of premiums earned and the percentage of earned premiums from new enrollment.

The **Employee Health Care Access Act**, defined in <u>Section 627.6699, FS</u>, was established to promote the availability of health insurance coverage to small employers regardless of their claims experience or their employees' health status, and to improve the overall fairness and efficiency of the small group health insurance market.

The terms used in this report are defined as follows:

- "Carrier" means a person or entity that provides health benefit plans in this state, including an authorized insurer, a health maintenance organization, certain multiple-employer welfare arrangement, or any other person providing a health benefit plan that is subject to insurance regulation in this state.
- "Small employer carrier" means a carrier that offers health benefit plans covering eligible employees of one or more small employers.
- "Health benefit plan" means any hospital or medical policy or certificate, hospital or medical service plan contract, or health maintenance organization subscriber contract. The term does not include accident-only, specified disease, individual hospital indemnity, credit, dental-only, vision-only, Medicare supplement, long-term care, or disability income insurance; similar supplemental plans provided under a separate policy, certificate, or contract of insurance, which cannot duplicate coverage under an underlying health plan and are specifically designed to fill gaps in the underlying health plan, coinsurance, or deductibles; coverage issued as a supplement to liability insurance; workers' compensation or similar insurance; or automobile medical-payment insurance.
- "Basic health benefit plans" and "standard health benefit plans" mean low-cost health care plans developed pursuant to subsection (12) of the Florida Employee Health Care Access Act. The Act allows small businesses to provide group health insurance coverage for its employees on a guarantee-issue basis regardless of health circumstances, preexisting conditions, or claims history.
- "Employer" means, in connection with a health benefit plan with respect to a calendar year and a plan year, any person, sole proprietor, self-employed individual, independent contractor, firm, corporation, partnership, or association that is actively engaged in business, has its principal place of business in this state, employed an average of at least 1 but not more than 50 eligible employees on business days during the preceding calendar year, and employs at least 1 employee on the first day of the plan year. For purposes of this reporting, a sole proprietor, an independent contractor, or a self-employed individual is considered a small employer only if all of the conditions and criteria established in Section 627.6699, FS, are met.
- "Employee" means an employee who works full time, having a normal workweek of 25 or more hours, and who has met any applicable waiting-period requirements or other requirements of this act. The term includes a self-employed individual, a sole proprietor, a partner of a partnership, or an independent contractor, if the sole proprietor, partner, or independent contractor is included as an employee under a health benefit plan of a small employer, but does not include a part-time, temporary, or substitute employee.
- "Dependent" means the spouse or child of an eligible employee, subject to the applicable terms of the health benefit plan covering that employee.
- "Covered Lives" means the simple sum of reported "Employees" and "Dependents."
- "Earned Premium" means the portion of premiums paid by the insured "Employer" and/or his "Employees" that has been allocated, in an accounting sense, to the "Carrier's" loss experience, expenses and profit year to date during the reporting period.

#### For more information about Florida's Small Employer Group Health Market:

- \* The participating carriers websites' are listed in the report for your convenience.
- \* Call your insurance agent.
- \* Visit the Small Group Rate Comparison Tool webpage @ https://choices.fldfs.com/landh/SmallGroup

#### **AETNA HEALTH INC.**

Market Participation Status pursuant to Sections 627.6699(10) and 627.6699(11), Florida Statutes **Risk Assuming Carrier**  NAIC Company Code 95088

	Reporting Quarter 1Q2014 1/1/2014 - 3/31/2014	EMPLOYERS at the end of the Reporting Quarter	EMPLOYEES at the end of the Reporting Quarter	DEPENDENTS at the end of the Reporting Quarter	Total ENROLLEES at the end of the Reporting Quarter	Total PREMIUMS EARNED during the Reporting Quarter	Percentage of EARNED PREMIUMS from New Enrollment
	Reporting Date	9,784	48,421	30,564	78,985	\$97,737,354	1.24%
	5/15/2014						
TOTAL BASIC HEALTH BENEFIT PLA	ANS IN FORCE	172	179	44	223	\$521,008	0.00%
Basic Plans In Force W/ Health Sa	ivings Account (HSA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Re	eimbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ No HRA c	or HSA	172	179	44	223	\$521,008	0.00%
TOTAL STANDARD HEALTH BENEFI	T PLANS IN FORCE	77	82	15	97	\$305,414	0.00%
Standard Plans In Force W/ Health	n Savings Account (HSA)	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Health	n Reimbursement Arrangement (HRA	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ No HF	RA or HSA	77	82	15	97	\$305,414	0.00%
TOTAL OTHER SMALL GROUP PLAN	IS (STREET PLANS) IN FORCE	9,535	48,160	30,505	78,665	\$96,910,932	1.25%
Other Plans In Force W/ Health Sa	ivings Account (HSA)	1,089	4,616	2,145	6,761	\$8,394,260	1.33%
Other Plans In Force W/ Health Re	eimbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Other Plans In Force W/ No HRA c	or HSA	8,446	43,544	28,360	71,904	\$88,516,672	1.24%

Aetna.HMOReporting@aetna.com

#### **AETNA LIFE INSURANCE COMPANY**

Market Participation Status pursuant to Sections 627.6699(10) and 627.6699(11), Florida Statutes Risk Assuming Carrier

