



**COMMONWEALTH OF MASSACHUSETTS**  
**Office of Consumer Affairs and Business Regulation**  
**DIVISION OF INSURANCE**

1000 Washington Street, Suite 810 • Boston, MA 02118-6200  
 (617) 521-7794 Toll-free (877) 563-4467  
<http://www.mass.gov/doi>

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ECONOMIC DEVELOPMENT

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AND BUSINESS REGULATION

**DANIEL R. JUDSON**  
COMMISSIONER OF INSURANCE

**INSURED PREFERRED PROVIDER PLANS IN MASSACHUSETTS**  
 (SUBJECT TO M.G.L. CHAPTER 176I AND 211 CMR 51.00)

**CARRIER NAME AND ADDRESS**

**PLAN FIRST  
MARKETED**

**1. Aetna Life Insurance Company<sup>1, 2, 3</sup>**

151 Farmington Avenue, MB58  
Hartford, CT 06156

Attn: Mr. Stephen Halloran  
Product and Regulatory Affairs Senior Manager  
(860) 273-9875

Product Name:	Form #:	Product Type:	
Open Choice	GR-9 (Open)	Medical	10/88
Managed Choice	GR-9 (Managed)	Medical	01/91
Blanket Student Insurance Policy	GR-96134	Medical	11/01
Saving Plus <sup>1</sup>	GR-9N et al. (Tiered Network)	Medical	03/16
Advantage Plus	MA-DMO	Dental	12/00
Advantage Plus	MA-DMO Copay Plans	Dental	02/04
Dental PPO	MA-Dental PPO	Dental	12/00
Aetna Vision Preferred	GR-9	Vision	09/11
Pharmacy – Massachusetts <sup>2</sup>	GR-9	Prescription Drug	11/02
Sports Accident Insurance <sup>3</sup>	GR-96449 1005 ED. 01-10 et al	Accident Only	03/08

**2. Altus Dental Insurance Company, Inc.<sup>4</sup>**

10 Charles Street  
Providence, R.I. 02904-2208

Attn: Melissa Gennari  
Director of Compliance  
(877) 223-0588

Product Name:	Form #:	Product Type:	
Altus Dental Preferred & Plus	AD 1	Dental	08/01
Altus Dental Preferred <sup>4</sup>	AD 3C	Dental	12/02
Altus Dental Value Option Plan 1	AD 5	Dental	01/08
Altus Dental for 1	AD100-IND (MA)	Dental	12/11

<sup>1</sup> Aetna's tiered "Savings Plus" Network [Acute Care Hospitals & Specialists] only offered in the counties of Bristol, Essex, Middlesex, Norfolk, Plymouth, and Suffolk Counties.

<sup>2</sup> Plan is not actively marketed but may be purchased in the Massachusetts large group market on a request basis.

<sup>3</sup> Form GR-96449 1005 ED. 01-10 et al to replace the originally filed form GR-96487-1 ED. 10-07 et al upon group's renewal date.

<sup>4</sup> Plan offered only to AAA MA or NH residents.

**CARRIER NAME AND ADDRESS****DATE FIRST  
MARKETED****3. Ameritas Life Insurance Corp.**

5900 "O" Street  
Lincoln, NE 68510

Attn: Ms. Nancy Vanicek  
Contract Analyst  
(800) 745-6665 x7899

Product Name:	Form #:	Product Type:	
Certificate Group Dental [and Eye Care] Insurance	9021 MA Rev. 04-13	Dental	06/95
Group Eye Care Insurance	9021 Ed. 01-05	Vision	01/07

**4. Blue Cross and Blue Shield of Massachusetts, Inc.**

(d/b/a Blue Cross Blue Shield Massachusetts)  
101 Huntington Avenue, Suite 1300  
Boston, MA 02199-7611

Attn: New Business Sales Group  
(800) 262-BLUE [800 262-2583]

Product Name:	Form #:	Product Type:	
Blue Care Elect	BCBS-PPO (1-1-2013)	Medical	1988
Dental Blue PPO1	DENT PPO1	Dental	01/94
Dental Blue PPO2	DENT PPO2	Dental	01/94
Blue 20/20 w/Insight Network	BCBS-VC 20/20 (8-1-2013)	Vision	03/14
Blue 20/20 w/Access Network	BCBS-VC 20/20 (8-1-2013)	Vision	03/14

**5. Blue Cross and Blue Shield of Massachusetts HMO Blue, Inc.**

101 Huntington Avenue, Suite 1300  
Boston, MA 02199-7611

Attn: New Business Sales Group  
(800) 262-BLUE [800 262-2583]

