



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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AND BUSINESS REGULATION

GARY D. ANDERSON
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** ^{1, 2, 3, 4}

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 ²	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 Leap Dental PPO	AL IVL CB-HDentalPol 05 & SOB AL IVL CB-HSOB 04	Dental	12/17
Aetna Vision Preferred	GR-9	Vision	09/11
Pharmacy – Massachusetts ³	GR-9	Prescription Drug	11/02
Sports Accident Insurance ⁴	GR-96449 1005 ED. 01-10 et al	Accident Only	03/08

2. **Altus Dental Insurance Company, Inc.** ⁵

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

¹ Aetna offers two pharmacy network plans with its medical policies; Aetna Managed Pharmacy Network provides access to a network that is smaller than Aetna's General pharmacy network. Members have access to pharmacy benefits only from the pharmacies in the Aetna Managed Pharmacy Network. Please call the carrier directly if you have any questions about the participation of your pharmacy.

² Aetna's tiered "Savings Plus" Network [Acute Care Hospitals & Specialists] only offered in the counties of Bristol, Essex, Middlesex, Norfolk, Plymouth, and Suffolk Counties.

³ Plan is not actively marketed but may be purchased in the Massachusetts large group market on a request basis.

⁴ 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.

CARRIER NAME AND ADDRESS**DATE FIRST
MARKETED****(Altus Dental Insurance Company, Inc. (cont'd))**

Altus Dental Preferred ⁵	AD 3C	Dental	12/02
Product Name:	Form #:	Product Type:	
Altus Dental Value Option Plan	1 AD 5	Dental	01/08
Altus Dental for 1	AD100-IND (MA)	Dental	12/11
Altus Dental Individual	AD200-INDX (MA)	Dental	01/14
Altus Dental for Small Business	AD200-GPRX (MA)	Dental	01/14

3. Ameritas Life Insurance Corp. ⁶

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
Group Eye Care Insurance w/ VSP	9021 MA VSP PPO Ed. 02-17	Vision	08/17
Complete ⁶ \$1,000 & \$2,000	IP1000-MA & IPS1000-C-PPO-MA	Dental	09/14
Advantage Plus ⁶ \$1,000 & \$2,000	IP1000-MA & IPS1000-AP-PPO-MA		
Individual Dental [and] [Eye] Care Insurance Policy	Indiv. 9000 MA Ed. 07-16 et al.	Dental	11/17

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 PPO Program 1	DENT PPO1	Dental	01/94
Dental Blue PPO Program 2	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

⁵ Plan offered only to AAA MA or NH residents.

⁶ Effective December 31, 2016, Security Life Insurance Company of America ("Security Life") merged into Ameritas Life Insurance Corp ("Ameritas"). Effective January 1, 2017, the Complete and Advantage Plus plans were no longer marketed in Massachusetts.

CARRIER NAME AND ADDRESS**DATE FIRST
MARKETED****6. The Chesapeake Life Insurance Company ⁷**

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	CH-26120-IP (01/12) OON MA	Vision	05/15
w/ EyeMed Vision			
PPO Dental Plan ⁷	CH-26121-IP (01/12) MA (07/17)	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	HC-CER1, et al.	Medical	08/11
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

8. Combined Insurance Company of America

5050 Broadway
Chicago, IL 60640

Attn: Combined Select Programs
(732)-945-2300

Product Name:	Form #:	Product Type:	
Combined Advantage Vision Plan	VN C63007 0817-ADV-MA	Vision	01/18

9. ConnectiCare of Massachusetts, Inc.

175 Scott Swamp Road
Farmington, Connecticut 06032

Attn: 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	CMI/POS Deductible	Medical	10/11
Open Access	SG 01 (01/2016)		
Point of Service Deductible	CMI/POS Deductible	Medical	10/11
Open Access	LG 01 (01/2016)		

⁷ Form# CH-26121-IP (01/12) MA (07/17) replaces the originally filed form# CH-26121-IP (01/12) MA.