NAIC Company Code 60054

www.aetna.com

	Reporting Quarter   1Q2014   1/1/2014 - 3/31/2014	EMPLOYERS at the end of the Reporting Quarter	EMPLOYEES at the end of the Reporting Quarter	DEPENDENTS at the end of the Reporting Quarter	Total ENROLLEES at the end of the Reporting Quarter	Total PREMIUMS EARNED during the Reporting Quarter	Percentage of EARNED PREMIUMS from New Enrollment
	Reporting Date	1,043	3,841	2,497	6,338	\$8,947,689	4.84%
	5/13/2014						
TOTAL BASIC HEALTH BENEFIT PLA	NS IN FORCE	28	50	33	83	\$152,894	0.00%
Basic Plans In Force W/ Health Sa	vings Account (HSA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Re	imbursement Arrangement (HRA)	8	8	6	14	\$38,070	0.00%
Basic Plans In Force W/ No HRA o	r HSA	20	42	27	69	\$114,824	0.00%
TOTAL STANDARD HEALTH BENEFI	T PLANS IN FORCE	53	104	41	145	\$424,376	0.00%
Standard Plans In Force W/ Health	Savings Account (HSA)	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Health	Reimbursement Arrangement (HRA	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ No HR	A or HSA	53	104	41	145	\$424,376	0.00%
TOTAL OTHER SMALL GROUP PLAN	IS (STREET PLANS) IN FORCE	962	3,687	2,423	6,110	\$8,370,419	5.17%
Other Plans In Force W/ Health Sa	vings Account (HSA)	0	0	0	0	\$0	0.00%
Other Plans In Force W/ Health Re	imbursement Arrangement (HRA)	182	741	510	1,251	\$1,586,742	4.62%
Other Plans In Force W/ No HRA o	r HSA	780	2,946	1,913	4,859	\$6,783,677	5.30%

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	Reporting Quarter 1Q2014 1/1/2014 - 3/31/2014	EMPLOYERS at the end of the Reporting Quarter	EMPLOYEES at the end of the Reporting Quarter	DEPENDENTS at the end of the Reporting Quarter	Total ENROLLEES at the end of the Reporting Quarter	Total PREMIUMS EARNED during the Reporting Quarter	Percentage of EARNED PREMIUMS from New Enrollment
	Reporting Date	314	2,803	1,368	4,171	\$3,893,316	96.38%
TOTAL BASIC HEALTH BENEFIT PL	ANS IN FORCE	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health S	avings Account (HSA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health R	eimbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ No HRA	or HSA	0	0	0	0	\$0	0.00%
TOTAL STANDARD HEALTH BENEF	FIT PLANS IN FORCE	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Healt	th Savings Account (HSA)	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Healt	th Reimbursement Arrangement (HRA	<b>0</b>	0	0	0	\$0	0.00%
Standard Plans In Force W/ No H	RA or HSA	0	0	0	0	\$0	0.00%
TOTAL OTHER SMALL GROUP PLA	NS (STREET PLANS) IN FORCE	314	2,803	1,368	4,171	\$3,893,316	96.38%
Other Plans In Force W/ Health S	avings Account (HSA)	0	0	0	0	\$0	0.00%
Other Plans In Force W/ Health R	eimbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Other Plans In Force W/ No HRA	or HSA	314	2,803	1,368	4,171	\$3,893,316	96.38%

#### ALL SAVERS INSURANCE COMPANY

Market Participation Status pursuant to Sections 627.6699(10) and 627.6699(11), Florida Statutes **Risk Assuming Carrier**  NAIC Company Code 82406

myallsavers.com

#### AVMED, INC.

Market Participation Status pursuant to Sections 627.6699(10) and 627.6699(11), Florida Statutes

**Risk Assuming Carrier** 

NAIC Company Code 95263

www.avmed.org

	Reporting Quarter 1Q2014 1/1/2014 - 3/31/2014	EMPLOYERS at the end of the Reporting Quarter	EMPLOYEES at the end of the Reporting Quarter	DEPENDENTS at the end of the Reporting Quarter	Total ENROLLEES at the end of the Reporting Quarter	Total PREMIUMS EARNED during the Reporting Quarter	Percentage of EARNED PREMIUMS from New Enrollment
	Reporting Date	3,881	22,583	11,589	34,172	\$40,649,129	0.51%
	4/28/2014						
TOTAL BASIC HEALTH BENEFIT PL/	ANS IN FORCE	11	11	7	18	\$43,954	0.00%
Basic Plans In Force W/ Health Sa	vings Account (HSA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Re	eimbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ No HRA c	or HSA	11	11	7	18	\$43,954	0.00%
TOTAL STANDARD HEALTH BENEFI	T PLANS IN FORCE	8	9	3	12	\$41,028	0.00%
Standard Plans In Force W/ Health	n Savings Account (HSA)	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Health	n Reimbursement Arrangement (HRA	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ No HF	RA or HSA	8	9	3	12	\$41,028	0.00%
TOTAL OTHER SMALL GROUP PLAN	IS (STREET PLANS) IN FORCE	3,862	22,563	11,579	34,142	\$40,564,147	0.51%
Other Plans In Force W/ Health Sa	ivings Account (HSA)	179	511	358	869	\$1,191,066	0.00%
Other Plans In Force W/ Health Re	eimbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Other Plans In Force W/ No HRA c	or HSA	3,683	22,052	11,221	33,273	\$39,373,081	0.52%