Product Name:	Form #:	Product Type:	
Preferred Blue PPO	HMO-PPO (1-1-2013)	Medical	01/08

**6. The Chesapeake Life Insurance Company**

9151 Grapevine Highway  
North Richland Hills, TX 76180

Attn: Kathy Melish  
(508) 668-1951

Product Name:	Form #:	Product Type:	
Vision Insurance Policy	CH-26023-IP (5/07) MA	Vision	06/11
Premiere Vision Plan w/ EyeMed Vision	CH-26120-IP (01/12) OON MA	Vision	05/15
PPO Dental Plan	CH-26121-IP (01/12) MA	Dental	05/15

**7. CIGNA Health and Life Insurance Company**

900 Cottage Grove Road  
Hartford, CT 06152

Attn: Sales and Marketing  
(860) 226-6000

Product Name:	Form #:	Product Type:	
Cigna Individual Dental PPO	HC-NOT11 et. al./HC-CER33	Dental	01/14
CIGNA Dental PPO	HP-POL63 et. al	Dental	07/11
Point of Service	HC-CER1, et al.	Medical	08/11
Point of Service Open Access	HC-CER1, et al.	Medical	08/11
CareLink/Open Access Plus PPO	HC-CER1, et al.	Medical	08/11
Open Access Plus	HC-CER1, et al.	Medical	08/11
Medical LocalPlus	HC-CER1 et al.	Medical	01/15

**CARRIER NAME AND ADDRESS****DATE FIRST  
MARKETED****8. Combined Insurance Company of America**5050 Broadway  
Chicago, IL 60640Attn: Combined Select Programs  
(732)-945-2300

Product Name:	Form #:	Product Type:	
Vision Access Plan	VN C63007A/B 0906-MA	Vision	05/02
Preferred Plan	VN C63007CVC 0906-MA	Vision	05/02

**9. ConnectiCare of Massachusetts, Inc.**175 Scott Swamp Road  
Farmington, Connecticut 06032Attn: Denise Roy  
(860) 674-5843

Product Name:	Form #:	Product Type:	
Point of Service Open Access	CMI/POS SG 01 (01/2016)	Medical	09/00
Point of Service Open Access	CMI/POS LG 01 (01/2016)	Medical	09/00
Point of Service Deductible Open Access	CMI/POS Deductible SG 01 (01/2016)	Medical	10/11
Point of Service Deductible Open Access	CMI/POS Deductible LG 01 (01/2016)	Medical	10/11

**10. Connecticut General Life Insurance Company**900 Cottage Grove Road  
Hartford, CT 06152Attn: Sales and Marketing  
(860) 226-6000

Product Name:	Form #:	Product Type:	
Point of Service	GM6000 C2, et al.	Medical	06/90
Point of Service Open Access	GM6000 C2, et al.	Medical	03/04
CareLink/Open Access PPO	GM6000 SC19, et al.	Medical	03/07
PPO	GM6000 SC19, et al.	Medical	06/91
Open Access Plus	GM6000, et al.	Medical	07/04
Substance Abuse/ Mental Health PPO	GM6000 C2(SAMH)	Substance Abuse/ Mental Health only	08/92
CIGNA Dental PPO	GM6000 C2 (Dental)	Dental	12/96
Group Vision Certificate with Access Network	VISION 01 - ACCESS	Vision	04/04
Group Vision Certificate with Preferred Network	VISION 01 - PREFERRED	Vision	04/04

**11. Dearborn National Life Insurance Company<sup>5</sup>**1020 31<sup>st</sup> Street  
Downers Grove, IL 60515Attn: Ms. Sharon A. Mathews  
(630) 824-6009

Product Name:	Form #:	Product Type:	
Group Dental Insurance	7P-100-1004	Dental	10/06

<sup>5</sup> Effective March 1, 2012, Fort Dearborn Life Insurance Company's name changed to Dearborn National Life Insurance Company.