CARRIER NAME AND ADDRESS**DATE FIRST
MARKETED****10. Dearborn National Life Insurance Company^{8, 9}**

1020 31st Street
Downers Grove, IL 60515

Attn: Ms. Antionette Hill
(630) 458-5744

Product Name:	Form #:	Product Type:	
Group Dental Insurance	7C-100-1004-MA R608	Dental	10/06

11. 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:	
DeltaCare USA	Form# SP151-FDS	Dental	02/95
DeltaCare	Form# SP103-FDS	Dental	02/95
Delta Dental PPO		Dental	01/92
Options:			
National I	Form# SP032		
National II	Form# SP030		
National II	Form# SP036		
Local I	Form# SP034		
Local II	Form# SP035		
Value Local	Form# SP001		
Individual National	Form #DDP-PPA6		

12. 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 SM for Individuals and Families	I-SLE-C-MA-09	Dental	03/12

13. 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

⁸ Form# VN C63007 0817-ADV-MA replaces originally filed forms VN C63007A/B 0906-MA and VN C63007CVC 0906-MA originally placed on file in May 2002.

⁹ Effective March 1, 2012, Fort Dearborn Life Insurance Company's name changed to Dearborn National Life Insurance Company ("Dearborn National"). The carrier notified the Division on March 3, 2017 that it had discontinued marketing its dental products in 2012.

CARRIER NAME AND ADDRESS**DATE FIRST
MARKETED**

- 14. DSM Massachusetts Insurance Company, Inc.** Attn: Sales
465 Medford Street (800) 872-0500
Boston, MA 02129-1454

Product Name:	Form #:	Product Type:	
Total Choice PPO	DD.TCPPO.GRP.LOCAL.012017	Dental	07/17
Delta Dental EPO	DDEPO.SubcInd. 06-15	Dental	11/14
Individual Options:			
EPO Pediatric	IND 06515		
EPO Enhanced	High Adult IND 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		
Delta Dental EPO	DDEPO.SubcGrp. 005-15	Dental	11/14
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 (Individual)	DSM.MA.DeltaCare.Ind.Sub.Cert.01.15	Dental	08/15
DeltaCare (Group)	DSM.MA.DeltaCare.Grp.Sub.Cert.01.15	Dental	08/15

- 15. Fallon Health & Life Assurance Company, Inc.**
10 Chestnut Street Attn: Sales and Marketing
Worcester, MA 01608-2810 (508) 799-2100 x69434
(800) 333-2535 x69434

Product Name:	Form #:	Product Type:	
Preferred Care	15-670-031	Medical	07/03
Deductible 2000 Low			
QHD 2000 HSA			

- 16. Fidelity Security Life Insurance Company¹⁰**
P.O. Box 418131 Attn: Ms. Melinda Everley
3130 Broadway (800) 648-8624 x1527
Kansas City, MO 64111

Product Name:	Form #:	Product Type:	
EyeMed Vision Plan	C-9059MA (12/09) ¹⁰	Vision	12/02
w/ EyeMed Access Vision Network			
w/ EyeMed Advantage Vision Network			
w/ EyeMed Insight Vision Network			

¹⁰ As of November 24, 2003, the originally approved group form was replaced with a revised Form (C-9004MA-PPO). Effective November 8, 2006 Form# C-9004MA-PPO was replaced with Form# C-9059MA (10/06) with subsequent revisions. On January 29, 2018, the carrier notified the Division that Form# C-9059MA is no longer marketed; upon group anniversary business will be renewed under Form# C-9083MA (05/17).

CARRIER NAME AND ADDRESS**DATE FIRST
MARKETED****(Fidelity Security Life Insurance Company (cont'd))**

EyeMed Vision Plan	C-9083MA (05/17)	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 (05/17)	Vision	05/10
w/ EyeMed Access Vision Network			
w/ EyeMed Advantage Vision Network			
w/ EyeMed Insight Vision Network			
w/ EyeMed Select Vision Network			

17. First Health Life and Health Insurance Company ¹¹

3200 Highland Ave.	Attn: Customer Service
Downers Grove, IL 60515	(800) 252-0227

Product Name:	Form #:	Product Type:	
Dental PPO	MHBP01C-MA 0911	Dental	07/12
with DentalGuard Network ¹¹			

18. 4 Ever Life Insurance Company

100 Matsonford Road	Attn: GEO BLUE - Administrator
One Radnor Corporate Center, Suite 100	(855) 682-7965
Radnor, PA 19087	