#### **BLUE CROSS & BLUE SHIELD OF FLORIDA, INC.**

Market Participation Status pursuant to Sections 627.6699(10) and 627.6699(11), Florida Statutes Risk Assuming Carrier

NAIC Company Code 98167

http://www.bcbsfl.com/

	Reporting Quarter 1Q2014 1/1/2014 - 3/31/2014	EMPLOYERS at the end of the Reporting Quarter	EMPLOYEES at the end of the Reporting Quarter	DEPENDENTS at the end of the Reporting Quarter	Total ENROLLEES at the end of the Reporting Quarter	Total PREMIUMS EARNED during the Reporting Quarter	Percentage of EARNED PREMIUMS from New Enrollment
	Reporting Date	21,438	125,391	82,514	207,905	\$266,515,814	0.50%
	5/14/2014						
TOTAL BASIC HEALTH BENEFIT PLA	NS IN FORCE	21	34	9	43	\$110,430	0.00%
Basic Plans In Force W/ Health Sa	vings Account (HSA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Re	imbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ No HRA o	r HSA	21	34	9	43	\$110,430	0.00%
TOTAL STANDARD HEALTH BENEFI	T PLANS IN FORCE	120	219	100	319	\$882,399	0.00%
Standard Plans In Force W/ Health	Savings Account (HSA)	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Health	Reimbursement Arrangement (HRA	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ No HR	A or HSA	120	219	100	319	\$882,399	0.00%
TOTAL OTHER SMALL GROUP PLAN	IS (STREET PLANS) IN FORCE	21,297	125,138	82,405	207,543	\$265,522,985	0.50%
Other Plans In Force W/ Health Sa	vings Account (HSA)	9,664	48,060	39,204	87,264	\$101,497,985	0.06%
Other Plans In Force W/ Health Re	imbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Other Plans In Force W/ No HRA o	r HSA	11,633	77,078	43,201	120,279	\$164,025,000	0.78%

#### CAPITAL HEALTH PLAN, INC.

Market Participation Status pursuant to Sections 627.6699(10) and 627.6699(11), Florida Statutes Ris

**Risk Assuming Carrier** 

NAIC Company Code 95112

http://CapitalHealth.com

	Reporting Quarter 1Q2014 1/1/2014 - 3/31/2014	EMPLOYERS at the end of the Reporting Quarter	EMPLOYEES at the end of the Reporting Quarter	DEPENDENTS at the end of the Reporting Quarter	Total ENROLLEES at the end of the Reporting Quarter	Total PREMIUMS EARNED during the Reporting Quarter	Percentage of EARNED PREMIUMS from New Enrollment
	Reporting Date	1,618	7,482	5,646	13,128	\$15,640,170	1.10%
and the second se	5/15/2014						
TOTAL BASIC HEALTH BENEFIT PLA	NS IN FORCE	198	877	683	1,560	\$1,628,684	0.00%
Basic Plans In Force W/ Health Sa	vings Account (HSA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Re	imbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ No HRA o	r HSA	198	877	683	1,560	\$1,628,684	0.00%
TOTAL STANDARD HEALTH BENEFI	FPLANS IN FORCE	42	205	147	352	\$419,290	0.00%
Standard Plans In Force W/ Health	Savings Account (HSA)	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Health	Reimbursement Arrangement (HRA	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ No HR	A or HSA	42	205	147	352	\$419,290	0.00%
TOTAL OTHER SMALL GROUP PLAN	S (STREET PLANS) IN FORCE	1,378	6,400	4,816	11,216	\$13,592,196	1.26%
Other Plans In Force W/ Health Sa	vings Account (HSA)	0	0	0	0	\$0	0.00%
Other Plans In Force W/ Health Re	imbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Other Plans In Force W/ No HRA o	r HSA	1,378	6,400	4,816	11,216	\$13,592,196	1.26%

NAIC Company

#### **COVENTRY HEALTH AND LIFE INSURANCE COMPANY**

Market Participation Status pursuant to Sections 627.6699(10) and 627.6699(11), Florida Statutes

**Risk Assuming Carrier** 

Reporting Quarter   1Q2014   1/1/2014 - 3/31/2014	EMPLOYERS at the end of the Reporting Quarter	EMPLOYEES at the end of the Reporting Quarter	DEPENDENTS at the end of the Reporting Quarter	Total ENROLLEES at the end of the Reporting Quarter	Total PREMIUMS EARNED during the Reporting Quarter	Percentage of EARNED PREMIUMS from New Enrollment	
	Reporting Date	107	1,282	603	1,885	\$876,299	11.19%
5/15/2014							
TOTAL BASIC HEALTH BENEFIT PLA	ANS IN FORCE	0	0	0	0	\$3	0.00%
Basic Plans In Force W/ Health Sa	vings Account (HSA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Re	eimbursement Arrangement (HRA)	0	0	0	0	\$1	0.00%
Basic Plans In Force W/ No HRA c	or HSA	0	0	0	0	\$2	0.00%
TOTAL STANDARD HEALTH BENEFI	T PLANS IN FORCE	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Health	n Savings Account (HSA)	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Health	n Reimbursement Arrangement (HRA	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ No HF	RA or HSA	0	0	0	0	\$0	0.00%
TOTAL OTHER SMALL GROUP PLAN	IS (STREET PLANS) IN FORCE	107	1,282	603	1,885	\$876,296	11.19%
Other Plans In Force W/ Health Sa	vings Account (HSA)	0	0	0	0	\$0	0.00%
Other Plans In Force W/ Health Re	imbursement Arrangement (HRA)	107	1,282	603	1,885	\$876,296	11.19%
Other Plans In Force W/ No HRA c	or HSA	0	0	0	0	\$0	0.00%