**CARRIER NAME AND ADDRESS**

**DATE FIRST MARKETED**

**12. Dental Service of Massachusetts, Inc.**

(d/b/a Delta Dental of Massachusetts)  
465 Medford Street  
Boston, MA 02129-1454

Attn: Sales  
(617) 886-1000

Product Name:	Form #:	Product Type:	
Delta Dental Preferred	DDP-PPA1	Dental	01/92
Delta Care	DDP-PPA2	Dental	02/95
Delta Dental Preferred	DDP-PPA4	Dental	11/04
Delta Dental Premier (National)	DDP-PPA5	Dental	11/07
Delta Dental Premier (Local)	DDP-PPA5	Dental	11/07
Delta Dental Premier (PPO National)	DDP-PPA6	Dental	11/07
Delta Dental Premier (PPO Value)	DDP-PPA6	Dental	11/07

**13. Dentegra Insurance Company**

100 First Street  
San Francisco, CA 94105

Attn: Customer Service Center  
(877) 280-4204

Product Name:	Form #:	Product Type:	
Dentegra Group PPO	G-SLE-E-MA-09	Dental	07/12
Dentegra Individual PPO Plan	I-PPO-C-MA-12	Dental	07/12
Dentegra Group PPO	G-PPO-E-MA-09	Dental	02/13
Delta Dental PPO <sup>SM</sup> for Individuals and Families	I-SLE-C-MA-09	Dental	03/12

**14. Dentegra Insurance Company of New England**

100 First Street  
San Francisco, CA 94105

Attn: Customer Relations  
(866) 261-4275

Product Name:	Form #:	Product Type:	
AARP Dental Insurance Plan	CC-DNNE-MA (DELTAUSA1-2005)D	Dental	08/07

**15. DSM Massachusetts Insurance Company, Inc.**

465 Medford Street  
Boston, MA 02129-1454

Attn: Sales  
(800) 872-0500

Product Name:	Form #:	Product Type:	
Delta Dental EPO	DDEPO.SubcInd. 06-14	Dental	11/14

**Individual Options:**

EPO Pediatric	IND 06515		
EPO Enhanced	High AdultIND 05-15		
EPO Value	Low Adult OON IND 05-15		
EPO Pediatric Basic	Low OON IND 05-15		
EPO Basic Exclusive	DD.EPO.Ind.Basic.BPR 05-15		
DeltaCare	DSM.MA.DeltaCare.Ind.Sub.Cert.01.15		08/15

**Group Options:**

EPO Pediatric	Standardized Plan 05-15		
EPO Family Enhanced	Standardized Plan- High Adult 05-15		
EPO Family Value	Standardized Plan- Low Adult OON 05-15		
EPO Pediatric Basic	Non-Standardized Plan Low OON 05-15		
EPO Basic Exclusive	DD.EPO.Family.Basic.BPR 05-15		
Delta Dental EPO Group MA	DDEPO.Non-ACA.SubcGrp.09-14 & MA.EPO.BPR.09.2014		12/14
DeltaCare	DSM.MA.DeltaCare.Grp.Sub.Cert.01.15		08/15

**CARRIER NAME AND ADDRESS****DATE FIRST  
MARKETED****16. Fallon Health & Life Assurance Company, Inc.**

10 Chestnut Street

Worcester, MA 01608-2810

Attn: Sales and Marketing

(508) 799-2100 x69986

(800) 333-2535 x69986

Product Name:

Form #:

Product Type

Preferred Care

15-670-031

Medical

07/03

Deductible 2000 Low

QHD 2000 HSA

**17. Fidelity Security Life Insurance Company <sup>6,7</sup>**

P.O. Box 418131

3130 Broadway

Kansas City, MO 64111

Attn: Ms. Melinda Everley

(800) 648-8624 x1527

Product Name:

Form #:

Product Type:

EyeMed Vision Plan <sup>6</sup>

C-9059MA (05/08)

Vision

12/02

w/ EyeMed Access Vision Network

EyeMed Vision Plan

C-9059MA (12/08)

Vision

12/08

w/ EyeMed Advantage Vision Network <sup>7</sup>

EyeMed Vision Plan

C-9059MA (05/09)

Vision

07/09

w/ EyeMed Insight Vision Network

EyeMed Vision Plan

C-9083MA

Vision

05/10

w/ EyeMed Access Vision Network

w/ EyeMed Advantage Vision Network

w/ EyeMed Insight Vision Network

w/ EyeMed Select Vision Network

EyeMed Vision Plan

C-9093MA

Vision

05/10

w/ EyeMed Access Vision Network

w/ EyeMed Advantage Vision Network

w/ EyeMed Insight Vision Network

w/ EyeMed Select Vision Network

**18. First Health Life and Health Insurance Company <sup>8</sup>**

3200 Highland Ave.

Downers Grove, IL 60515

Attn: Customer Service

(800) 252-0227

Product Name:

Form #:

Product Type:

Dental PPO

MHBP01C-MA 0911

Dental

07/12

with DentalGuard Network <sup>8</sup>

<sup>6</sup> The group certificate was originally approved in December 2002. As of November 24, 2003, the group form was replaced with a revised Form (C-9004MA-PPO). As of November 8, 2006 Form# C-9004MA-PPO was replaced with Form# C-9059MA (10/06). As of July 31, 2008 Form# C-9059MA (10/06) was replaced with Form# C-9059MA(5/08).