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

19. (The) Guardian Life Insurance Company of America

7 Hanover Square	Attn: Group Sales
New York, New York 10004	(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

20. Harvard Pilgrim Health Care, Inc. (d/b/a Harvard Community Health Plan) ¹²

93 Worcester Street	Attn: Sales Department
Wellesley, MA 02481	(781) 251-1500 or (800) 848-9995

Product Name:	Form #:	Product Type:	
Value PPO 15 (Plan Name 07) ¹²	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;	Medical	06/98
MABBPOSOB81 REV1			

¹¹ First Health Life and Health Insurance Company notified the Division that plan is intended to be offered to only federal employees.

¹² Previously approved plan known as Harvard Pilgrim PPO (Form# MAGPPO1; MAGPPOSB and MAPPO3T2).

CARRIER NAME AND ADDRESS**DATE FIRST
MARKETED****(Harvard Pilgrim Health Care, Inc. (cont'd))**

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

21. 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 ^{PPO}	HNE/PHCS-PPOSaver-06	Medical	02/06
HNE MedPlus PPO	HNE/PHCS/PPO-07- Medicare-Grp	Medicare Wraparound	07/08

22. 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; MAG1PPOREVS0B; 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 SM Best Buy PPO	1456 (Grp)/1459 (Ind) & SOB1455	Medical	07/12

23. 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

24. Humana Insurance Company¹³

1100 Employers Blvd
De Pere, WI 54115

Attn: Sales Department
1-920-336-1110

Product Name:	Form #:	Product Type:	
Dental Plan Certificate ¹³	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

¹³ 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.

25. The Lincoln National Life Insurance Company8801 Indian Hills Drive
Omaha, NE 68114Attn: Customer Experience
1-800-423-2765Product Name:
Group Dental InsuranceForm #:
GL11/GL12 SeriesProduct Type:
Dental

10/08

26. Massachusetts Vision Service Plan, Inc.Vision Service Plan
8 Faneuil Hall Marketplace, Suite 300
Boston, MA 02109Attn: Group Sales
(617)-973-5044Product Name:
Group Vision Care PlanForm #:
REG EOC-7/00Product Type:
Vision

08/00

27. Metropolitan Life Insurance Company^{14, 15}P.O. Box 981282
El Paso, TX 79998-1282Attn: Customer Service
1-800-942-0854Product Name:
MetLife Preferred Dentist Program
ClassicForm #:
G.23000-13EMA1
GCERT2000 den/classic

Product Type:

Dental 06/98

Dental 08/06

Value

G.23000-13EMA2
GCERT2000 den/value

Dental 06/98

Dental 08/06

PDP Copay Plan

G.23000-13EMA3
GCERT2000 den/copayrc

Dental 02/04

Dental 08/06

Individual Dental Policy

IND-DENTAL-2015 &
IND-DENTAL-2015-FSD¹⁵

Dental 01/17

28. Mid-West National Life Insurance Company of Tennessee¹⁶9151 Grapevine Highway
North Richland Hills, TX 76180Attn: Kathy Melish
(508) 668-1951Product Name:
Vision Insurance Certificate
Vision One Plus Program¹⁶Form #:
MW-25213-MA (3/06)
25213-P

Product Type:

Vision 11/01

Vision 12/92

29. MONY Life Insurance Company of America2999 North 44th Street, Suite 250
Phoenix, Arizona 85018

(800) 777-6510]

Product Name:
Group Dental InsuranceForm #:
MOEBC15Product Type:
Dental

12/16

¹⁴ Metropolitan Life Insurance Company offers website access for its group dental business - www.metlife.com/insurance/dental-insurance; website access for its individual dental business may be located as follows: www.metlifetakealongdental.com.¹⁵ Plan designed as a dental group conversion plan offered to former group plan enrollees who lose access to their group dental plan.¹⁶ On December 29, 2015 Mid-West National Life Insurance Company of Tennessee ("Mid-West") advised the Division that it no longer markets any new vision plans but continues to administer a closed block of business. 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.