NAIC Company Code 81973

www.cvty.com

#### COVENTRY HEALTH CARE OF FLORIDA, INC.

Market Participation Status pursuant to Sections 627.6699(10) and 627.6699(11), Florida Statutes **Risk Assuming Carrier** 

www.chcflorida.com

	Reporting Quarter 1Q2014 1/1/2014 - 3/31/2014	EMPLOYERS at the end of the Reporting Quarter	EMPLOYEES at the end of the Reporting Quarter	DEPENDENTS at the end of the Reporting Quarter	Total ENROLLEES at the end of the Reporting Quarter	Total PREMIUMS EARNED during the Reporting Quarter	Percentage of EARNED PREMIUMS from New Enrollment
	Reporting Date	1,869	17,515	7,331	24,846	\$20,543,238	0.83%
	5/15/2014						
TOTAL BASIC HEALTH BENEFIT PL	ANS IN FORCE	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Sa	avings Account (HSA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Re	eimbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ No HRA o	or HSA	0	0	0	0	\$0	0.00%
TOTAL STANDARD HEALTH BENEF	T PLANS IN FORCE	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Healt	n Savings Account (HSA)	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Healt	h Reimbursement Arrangement (HRA	<b>N</b> 0	0	0	0	\$0	0.00%
Standard Plans In Force W/ No HF	RA or HSA	0	0	0	0	\$0	0.00%
TOTAL OTHER SMALL GROUP PLAN	NS (STREET PLANS) IN FORCE	1,869	17,515	7,331	24,846	\$20,543,238	0.83%
Other Plans In Force W/ Health Sa	avings Account (HSA)	0	0	0	0	\$0	0.00%
Other Plans In Force W/ Health Re	eimbursement Arrangement (HRA)	1,869	17,515	7,331	24,846	\$20,543,238	0.83%
Other Plans In Force W/ No HRA of	or HSA	0	0	0	0	\$0	0.00%

NAIC Company Code 95114

#### EMPLOYER CHOICE INSURANCE COMPANY, INC.

Market Participation Status pursuant to Sections 627.6699(10) and 627.6699(11), Florida Statutes Risk Assuming Carrier

NAIC Company Code 13663

www.concerthealthplan.org

	Reporting Quarter 1Q2014 1/1/2014 - 3/31/2014	EMPLOYERS at the end of the Reporting Quarter	EMPLOYEES at the end of the Reporting Quarter	DEPENDENTS at the end of the Reporting Quarter	Total ENROLLEES at the end of the Reporting Quarter	Total PREMIUMS EARNED during the Reporting Quarter	Percentage of EARNED PREMIUMS from New Enrollment
Reportin	Reporting Date	43	185	93	278	\$345,853	0.00%
	6/9/2014						
TOTAL BASIC HEALTH BENEFIT PLA	ANS IN FORCE	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Sa	ivings Account (HSA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Re	eimbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ No HRA c	or HSA	0	0	0	0	\$0	0.00%
TOTAL STANDARD HEALTH BENEFI	T PLANS IN FORCE	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Health	n Savings Account (HSA)	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Health	n Reimbursement Arrangement (HRA	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ No HF	RA or HSA	0	0	0	0	\$0	0.00%
TOTAL OTHER SMALL GROUP PLAN	IS (STREET PLANS) IN FORCE	43	185	93	278	\$345,853	0.00%
Other Plans In Force W/ Health Sa	vings Account (HSA)	0	0	0	0	\$0	0.00%
Other Plans In Force W/ Health Re	eimbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Other Plans In Force W/ No HRA c	or HSA	43	185	93	278	\$345,853	0.00%

	Reporting Quarter	EMPLOYERS at the end of the Reporting Quarter	EMPLOYEES at the end of the Reporting Quarter	DEPENDENTS at the end of the Reporting Quarter	Total ENROLLEES at the end of the Reporting Quarter	Total PREMIUMS EARNED during the Reporting Quarter	Percentage of EARNED PREMIUMS from New Enrollment
	1/1/2014 - 3/31/2014	670	3,419	1,286	4,705	\$6,037,246	0.72%
	5/15/2014						
TOTAL BASIC HEALTH BENEFIT PLA	ANS IN FORCE	5	12	0	12	\$17,220	0.00%
Basic Plans In Force W/ Health Sa	vings Account (HSA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Re	imbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ No HRA o	or HSA	5	12	0	12	\$17,220	0.00%
TOTAL STANDARD HEALTH BENEFI	T PLANS IN FORCE	151	387	128	515	\$846,982	0.00%
Standard Plans In Force W/ Health	n Savings Account (HSA)	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Health	Reimbursement Arrangement (HRA	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ No HR	RA or HSA	151	387	128	515	\$846,982	0.00%
TOTAL OTHER SMALL GROUP PLAN	IS (STREET PLANS) IN FORCE	514	3,020	1,158	4,178	\$5,173,044	0.84%
Other Plans In Force W/ Health Sa	vings Account (HSA)	0	0	0	0	\$0	0.00%
Other Plans In Force W/ Health Re	imbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Other Plans In Force W/ No HRA o	or HSA	514	3,020	1,158	4,178	\$5,173,044	0.84%