<sup>7</sup> The EyeMed Advantage Vision Network is a subset of the EyeMed Access Vision Network.

<sup>8</sup> First Health Life and Health Insurance Company notified the Division that plan is intended to be offered to only federal employees.

**CARRIER NAME AND ADDRESS****DATE FIRST  
MARKETED****19. 4 Ever Life Insurance Company**

100 Matsonford Road  
One Radnor Corporate Center, Suite 100  
Radnor, PA 19087

Attn: GEO BLUE - Administrator  
(855) 682-7965

Product Name:	Form #:	Product Type:	
Global Health Guard	54.1301 MA	Medical	11/14

**20. (The) Guardian Life Insurance Company of America**

7 Hanover Square  
New York, New York 10004

Attn: Group Sales  
(617) 482-2693

Product Name:	Form #:	Product Type:	
DentalGuard Preferred	CGP-3-DNTL-90-1 et al.	Dental	10/94
DentalGuard Preferred	CGP-3-DGY2K-PPOSP-MA	Dental	02/04
Individual Dental Plan	IP-DEN-12-MA	Dental	11/12
VisionGuard	CGP-3-VSN-96-VIS et al.	Vision	09/00
Davis Vision	CGP-3-Davis-11-MA	Vision	01/13

**21. Harvard Pilgrim Health Care, Inc. (d/b/a Harvard Community Health Plan)<sup>9</sup>**

93 Worcester Street  
Wellesley, MA 02481

Attn: Sales Department  
(781) 251-1500 or (800) 848-9995

Product Name:	Form #:	Product Type:	
Value PPO 15 (Plan Name 07) <sup>9</sup>	611/MAPPO0701; 100	Medical	06/98
Affordable PPO 20 (Plan Name V8)	611/MAPPO0701; 100	Medical	06/98
Affordable PPO 25 (Plan Name AQ)	611/MAPPO0701; 100	Medical	06/98
Best Buy PPO 500 (Plan Name 81)	611/MAPPO0701; MABBPOSOB81 REV1	Medical	06/98
Best Buy PPO 1000 (Plan Name OE)	611/MAPPO0701; 592	Medical	06/98
Best Buy PPO 2000 (Plan Name 84)	611/MAPPO0701; MABBPOSOB84 REV1	Medical	06/98

**22. Health New England, Inc.**

One Monarch Place  
Springfield, MA 01144-1006

Attn: Paula Burke  
(413) 787-4000 x3379

Product Name:	Form #:	Product Type:	
HNE Advantage Plus	HNE/POSPLUS-06	Medical	08/04
HNE Premier PPO	HNE/PHCS-PPO-06	Medical	08/04
HNE PPO Saver	HNE/PHCS-PPOSaver-06	Medical	08/04
HNE Wise <sup>PPO</sup>	HNE/PHCS-PPOSaver-06	Medical	02/06
HNE MedPlus PPO	HNE/PHCS/PPO-07- Medicare-Grp	Medicare Wraparound	07/08

<sup>9</sup> Previously approved plan known as Harvard Pilgrim PPO (Form# MAGPPO1; MAGPPOSB and MAPPO3T2).

**CARRIER NAME AND ADDRESS****DATE FIRST  
MARKETED****23. HPHC Insurance Company, Inc.**

93 Worcester Street  
Wellesley, MA 02481-9181

Attn: Sales Department  
(800) 848-9995

Product Name:	Form #:	Product Type:	
The PPO Plan – Massachusetts	MAG1PPOHBREV; MAG1PPOREVSQB; PPOad0701	Medical	12/02
Best Buy HSA PPO PPO 1500 (GJ, GM) PPO 2000 (GK, GN) & PPO 3000 (GL, GO)	310	Medical	12/04
HPHC Qualifying Student Health Insurance Program PPO Plan	HPHC 06-BR-MA-PPO	Medical	06/07
Best Buy HSA PPO	310	Medical	12/04
Hospital Prefer <sup>SM</sup> Best Buy PPO	1456 (Grp)/1459 (Ind) & SOB1455	Medical	07/12

**24. HM Life Insurance Company**

120 Fifth Avenue, Fifth Avenue Place  
Pittsburgh, PA 15222

Attn: Sales Department  
1-800-278-6673

Product Name:	Form #:	Product Type:	
Stand Alone Vision	HMC 902-VIS (6/10)	Vision	07/14