30. National Guardian Life Insurance Company

2 East Gilman Street
Madison, WI 53703

Superior 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. NBHCert-280(2014) PPO MA		Medical	08/14
Network Options:			
w/ First Health Group Corp. ("First Health") w/MultiPlan, Inc. ("MPI")w/ Cigna PPO			

31. National Union Fire Insurance Company of Pittsburgh, Pa. ¹⁷

99 High Street
31st Floor
Boston, MA 02110

Attn: 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

32. Nationwide Life Insurance Company ¹⁸

c/o Consolidated Health Plans
195 Stafford Street
Springfield, Massachusetts 01104-3503

Ms. Deborah K. Saremi
(800) MED-STOP x127

Product Name:	Form #:	Product Type:	
Student Accident and Sickness Insurance Program ¹⁸	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

33. 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

¹⁷ 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.

¹⁸ 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.

34. Principal Life Insurance Company^{19, 20, 21, 22}

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) ¹⁹	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 ²⁰			
Insurance PPO Plan ²¹	GC 7000	Dental	12/03
Group Dental Expense Ins. Ind/PPO	GC 7100	Dental	03/08
Group Dental Expense ²²	GC 7200	Dental	04/15
Group Vision Expense	GC 9000	Vision	05/14

35. Reliance Standard Life Insurance Company

2001 Market Street, Suite 1500
Philadelphia, PA 19103

Attn: Boston Regional Sales Office
(617) 210-4860

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
Group Eye Care Insurance	9021 ed. 02-17 et al.	Dental	12/17
w/ Vision Service Plan, Inc. (“VSP”)			

36. Renaissance Life and Health Insurance Company of America^{23, 24}

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 ²³	Dental	10/08
Individual Dental Policy			
Dental PPO Plan			
(w Delta Dental Network) ²⁴	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		

¹⁹ 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.

²⁰ 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.

²¹ 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.

²² Principal Life Insurance Company notified the Division in May 2017 that the Group Dental Expense (Form# GC7200) is no longer offered to new business.

²³ Policy Form INVD-100A-2016-MA replaces the originally approved form INVD 100A.

²⁴ Plan intended to be offered solely on a group conversion basis.

CARRIER NAME AND ADDRESS**DATE FIRST
MARKETED****37. Standard Insurance Company**

900 SW Fifth Avenue
Portland, Oregon 97204-1282

Attn: Group Vision & Dental
(800) 547-9515

Product Name: Form #: Product Type:
Group Dental & Eye Care 9021 ed. 04-13 Dental 08/03
Group Eye Care Insurance 9021 ed. 02-17 et al. Dental 12/17
w/ Vision Service Plan, Inc. ("VSP")

38. Starmount Insurance Company

8485 Goodwood Boulevard P.O. Box 98100
Baton Rouge, LA 70806

Attn.: Unum Dental & Vison
(888) 400-9304

Product Name: Form #: Product Type:
Group Vision Care Insurance VI-2007CT-MA Vision 08/17
Group Dental w/DenteMax DN-2015GRPCT-MA Dental 02/18

39. Sun Life Assurance Company of Canada ²⁵, ²⁶

One Sun Life Executive Park
Wellesley Hills, MA 02481

Attn: Client Services
(800) 247-6875

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

40. 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

41. Tufts Insurance Company ²⁷, ²⁸

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 ²⁷ MA-TICOPPO-001 Ed.1-2012 Medical 01/03
Student Health PPO ²⁸ MA-TICOPPO-003 Medical 01/14

²⁵ 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.

²⁶ Sun Life Assurance Company of Canada ("SLOC") notified the Division on August 24, 2016 that it had purchased Assurant's Employee Benefits Group ("AEB") on March 1, 2016. The transaction was effected primarily via reinsurance agreements with Union Security Insurance Company ("USIC"). SLOC now reinsures and administers USIC's vision business and will continue until the coverage terminates or groups purchase coverage with another carrier.

²⁷ Form approved on October 8, 2003 and replaces originally approved form # MA-TICOPPO-001 Ed.4-2003.