#### FLORIDA HEALTH CARE PLAN, INC.

Market Participation Status pursuant to Sections 627.6699(10) and 627.6699(11), Florida Statutes **Risk Assuming Carrier**  NAIC Company Code 13567

fhcp.com

#### HEALTH FIRST HEALTH PLANS, INC.

Market Participation Status pursuant to Sections 627.6699(10) and 627.6699(11), Florida Statutes Risk

**Risk Assuming Carrier** 

NAIC Company Code 95019

www.health-first.org

Reporting Quarter 1Q2014 1/1/2014 - 3/31/2014	EMPLOYERS at the end of the Reporting Quarter	EMPLOYEES at the end of the Reporting Quarter	DEPENDENTS at the end of the Reporting Quarter	Total ENROLLEES at the end of the Reporting Quarter	Total PREMIUMS EARNED during the Reporting Quarter	Percentage of EARNED PREMIUMS from New Enrollment
Reporting Date	1,003	5,084	2,798	7,882	\$9,549,114	1.01%
5/15/2014						
TOTAL BASIC HEALTH BENEFIT PLANS IN FORCE	9	9	2	11	\$25,431	0.00%
Basic Plans In Force W/ Health Savings Account (HSA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Reimbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ No HRA or HSA	9	9	2	11	\$25,431	0.00%
TOTAL STANDARD HEALTH BENEFIT PLANS IN FORCE	7	9	5	14	\$28,280	0.00%
Standard Plans In Force W/ Health Savings Account (HSA)	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Health Reimbursement Arrangement (HR	A 0	0	0	0	\$0	0.00%
Standard Plans In Force W/ No HRA or HSA	7	9	5	14	\$28,280	0.00%
TOTAL OTHER SMALL GROUP PLANS (STREET PLANS) IN FORCE	987	5,066	2,791	7,857	\$9,495,403	1.01%
Other Plans In Force W/ Health Savings Account (HSA)	56	124	112	236	\$245,368	0.00%
Other Plans In Force W/ Health Reimbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Other Plans In Force W/ No HRA or HSA	931	4,942	2,679	7,621	\$9,250,035	1.04%

#### HEALTH OPTIONS, INC.

Market Participation Status pursuant to Sections 627.6699(10) and 627.6699(11), Florida Statutes

**Risk Assuming Carrier** 

NAIC Company Code 95089

http://www.bcbsfl.com/

EMPLOYERS at the end of the Reporting Quarter	EMPLOYEES at the end of the Reporting Quarter	DEPENDENTS at the end of the Reporting Quarter	Total ENROLLEES at the end of the Reporting Quarter	Total PREMIUMS EARNED during the Reporting Quarter	Percentage of EARNED PREMIUMS from New Enrollment
4,448	29,788	13,800	43,588	\$50,092,809	1.31%
13	17	10	27	\$62,604	0.00%
0	0	0	0	\$0	0.00%
0	0	0	0	\$0	0.00%
13	17	10	27	\$62,604	0.00%
23	38	15	53	\$127,107	0.00%
0	0	0	0	\$0	0.00%
8A 0	0	0	0	\$0	0.00%
23	38	15	53	\$127,107	0.00%
4,412	29,733	13,775	43,508	\$49,903,098	1.31%
735	5,331	2,298	7,629	\$8,871,256	0.01%
0	0	0	0	\$0	0.00%
3,677	24,402	11,477	35,879	\$41,031,842	1.59%
	the Reporting Quarter 4,448 13 0 0 13 23 0 RA 0 RA 0 23 4,412 735 0	the Reporting Quarter the Reporting Quarter   4,448 29,788   13 17   0 0   0 0   13 17   23 38   0 0   23 38   4,412 29,733   735 5,331   0 0   24,402 24,402	the Reporting Quarter the Reporting Quarter of the Reporting Quarter   4,448 29,788 13,800   13 17 10   0 0 0   13 17 10   0 0 0   13 17 10   13 17 10   23 38 15   0 0 0   23 38 15   4,412 29,733 13,775   735 5,331 2,298   0 0 0	the Reporting Quarter the Reporting Quarter of the Reporting Quarter end of the Reporting Quarter   4,448 29,788 13,800 43,588   13 17 10 27   0 0 0 0   13 17 10 27   0 0 0 0   13 17 10 27   20 0 0 0   13 17 10 27   23 38 15 53   0 0 0 0   23 38 15 53   4,412 29,733 13,775 43,508   735 5,331 2,298 7,629   0 0 0 0 0	the Reporting Quarter the Reporting Quarter of the Reporting Quarter end of the Reporting Quarter during the Reporting Quarter   4,448 29,788 13,800 43,588 \$50,092,809   13 17 10 27 \$62,604   0 0 0 0 \$0   0 0 0 0 \$0   13 17 10 27 \$62,604   0 0 0 \$0 \$0   13 17 10 27 \$62,604   23 38 15 53 \$127,107   0 0 0 \$0 \$0 \$0   23 38 15 53 \$127,107   4,412 29,733 13,775 43,508 \$49,903,098   735 5,331 2,298 7,629 \$8,871,256   0 0 0 0 \$0 \$0