**25. Humana Insurance Company <sup>10</sup>**

P.O. Box 30349  
Tampa, FL 33630-3349

Attn: Sales Department  
(800) 865-3676

Product Name:	Form #:	Product Type:	
Dental Plan Certificate <sup>10</sup>	MA-70146-HD 1/09 et al.	Dental	05/09
Humana Vision Care Plan	HUM VGRP CERT.002 (MA)	Vision	08/09
Humana EyeMed Vision Plan	MA-70147-01	Vision	09/09
Group Vision Certificate w/ EyeMed Insight Vision network	MA-70149-01 CERT	Vision	02/17
Dental PPO	MA-70146-HC 1/14	Dental	03/15

**26. The Lincoln National Life Insurance Company**

8801 Indian Hills Drive  
Omaha, NE 68114

Attn: Customer Experience  
1-800-423-2765

Product Name:	Form #:	Product Type:	
Group Dental Insurance	GL11/GL12 Series	Dental	10/08

**27. Massachusetts Vision Service Plan, Inc.**

Vision Service Plan  
8 Faneuil Hall Marketplace, Suite 300  
Boston, MA 02109

Attn: Group Sales  
(617)-973-5044

Product Name:	Form #:	Product Type:	
Group Vision Care Plan	REG EOC-7/00	Vision	08/00

<sup>10</sup> The application for approval of the dental plan (Form# MA-70146-HD 1/09 et al) was originally filed by HumanaDental Insurance Company (“HumanDental”). Humana Insurance Company (“Humana”) notified the Division on January 26, 2015 that HumanaDental Group Dental policies have been assumed by Humana effective October 1, 2015.

**CARRIER NAME AND ADDRESS****DATE FIRST MARKETED****28. Metropolitan Life Insurance Company<sup>11, 12</sup>**

P.O. Box 981282

El Paso, TX 79998-1282

Attn: Customer Service

1-800-942-0854

Product Name:	Form #:	Product Type:	
MetLife Preferred Dentist Program			
Classic	G.23000-13EMA1	Dental	06/98
	GCERT2000 den/classic	Dental	08/06
Value	G.23000-13EMA2	Dental	06/98
	GCERT2000 den/value	Dental	08/06
PDP Copay Plan	G.23000-13EMA3	Dental	02/04
	GCERT2000 den/copayrc	Dental	08/06
Individual Dental Policy	IND-DENTAL-2015 &	Dental	01/17
	IND-DENTAL-2015-FSD <sup>12</sup>		

**29. Mid-West National Life Insurance Company of Tennessee<sup>13</sup>**

9151 Grapevine Highway

North Richland Hills, TX 76180

Attn: Kathy Melish

(508) 668-1951

Product Name:	Form #:	Product Type:	
Vision Insurance Certificate	MW-25213-MA (3/06)	Vision	11/01
Vision One Plus Program <sup>13</sup>	25213-P	Vision	12/92

**30. Minuteman Health, Inc.<sup>14, 15</sup>**

711 Atlantic Avenue

Boston, MA 02210

Sales (855) 265-3333

Product Name:	Form #:	Product Type:	
MyDoc PPO Select <sup>14</sup>	MHI-PPOSelect-EOC CLEAN-8112015	Medical	01/14
MyDoc PPO National <sup>15</sup>	MHI-NatlPPO-EOC CLEAN-8112015	Medical	11/14

**Options:**

MyDoc PPO National Silver HSA 1500 w/Child Dental

MyDoc PPO National Bronze 2050 w/Child Dental

MyDoc PPO National Bronze Basic HSA w/Child Dental

MyDoc PPO National Bronze HSA 3350 w/Child Dental

<sup>11</sup> Metropolitan Life Insurance Company offers website access for its group dental business - [www.metlife.com/insurance/dental-insurance](http://www.metlife.com/insurance/dental-insurance); website access for its individual dental business may be located as follows: [www.metlifetakealongdental.com](http://www.metlifetakealongdental.com).

<sup>12</sup> Plan designed as a dental group conversion plan offered to former group plan enrollees who lose access to their group dental plan.

<sup>13</sup> Effective December 30, 2014, The MEGA Life and Health Insurance Company, NAIC#97055, merged into Mid-West National Life Insurance Company of Tennessee. Policy Form 25213-P was originally approved under MEGA; plan was discontinued to be offered in 2011.

<sup>14</sup> On November 21, 2016 Minuteman Health, Inc. notified the Division that it intends to discontinue and nonrenew its "MyDoc PPO Select product (Form# MHI-PPOSelect-EOC CLEAN-8112015)" from both the small and large group markets in Massachusetts.

