

Important disclosure information — Connecticut Addendum

Medical Loss Ratios

Every year, Aetna is required to provide the current Medical Loss Ratios for our health plans.

The State of Connecticut medical loss ratio is defined as the ratio of incurred claims to earned premium for the prior calendar year for managed care plans issued in Connecticut. Claims shall be limited to medical expenses for services and supplies provided to enrollees and shall not include expenses for stop loss, reinsurance, enrollee educational programs or other cost containment programs or features.

The Federal medical loss ratio has the same meaning as provided in and is calculated in accordance with the Patient Protection and Affordable Care Act, P.L. 111-148, as amended, and regulations adopted thereunder.

The Medical loss ratios for the prior calendar year are shown below.

Aetna Health Inc. Medical Loss Ratios

HMO Medical Plans

Federal: 145% and State: 139%

Aetna Life Insurance Company

PPO Medical Plans

Federal: Small Group – 94.30% and Large Group – 75.10%

State: 81.20%

Aetna is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies, including Aetna Life Insurance Company, Aetna Health Inc., Aetna Health Insurance Company and their affiliates (Aetna).