²⁸ Tufts Insurance Company notified the Division on March 2, 2017 that it has discontinued marketing its student health and sports

CARRIER NAME AND ADDRESS**DATE FIRST
MARKETED****(Tufts Insurance Company (cont'd))**

Sports Accident PPO ²⁸	MA-TICPPO-SPACC-001	Accident Only	01/15
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42. Unicare Life & Health Insurance Company ²⁹

233 S. Wacker Drive	Attn: Customer Service
Suite 3700	(800) 627-0004
Chicago, IL 60606	

Product Name:	Form #:	Product Type:	
Unicare Classic PPO ²⁹	GCR100 et al.	Medical	01/97
Wellpoint Dental PPO	CGR 130	Dental	01/97

43. Union Security Insurance Company

P.O. Box 3050	Attn: Client Services
Milwaukee, WI 53201-3050	(800) 443-2995 (Dental & Vision inquiries)
2323 Grand Boulevard	(800) 345-5705 Boston Group Sales Office
Kansas City, MO 64108	

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

44. United Concordia Insurance Company ³⁰

Northwoods Crossing Office Park	Attn: Russ Rubin
4401 Deer Path Road	Group Sales
Harrisburg, PA 17110	(888) 884-8224

Product Name:	Form #:	Product Type:	
Concordia Preferred	MA9804-B (06/17)	Dental	06/04
w/Advantage Plus 2.0 network or			
w/ Elite Plus Network ³⁰			
Preferred Schedule of Benefits	MA 9808 0316		
Flex Schedule of Benefits	MA 9806 0316		

accident products; all existing business will not be renewed upon group anniversary.

²⁹ 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.

³⁰ Dental plan is offered with a choice of two networks: Advantage Plus 2.0 and Elite Plus. The Elite Plus Network was placed on file as of June 15, 2017.

CARRIER NAME AND ADDRESS**DATE FIRST
MARKETED****45. UnitedHealthcare Insurance Company^{31, 32, 33, 34, 35, 36}**

950 Winter Street
Waltham, MA 02451

Attn: Sale Department
(888)735-5842

Product Name:	Form #:	Product Type:	
Choice Plus		Medical	11/01
Small Group	COC17.CER.I.11.SG.MA & SBN17.CHP.I.11.SG.MA		
Large Group ³¹	COC17.CER.I.11.LG.MA & SBN17.CHP.I.11.LG.MA		
Options PPO ³²	COC17.CER.I.11.LG.MA & SBN17.OPT.I.11.LG.MA		
Non-Differential ³³	COC17.CER.I.11.LG.MA & SBN17.NDF.I.11.LG.MA		
Dental Certificate of Coverage ³⁴	DCOC.CER.06 AZ [Rev. 1/06] et al	Dental	07/00
Blanket Student PPO Injury & Sickness Benefits Group Policy ³⁵	COL-17-MA CERT & COL-17-MA SOB PPO	Medical	07/07
Transplant Benefit Certificate ³⁶	UCC-CERT-MA (02/04)	Medical (Transplant Only)	08/07
Group Vision Care	VCOC.INT.06	Vision	05/08

46. United of Omaha Life Insurance Company

Mutual of Omaha Plaza
Omaha, NE 68175

Attn: Renaissance Administrators
(877) 999-2330

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

³¹ Choice Plus forms COC17.CER.I.11.LG.MA & SBN17.CHP.I.11.LG.MA replace the following previously approved forms COC.ACA15.CER.I.11.MA.KA, COC.AMD16.I.11.MA.KA & SBN.16.CHP.I.11.MA.KA.

³² UnitedHealthcare Insurance Company confirmed that it markets the product to only Large Group (100+) size employer groups. Options PPO forms COC17.CER.I.11.LG.MA & SBN17.OPT.I.11.LG.MA replace the following previously approved forms COC.ACA15.CER.I.11.MA.KA COC.AMD16.I.11.MA.KA & SBN.16.OPT.I.11.MA.KA.

³³ Options PPO Non-Differential forms COC17.CER.I.11.LG.MA & SBN17.NDF.I.11.LG.MA replace the following previously approved forms COC.AMD16.I.11.MA.KA SBN16.NDF.I.11.MA.KA.

³⁴ Form# DCOC.CER.06 AZ [Rev. 1/06] et al. replaces the originally approved Form# DCE.

³⁵ Form# COL-17-MA CERT replaces Form# 12-BR-MA-PPO which had replaced the originally approved Form# COL-06-MA.

³⁶ UnitedHealthcare Insurance Company confirmed that it markets this product to only self-funded employer groups.