<sup>15</sup> The MyDoc PPO National Plan is comprised of two networks for in-network level of care; providers who contract directly with Minuteman Health, Inc. ("MHI") for services received INSIDE the MHI service area (Bristol, Essex, Middlesex, Norfolk, Plymouth, Suffolk and Worcester) and providers who contract with the First Health Network when services are received OUTSIDE of the MHI service area. Please call MHI directly if you have any questions about whether your primary care provider, specialist or acute care facility is included as an in-plan provider in the MyDoc PPO National plan.

**CARRIER NAME AND ADDRESS****DATE FIRST MARKETED****31. MONY Life Insurance Company of America**2999 North 44th Street, Suite 250  
Phoenix, Arizona 85018

(800) 777-6510]

Product Name:	Form #:	Product Type:	
Group Dental Insurance	MOEBC15	Dental	12/16

**32. National Guardian Life Insurance Company**2 East Gilman Street  
Madison, WI 53703Superior Vision Inquiries:  
(770) 642-1240  
NVA Inquiries:  
(973) 574-2444  
Medical Plan Inquires:  
(800) 633-7867

Product Name:	Form #:	Product Type:	
Superior Vision Plan	NVIGRPCT 5/07-MA	Vision	01/08
National Vision Administrators (NVA) Plan	NVIGRPCT-MA 01/13	Vision	02/14
Consolidated Health Plans, Inc. Network Options:	NBHCert-280(2014) PPO MA	Medical	08/14
w/ First Health Group Corp. ("First Health") w/MultiPlan, Inc. ("MPI")w/ Cigna PPO			

**33. National Union Fire Insurance Company of Pittsburgh, Pa. <sup>16</sup>**99 High Street  
31st Floor  
Boston, MA 02110Attn: Sales and Marketing  
(617) 457-2856

Product Name:	Form #:	Product Type:	
Group Vision PPO Plan	C22439DBG-MA	Vision	08/06
Group Vision PPO Plan	C22439DBG-MA (EyeMed)	Vision	07/07

**34. Nationwide Life Insurance Company <sup>17</sup>**c/o Consolidated Health Plans  
195 Stafford Street  
Springfield, Massachusetts 01104-3503Ms. Deborah K. Saremi  
(800) MED-STOP x127

Product Name:	Form #:	Product Type:	
Student Accident and Sickness Insurance Program <sup>17</sup>	NW PHCS 101 10/26/04	Medical	05/03
Student Accident and Sickness Insurance Program	NW CERT 101 5/19/03	Medical	06/03
Student Accident and Sickness Insurance Program	NW CIGNA 101	Medical	05/12

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<sup>16</sup> On April 30, 2014, National Union Fire Insurance Company of Pittsburgh, Pa. notified the Division that it intends to exit the group vision insurance market on a nationwide basis as of the end of 2014.

<sup>17</sup> Members enrolled have access to PHCS Preferred Provider Network, except in the Western Massachusetts Counties of Hampden, Hampshire, Berkshire and Franklin where members have access to the Consolidated Health Plans network.

**CARRIER NAME AND ADDRESS****DATE FIRST MARKETED****35. Neighborhood Health Plan, Inc.**

253 Summer Street  
Boston, MA 02210-1120

Group Sales (617) 772-5663  
Individual Sales (800) 462-5449

Product Name:	Form #:	Product Type:	
NHP Prime PPO	NHPPPOv3	Medical	06/14

**36. Principal Life Insurance Company<sup>18, 19, 20</sup>**

Principal Financial Group  
201 Jones Road, Second Floor  
Waltham, MA 02451

Attn: George Katz, Jr.  
(781) 893-1845

Product Name:	Form #:	Product Type:	
Dental PPO	GC 700 (PPO)-1		
(Classic & Premier) <sup>18</sup>	GH 100 A (DPPO) et al.	Dental	08/98
Group Voluntary Dental	GC 2000 (PPO) – 1 et al	Dental	12/01
Expense Insurance PPO Plan <sup>19</sup>			
Insurance PPO Plan <sup>20</sup>	GC 7000	Dental	12/03
Group Dental Expense Ins. Ind/PPO	GC 7100	Dental	03/08
Group Dental Expense	GC 7200	Dental	04/15
Group Vision Expense	GC 9000	Vision	05/14

**37. Reliance Standard Life Insurance Company**

2501 Parkway  
Philadelphia, PA 19130-2499

Attn: Ms. Nancy Vanicek  
Contract Analyst  
(800) 745-6665 x7899

Product Name:	Form #:	Product Type:	
Group Dental [and Eye Care]	9021 ed. 04-13	Dental	06/95
Group Eye Care Insurance	9021 Ed. 01-05	Vision	01/07