#### HUMANA HEALTH INSURANCE COMPANY OF FLORIDA, INC.

Market Participation Status pursuant to Sections 627.6699(10) and 627.6699(11), Florida Statutes

**Risk Assuming Carrier** 

NAIC Company Code 69671

www.humana.com

	Reporting Quarter 1Q2014 1/1/2014 - 3/31/2014	EMPLOYERS at the end of the Reporting Quarter	EMPLOYEES at the end of the Reporting Quarter	DEPENDENTS at the end of the Reporting Quarter	Total ENROLLEES at the end of the Reporting Quarter	Total PREMIUMS EARNED during the Reporting Quarter	Percentage of EARNED PREMIUMS from New Enrollment
	Reporting Date	484	968	248	1,216	\$2,480,871	3.45%
	5/15/2014						
TOTAL BASIC HEALTH BENEFIT PLA	ANS IN FORCE	5	5	0	5	\$47,646	0.00%
Basic Plans In Force W/ Health Sa	vings Account (HSA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Re	imbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ No HRA o	or HSA	5	5	0	5	\$47,646	0.00%
TOTAL STANDARD HEALTH BENEFI	T PLANS IN FORCE	2	2	0	2	\$19,156	0.00%
Standard Plans In Force W/ Health	n Savings Account (HSA)	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Health	n Reimbursement Arrangement (HRA	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ No HR	RA or HSA	2	2	0	2	\$19,156	0.00%
TOTAL OTHER SMALL GROUP PLAN	IS (STREET PLANS) IN FORCE	477	961	248	1,209	\$2,414,069	3.55%
Other Plans In Force W/ Health Sa	ivings Account (HSA)	65	137	67	204	\$296,379	9.94%
Other Plans In Force W/ Health Re	eimbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Other Plans In Force W/ No HRA o	or HSA	412	824	181	1,005	\$2,117,690	2.65%

#### HUMANA MEDICAL PLAN, INC.

Market Participation Status pursuant to Sections 627.6699(10) and 627.6699(11), Florida Statutes Risk Assuming Carrier

NAIC Company Code 95270

Reporting Quarter 1Q2014 1/1/2014 - 3/31/2014	EMPLOYERS at the end of the Reporting Quarter	EMPLOYEES at the end of the Reporting Quarter	DEPENDENTS at the end of the Reporting Quarter	Total ENROLLEES at the end of the Reporting Quarter	Total PREMIUMS EARNED during the Reporting Quarter	Percentage of EARNED PREMIUMS from New Enrollment
Reporting Date	3,825	30,951	14,311	45,262	\$48,447,669	24.10%
5/15/2014						
TOTAL BASIC HEALTH BENEFIT PLANS IN FORCE	43	45	19	64	\$133,634	0.00%
Basic Plans In Force W/ Health Savings Account (HSA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Reimbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ No HRA or HSA	43	45	19	64	\$133,634	0.00%
TOTAL STANDARD HEALTH BENEFIT PLANS IN FORCE	16	20	4	24	\$62,558	0.00%
Standard Plans In Force W/ Health Savings Account (HSA)	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Health Reimbursement Arrangement (HF	RA 0	0	0	0	\$0	0.00%
Standard Plans In Force W/ No HRA or HSA	16	20	4	24	\$62,558	0.00%
TOTAL OTHER SMALL GROUP PLANS (STREET PLANS) IN FORCE	3,766	30,886	14,288	45,174	\$48,251,477	24.20%
Other Plans In Force W/ Health Savings Account (HSA)	499	2,343	1,287	3,630	\$4,477,010	19.28%
Other Plans In Force W/ Health Reimbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Other Plans In Force W/ No HRA or HSA	3,267	28,543	13,001	41,544	\$43,774,467	24.70%

www.humana.com

#### JOHN ALDEN LIFE INSURANCE COMPANY

Market Participation Status pursuant to Sections 627.6699(10) and 627.6699(11), Florida Statutes Risk Assuming Carrier

