



STATE OF CONNECTICUT

INSURANCE DEPARTMENT

Market Conduct Report of OptumHealth Care Solutions, LLC

March 15, 2022

From December 6, 2021 through March 11, 2022, the Market Conduct Division of the Connecticut Insurance Department examined the utilization review practices of OptumHealth Care Solutions, LLC (the Company), using a sample period of August 1, 2020 through December 31, 2020. The examination was limited to Connecticut enrollees.

OptumHealth Care Solutions, LLC has its home office in the State of Minnesota and is licensed as a utilization review entity in the State of Connecticut under license number 200001116. By authority granted under §38a-591 of the Connecticut General Statutes, this examination was conducted by Market Conduct examiners of the State of Connecticut Insurance Department (the Department) at the Department's offices in Hartford, Connecticut.

The purpose of the examination was to evaluate the Company's utilization review practices in the State of Connecticut. From a listing of utilization reviews performed by the Company, the examiners reviewed one hundred fifty-three (153) sample files, which included complaints and approved, denied and appeal certifications during the examination period.

The Department's findings are as follows:

- The examiners verified that one (1) appeal determination was not made within the required forty-eight hours of the receipt of the request for review, upon the receipt of all information reasonably required to make expedited appeal determinations.
- The examiners verified that one (1) determination letter not to certify care failed to provide the correct link to such rule, guideline, protocol or other similar criterion of such health carrier's Internet web site in order to access the clinical criteria online.
- The examiners verified that thirteen (13) determination letters not to certify care did not reflect forty-eight hours after the health carrier receives such request or seventy-two hours after such health carrier receives such request if any portion of such forty-eight-hour period falls on a weekend with regard to an urgent care request.
- The examiners verified that sixty-one (61) determinations not to certify care failed to use the determination letter of the entity licensed by the Insurance Commissioner.
- The examiners verified that four (4) appeal determinations failed to use the determination letter of the entity licensed by the Insurance Commissioner.

- The examiners verified that the Company did not implement production of the determination letters not to certify care for its 2020 license renewal until January 26, 2022.

It is recommended that the Company review its policies and procedures to ensure that expedited appeal determinations are made within the 48-hour requirement, the correct link to such rule, guideline, protocol or other similar criterion of such health carrier's Internet web site is included in determinations not to certify care, and not to include determination letters that are not approved by the Insurance Commissioner, as required by statute.

It is further recommended that the Company adhere to the Department's utilization review data requirements to ensure that all data is properly reported from all Company platforms.

In addition, the Company is instructed to comply with the following:

- Review its policies and procedures to ensure that the Company timely responds and implements changes to all determination letters as required by the Life & Health Division. The Department requests that the Company work with the Department's Life & Health Division on compliance. The Department further requests that the Company provide the Market Conduct Division an update on actions taken to address the concerns outlined above to implement production of determination letters within sixty (60) days of approval of the letter templates for its 2023 renewal.



STATE OF CONNECTICUT

INSURANCE DEPARTMENT

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 IN THE MATTER OF : DOCKET MC 22-25
 OptumHealth Care Solutions, LLC :
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STIPULATION AND CONSENT ORDER

It is hereby stipulated and agreed between OptumHealth Care Solutions, LLC and the State of Connecticut Insurance Department by and through Andrew N. Mais, Insurance Commissioner ("Insurance Commissioner") to wit:

I

WHEREAS, pursuant to a market conduct examination, the Insurance Commissioner alleges the following with respect to OptumHealth Care Solutions, LLC:

1. OptumHealth Care Solutions, LLC, hereinafter referred to as Respondent, is domiciled in the State of Minnesota and is licensed to transact the business of a utilization review entity in the State of Connecticut under license number 200001116.
2. From December 6, 2021 through March 11, 2022, the Department conducted an examination of Respondent's utilization review practices in the State of Connecticut covering the period from August 1, 2020 through December 31, 2020.
3. During the period under examination, Respondent failed to establish consistent practices and/or procedures to ensure compliance with statutory requirements for:
 - a. in one instance notification of a determination not to certify care, admission or procedure within 48 hours of the receipt of the request for review, upon the receipt of all information reasonably required to make expedited appeal determinations.
 - b. in one instance providing a reference to the correct web link to access the clinical criteria online.
 - c. thirteen adverse determination letters did not include the complete language to notify members of the internal expedited appeal timeframe within forty-eight hours after the health carrier receives such request or seventy-two hours after such health carrier receives such request if any portion of such forty-eight-hour period falls on a weekend with regard to an urgent care request as evidenced in several determination letters.
 - d. using a determination letter of the entity licensed by the Insurance Commissioner.

4. The Department finds that the conduct described in paragraph 3 is not compliant with relevant portions of §38a-591d of the Connecticut General Statutes and §38a-591-8 of the Regulations of Connecticut State Agencies and constitutes cause for the imposition of a fine or other administrative penalty under §38a-591k of the Connecticut General Statutes.

II

1. WHEREAS, Respondent admits to the allegations contained in paragraph three of Article I of this Stipulation; and
2. WHEREAS, Respondent agrees to review its utilization review practices and procedures identified as concerns during the market conduct examination, as described in the Examination of Utilization Review Practices Report and this Stipulation, and bring them into immediate compliance with Connecticut Statutes; and
3. WHEREAS, Respondent agrees to provide the Insurance Commissioner with a full report of finding and a summary of actions taken to comply with the requirements of paragraph two of this section within ninety (90) days of the date of this document; and
4. WHEREAS, Respondent, being desirous of terminating this proceeding without the necessity of a formal proceeding or further litigation, does consent to the making of this Final Order and voluntarily waives:
 - a. any right to a hearing; and
 - b. any requirement that the Insurance Commissioner's decision contain a statement of findings of fact and conclusion of law; and
 - c. any and all rights to object to or challenge before the Insurance Commissioner or in any judicial proceeding any aspect, provision or requirement of this Stipulation
5. WHEREAS, Respondent agrees to pay a fine in the amount of \$13,500.00 for the violations described herein.

NOW THEREFORE, upon the consent of the parties, it is hereby ordered and adjudged:

1. That the Insurance Commissioner has jurisdiction of the subject matter of this administrative proceeding.
2. That Respondent is fined the sum of Thirteen Thousand Five Hundred Dollars (\$13,500.00) for the violations herein above described.

OPTUMHEALTH CARE SOLUTIONS, LLC

BY: 
(Representative of Utilization Review Entity)

CERTIFICATION

The undersigned deposes and says that he/she has duly executed this Stipulation and Consent Order on this 13 day of June 2022 for and on behalf of OptumHealth Care Solutions, LLC that he/she is the Asst Secretary of such company, and he/she has authority to execute and file such instrument.

BY: [Signature]

State of Minnesota
County of Hennepin

Personally appeared on this 13 day of June 2022,
Heather Chang signer and sealer of the foregoing Stipulation and Consent Order, acknowledged same to be his/her free act and deed before me.

[Signature]
Notary Public/Commissioner of the Superior Court



Section Below To Be Completed by State of Connecticut Insurance Department

Dated at Hartford, Connecticut this 21 day of June 2022.

[Signature]
Andrew N. Mais
Insurance Commissioner