**38. Renaissance Life and Health Insurance Company of America<sup>21, 22</sup>**

P.O. Box 30381  
Lansing, MI 48909

Attn: Administration Office  
800 745-7509

Product Name:	Form #:	Product Type:	
Renaissance Non-EHB	INVD-100A-2016-MA <sup>21</sup>	Dental	10/08
Individual Dental Policy			
Dental PPO Plan			
(w Delta Dental Network) <sup>22</sup>	INVD-100A-Delta	Dental	10/08
Renaissance Massachusetts			
Group Dental Certificate	D-2102A-2014-MA	Dental	01/15
In-network Benefit Dentist Rider	D-202A-2014-MA & Summary of Dental Plan Benefits D-201A-2014-MA		

<sup>18</sup> Principal Life Insurance Company notified the Division that the Dental PPO (Classic & Premier) and Group Voluntary Dental Expense Insurance PPO Plan are no longer offered to new business.

<sup>19</sup> On December 3, 2014 Principal Life Insurance Company requested that the Group Voluntary Dental Expense Insurance PPO Plan Form# GC 2000 (PPO) – 1 et al.) be withdrawn from its book of business.

<sup>20</sup> Principal Life Insurance Company notified the Division in March 2016 that the Insurance PPO Plan (“Form# GC 7000”) is no longer offered to new business.

<sup>21</sup> Policy Form INVD-100A-2016-MA replaces the originally approved form INVD 100A.

<sup>22</sup> Plan intended to be offered solely on a group conversion basis.

**CARRIER NAME AND ADDRESS****DATE FIRST  
MARKETED****39. Security Life Insurance Company of America**

10901 Red Circle Drive  
Minnetonka, Minnesota 55343

Attn: Sales Connect Team  
(800) 328-4667

Product Name:	Form #:	Product Type:	
Complete	IP1000-MA &	Dental	09/14
\$1,000 & \$2,000	IPS1000-C-PPO-MA		
Advantage Plus	IP1000-MA &		
\$1,000 & \$2,000	IPS1000-AP-PPO-MA		

**40. Standard Insurance Company**

900 SW Fifth Avenue  
Portland, Oregon 97204-1235

Attn: Ms. Nancy Vanicek  
Contract Analyst  
(800) 745-6665 x7899

Product Name:	Form #:	Product Type:	
Group Dental & Eye Care	9021 ed. 04-13	Dental	08/03

**41. Sun Life Assurance Company of Canada <sup>23</sup>**

800 Boylston Street  
Suite 1450  
Boston, MA 02199

Attn: Boston Group Sales Office  
Mr. Steven Reynolds, Manager  
(617) 536-1243 or 1-800-786-0569

Product Name:	Form #:	Product Type:	
Dental PPO	GC-A-1 et al.	Dental	08/09
w/DenteMax Network			
Dental PPO	GC-A-1 et al.	Dental	04/11
w/United Concordia			

**42. Tufts Associated Health Maintenance Organization, Inc.**

(d/b/a Tufts Health Plan)  
705 Mount Auburn Street  
Watertown, MA 02472-1508

Attn: Member Services  
(800) 462-0224

Product Name:	Form #:	Product Type:	
Point of Service Option	CC-MAPOS-001 Ed. 1-2012	Medical	12/86
Preferred Provider Option	MA-PPO-001 Ed. 1-2012	Medical	01/97

**43. Tufts Insurance Company <sup>24</sup>**

705 Mount Auburn Street  
Watertown, MA 02472-1508

Attn: Member Services  
(800) 843-1008  
CareLink Inquires – (866) 352-9114

Product Name:	Form #:	Product Type:	
CareLink	MA-TICOPPO-002 Ed. 1-2012	Medical	10/07
Advantage PPO	MA-TICOPPO-001 Ed.1-2012 <sup>24</sup>	Medical	01/03
Student Health PPO	MA-TICOPPO-003	Medical	01/14
Sports Accident PPO	MA-TICPPO-SPACC-001	Accident Only	01/15

<sup>23</sup> Sun Life Assurance Company of Canada (“SLOC”) notified the Division in June 2012 that it has not yet begun its sales and marketing of the Dental PPO (Form# GC-A-1 et al.) utilizing the DenteMax network product.

<sup>24</sup> Form approved on October 8, 2003 and replaces originally approved form # MA-TICOPPO-001 Ed.4-2003.