NAIC Company Code 65080

www.assuranthealth.com

	Reporting Quarter	EMPLOYERS at the end of the Reporting Quarter	EMPLOYEES at the end of the Reporting Quarter	DEPENDENTS at the end of the Reporting Quarter	Total ENROLLEES at the end of the Reporting Quarter	Total PREMIUMS EARNED during the Reporting Quarter	Percentage of EARNED PREMIUMS from New Enrollment
	1/1/2014 - 3/31/2014 -   Reporting Date -	7	27	15	42	\$52,436	0.00%
	5/13/2014						
TOTAL BASIC HEALTH BENEFIT PLA	INS IN FORCE	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Sa	vings Account (HSA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Re	imbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ No HRA o	r HSA	0	0	0	0	\$0	0.00%
TOTAL STANDARD HEALTH BENEFI	T PLANS IN FORCE	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Health	Savings Account (HSA)	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Health	Reimbursement Arrangement (HRA	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ No HR	A or HSA	0	0	0	0	\$0	0.00%
TOTAL OTHER SMALL GROUP PLAN	IS (STREET PLANS) IN FORCE	7	27	15	42	\$52,436	0.00%
Other Plans In Force W/ Health Sa	vings Account (HSA)	3	10	7	17	\$19,196	0.00%
Other Plans In Force W/ Health Re	imbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Other Plans In Force W/ No HRA o	r HSA	4	17	8	25	\$33,240	0.00%

#### MEDICA HEALTH PLANS OF FLORIDA, INC.

Market Participation Status pursuant to Sections 627.6699(10) and 627.6699(11), Florida Statutes

Not Applicable

#### NAIC Company Code 12756

#### HTTP://MHPFL.COM

Reporting Qu 1Q2014 1/1/2014 - 3/31/	the Reporting Quarter	f EMPLOYEES at the end of the Reporting Quarter	DEPENDENTS at the end of the Reporting Quarter	Total ENROLLEES at the end of the Reporting Quarter	Total PREMIUMS EARNED during the Reporting Quarter	Percentage of EARNED PREMIUMS from New Enrollment
Reporting D	ate 34	191	53	244	\$294,490	0.00%
5/14/2014	4					
TOTAL BASIC HEALTH BENEFIT PLANS IN FORCE	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Savings Account (HS	A) 0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Reimbursement Arrar	ngement (HRA) 0	0	0	0	\$0	0.00%
Basic Plans In Force W/ No HRA or HSA	0	0	0	0	\$0	0.00%
TOTAL STANDARD HEALTH BENEFIT PLANS IN FORCE	E 0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Health Savings Account (	(HSA) 0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Health Reimbursement A	rrangement (HRA 0	0	0	0	\$0	0.00%
Standard Plans In Force W/ No HRA or HSA	0	0	0	0	\$0	0.00%
TOTAL OTHER SMALL GROUP PLANS (STREET PLANS	3) IN FORCE 34	191	53	244	\$294,490	0.00%
Other Plans In Force W/ Health Savings Account (HS	A) 0	0	0	0	\$0	0.00%
Other Plans In Force W/ Health Reimbursement Arrar	ngement (HRA) 0	0	0	0	\$0	0.00%
Other Plans In Force W/ No HRA or HSA	34	191	53	244	\$294,490	0.00%

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	Reporting Quarter 1Q2014 1/1/2014 - 3/31/2014	EMPLOYERS at the end of the Reporting Quarter	EMPLOYEES at the end of the Reporting Quarter	DEPENDENTS at the end of the Reporting Quarter	Total ENROLLEES at the end of the Reporting Quarter	Total PREMIUMS EARNED during the Reporting Quarter	Percentage of EARNED PREMIUMS from New Enrollment
	Reporting Date	4,300	26,826	15,402	42,228	\$55,198,426	0.28%
	5/14/2014						
TOTAL BASIC HEALTH BENEFIT PL	ANS IN FORCE	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Sa	ivings Account (HSA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Re	eimbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ No HRA o	or HSA	0	0	0	0	\$0	0.00%
TOTAL STANDARD HEALTH BENEF	T PLANS IN FORCE	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Healt	n Savings Account (HSA)	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Healt	n Reimbursement Arrangement (HRA	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ No H	RA or HSA	0	0	0	0	\$0	0.00%
TOTAL OTHER SMALL GROUP PLAN	IS (STREET PLANS) IN FORCE	4,300	26,826	15,402	42,228	\$55,198,426	0.28%
Other Plans In Force W/ Health Sa	vings Account (HSA)	0	0	0	0	\$0	0.00%
Other Plans In Force W/ Health Re	eimbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Other Plans In Force W/ No HRA of	or HSA	4,300	26,826	15,402	42,228	\$55,198,426	0.28%

NEIGHBORHOOD HEALTH PARTNERSHIP, INC.

Market Participation Status pursuant to Sections 627.6699(10) and 627.6699(11), Florida Statutes Risk Assuming Carrier

NAIC Company Code 95123

www.mynhp.com

#### TIME INSURANCE COMPANY

Market Participation Status pursuant to Sections 627.6699(10) and 627.6699(11), Florida Statutes Ri