**CARRIER NAME AND ADDRESS****DATE FIRST  
MARKETED****44. Unicare Life & Health Insurance Company<sup>25</sup>**

233 S. Wacker Drive  
Suite 3700  
Chicago, IL 60606

Attn: Customer Service  
(800) 627-0004

Product Name:	Form #:	Product Type:	
Unicare Classic PPO <sup>25</sup>	GCR100 et al.	Medical	01/97
Wellpoint Dental PPO	GCR 130, 3119-31127	Dental	01/97

**45. Union Security Insurance Company**

P.O. Box 3050  
Milwaukee, WI 53201-3050

Attn: Ms. Tina Beauchene, Analyst  
(414) 299-6914 (Medical inquires)

2323 Grand Boulevard  
Kansas City, MO 64108

Attn: Don Desjardins, Sales Manager  
(508) 382-3737 or (800) 345-5705  
(Dental and Vision inquires)

Product Name:	Form #:	Product Type:	
Group Dental Certificate	CG-90 et al.		
Option 1 Dental PPO w/DHA	DENTAL 94 et al.	Dental	10/98
Option 2 Dental PPO w/DHA	DENTAL HB MA et al.	Dental	04/05
Option 3 Dental PPO w/DHA	DENTAL HB-V MA et al.	Dental	04/05
Option 4 Dental PPO w/DHA	DENTAL HB-V MA et al.	Dental	04/05
Group Vision Certificate w/VSP	GC-10 Vis CFP et al.	Vision	01/12

**46. United Concordia Insurance Company<sup>26</sup>**

Northwoods Crossing Office Park  
4401 Deer Path Road  
Harrisburg, PA 17110

Attn: Russ Rubin  
Group Sales  
(888) 884-8224

Product Name:	Form #:	Product Type:	
Concordia Preferred	9804-B (7/02)	Dental	06/04
	9804-C (7/02) Preferred		
Individual Dental Ins. Policy <sup>26</sup>	MAIN01-0312UCIC	Dental	03/11

<sup>25</sup> UniCare Life & Health Insurance Company notified the Division that it discontinued and non-renewed its medical business. At this time the carrier does not intend to marketing the plan, however, should they begin to market again they will notify the Division accordingly.

<sup>26</sup> United Concordia Insurance Company notified the Division on June 6, 2014 that it intends to issue a 60 day advance notice to individual dental policyholders that their plans will be nonrenewed upon their next renewal date and intends to completely withdraw from the individual market by the end of 2015.

**CARRIER NAME AND ADDRESS****DATE FIRST MARKETED****47. UnitedHealthcare Insurance Company<sup>27, 28, 29, 30</sup>**

1 Research Drive  
Westborough, MA 01581-5083  
475 Kilvert Street  
Warwick, RI 02886-1392

Attn: Dennis Markell  
(800) 410-3385  
Attn: Joan Greenwell  
(800) 447-1245

Product Name:	Form #:	Product Type:	
Select Plus	SELECTP.I.01.MA	Medical	11/01
Choice Plus	CHOICEP.I.01.MA & COC.CER.I.07.MA.SB	Medical	11/01
Options PPO	OPTIONSPPO.I.01.MA & COC.CER.I.07.MA.SB	Medical	11/01
OPTIONS PPO 80/80	OPTIONS80/80.I.01.MA & COC.CER.I.07.MA.SB	Medical	11/01
Direct Access <sup>27</sup>	CPCEMA497	Medical	09/97
Substance Abuse/MH PPO	C-CEI et al.	Substance Abuse/MH only	04/00
Dental Certificate of Coverage <sup>28</sup>	DCOC.CER.06 AZ [Rev. 1/06] et al	Dental	07/00
Blanket Student PPO Injury&	12-BR-MA-PPO	Medical	07/07
Sickness Benefits Group Policy <sup>29</sup>			
Transplant Benefit Certificate <sup>30</sup>	UCC-CERT-MA (02/04)	Medical (Transplant Only)	08/07
Group Vision Care	VCOC.INT.06	Vision	05/08

**48. United of Omaha Life Insurance Company**

Mutual of Omaha Plaza  
Omaha, NE 68175

Attn: Omega Administrators  
(877) 999-2330

Product Name:	Form #:	Product Type:	
Group Dental	12345GCB-DEN-EZ 13 MA	Dental	03/10

<sup>27</sup> Plan discontinued for new business.

<sup>28</sup> Form# DCOC.CER.06 AZ [Rev. 1/06] et al. replaces the originally approved Form# DCE.

<sup>29</sup> Form# 12-BR-MA-PPO replaces the originally approved Form# COL-06-MA.

<sup>30</sup> UnitedHealthcare Insurance Company confirmed that it markets this product to only self-funded employer groups.