**Risk Assuming Carrier** 

NAIC Company Code 69477

www.assuranthealth.com

State of the second sec	Reporting Quarter 1Q2014 1/1/2014 - 3/31/2014	EMPLOYERS at the end of the Reporting Quarter	EMPLOYEES at the end of the Reporting Quarter	DEPENDENTS at the end of the Reporting Quarter	Total ENROLLEES at the end of the Reporting Quarter	Total PREMIUMS EARNED during the Reporting Quarter	Percentage of EARNED PREMIUMS from New Enrollment
	Reporting Date	11	44	14	58	\$69,324	21.03%
	5/13/2014						
TOTAL BASIC HEALTH BENEFIT PLA	NS IN FORCE	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Sav	vings Account (HSA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Rei	imbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ No HRA of	r HSA	0	0	0	0	\$0	0.00%
TOTAL STANDARD HEALTH BENEFIT	FPLANS IN FORCE	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Health	Savings Account (HSA)	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Health	Reimbursement Arrangement (HRA	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ No HR	A or HSA	0	0	0	0	\$0	0.00%
TOTAL OTHER SMALL GROUP PLAN	S (STREET PLANS) IN FORCE	11	44	14	58	\$69,324	21.03%
Other Plans In Force W/ Health Sav	vings Account (HSA)	3	6	5	11	\$21,187	0.00%
Other Plans In Force W/ Health Rei	imbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Other Plans In Force W/ No HRA of	r HSA	8	38	9	47	\$48,137	30.28%

#### UNITEDHEALTHCARE INSURANCE COMPANY

Market Participation Status pursuant to Sections 627.6699(10) and 627.6699(11), Florida Statutes Risk Assuming Carrier

NAIC Company Code 79413

<u>www.uhc.com</u>

	Reporting Quarter 1Q2014 1/1/2014 - 3/31/2014	EMPLOYERS at the end of the Reporting Quarter	EMPLOYEES at the end of the Reporting Quarter	DEPENDENTS at the end of the Reporting Quarter	Total ENROLLEES at the end of the Reporting Quarter	Total PREMIUMS EARNED during the Reporting Quarter	Percentage of EARNED PREMIUMS from New Enrollment
	Reporting Date	19,020	96,895	59,467	156,362	\$194,070,684	3.97%
	5/15/2014						
TOTAL BASIC HEALTH BENEFIT PLA	NS IN FORCE	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Sa	vings Account (HSA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Re	imbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ No HRA o	r HSA	0	0	0	0	\$0	0.00%
TOTAL STANDARD HEALTH BENEFI	T PLANS IN FORCE	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Health	Savings Account (HSA)	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Health	Reimbursement Arrangement (HRA	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ No HR	A or HSA	0	0	0	0	\$0	0.00%
TOTAL OTHER SMALL GROUP PLAN	IS (STREET PLANS) IN FORCE	19,020	96,895	59,467	156,362	\$194,070,684	3.97%
Other Plans In Force W/ Health Sa	vings Account (HSA)	0	0	0	0	\$0	0.00%
Other Plans In Force W/ Health Re	imbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Other Plans In Force W/ No HRA o	r HSA	19,020	96,895	59,467	156,362	\$194,070,684	3.97%

UNITEDHEALTHCARE OF FLORIDA, INC.	

Market Participation Status pursuant to Sections 627.6699(10) and 627.6699(11), Florida Statutes Risk Assuming Carrier

	Reporting Quarter	EMPLOYERS at the end of the Reporting Quarter	EMPLOYEES at the end of the Reporting Quarter	DEPENDENTS at the end of the Reporting Quarter	Total ENROLLEES at the end of the Reporting Quarter	Total PREMIUMS EARNED during the Reporting Quarter	Percentage of EARNED PREMIUMS from New Enrollment
	1/1/2014 - 3/31/2014	5,763	33,778	17,371	51,149	\$60,410,782	1.05%
TOTAL BASIC HEALTH BENEFIT PL		0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Sa	vings Account (HSA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ Health Re	eimbursement Arrangement (HRA)	0	0	0	0	\$0	0.00%
Basic Plans In Force W/ No HRA c	or HSA	0	0	0	0	\$0	0.00%
TOTAL STANDARD HEALTH BENEFI	T PLANS IN FORCE	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Health	n Savings Account (HSA)	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ Health	n Reimbursement Arrangement (HRA	0	0	0	0	\$0	0.00%
Standard Plans In Force W/ No HF	RA or HSA	0	0	0	0	\$0	0.00%
TOTAL OTHER SMALL GROUP PLAN	IS (STREET PLANS) IN FORCE	5,763	33,778	17,371	51,149	\$60,410,782	1.05%
Other Plans In Force W/ Health Sa	ivings Account (HSA)	399	1,957	3,172	5,129	\$3,732,769	6.45%
Other Plans In Force W/ Health Re	eimbursement Arrangement (HRA)	9	52	69	121	\$99,334	0.39%
Other Plans In Force W/ No HRA c	or HSA	5,355	31,769	14,130	45,899	\$56,578,679	0.70%

NAIC Company Code 95264

www.uhc.com

### Quarterly Small Employer Group Carrier

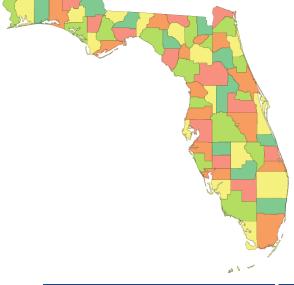
# **Reported Estimates of Earned Premiums and Enrollment**

### Quarterly Aggregate

**Reporting Quarter** 

1Q2014

1/1/2014 - 3/31/2014



EMPLOYERS at the end of the Reporting Quarter	EMPLOYEES at the end of the Reporting Quarter		TOTAL DIRECT PREMIUMS EARNED at the end of the Reporting Quarter
79,662	457,474	724,444	\$881,852,713