



Aetna Life Insurance Company  
P.O. BOX 981106  
EL PASO, TX 79998-1106

Statement date: January 30, 2015

Member: SENTHIL K MURUGAN  
Member ID: W204684271  
Group #: 0479265-18-001 A P1!%\_0  
Group name: MERCK & CO., INC.

QUESTIONS? Contact us at aetna.com  
1-800-541-6711  
Or write to the address shown above.

SENTHIL K MURUGAN  
110 GALWAY CIR  
CHALFONT PA 18914-3900

**THIS IS NOT A BILL**  
Keep this for your records

Explanation of benefits:

Track your health care costs

**\$61.95**

Amount you owe or already paid

Amount billed \$97.00

Plan payments and discounts - \$35.05

You owe \$61.95

\$35.05 \$61.95

\$0 ..... \$97.00

**\$35.05**

Amount you saved

Going to a doctor or hospital in the network saves you money.

That's because we have arranged discounted rates with these providers.

The online provider directory can help you find a doctor or other health care professional. Just go to [www.aetna.com](http://www.aetna.com).

**\$938.05 (Family In-network)**

Amount you have left to meet deductible

Annual deductible \$1,000.00

Deductible used - \$61.95

Deductible remaining \$938.05

\$61.95 \$938.05

\$0 ..... \$1,000.00

A guide to key terms

Term	This means	Your totals
Amount billed:	The amount your doctor or health care provider billed for services.	\$97.00
Member rate:	The agreed upon amount the in-network doctor or health care provider accepts as their fee.	\$61.95
Amount you saved:	The difference between the amount billed and the in-network arranged pricing.	\$35.05
Pending or not payable:	A claim that needs more review by us or an amount we did not pay. You may or may not have to pay this. Read 'Your Claim Remarks' to learn more.	\$0.00
Deductible:	The amount you pay before your health plan will pay benefits.	\$61.95
Coinsurance:	When you pay part of the bill and we pay part of the bill. This is your out-of-pocket amount.	\$0.00
Copay:	A fixed dollar amount you pay when you visit a doctor or other health care provider.	\$0.00
Other health plan:	This is known as coordination of benefits (COB). When a member has more than one health plan, both plans' payments will not be more than the billed amount. See 'Your claims up close' for other plan details.	

**Go paperless!**

View this EOB online in your secure member website. We'll notify you via email whenever you get a new EOB. You can go paperless now by texting PAPER to 77948. Why not give it a try?

**Planning ahead**

When is the best time to find a doctor or dentist? It's before you need one, when you are feeling healthy and have time to make a careful choice.

## Your payment summary

Your plan paid					You owe or already paid
Patient	Provider	Amount	Sent to	Date	Amount
Senthil (self)	LMG Family Practice	\$0.00			\$61.95
Total:		\$0.00			\$61.95

## Your claims up close

### Claim for Senthil (self)

Claim ID: ETJLKCWDY00 Received on 1/22/15	Amount billed	Member rate	Pending or not payable (Remarks)	Applied to deductible	Your copay	Amount remaining	Plan pays	Your coinsurance	You may owe C+D+E+H=I
OFFICE VISIT on 1/13/15 99213 LMG Family Practice Refer to Remarks Section	97.00	61.95	(1)	61.95					*See below
Totals:	97.00	61.95		61.95					\$61.95
	A	B	C	D	E	F	G	H	I

You can find all numbered claim remarks in 'Your Claim Remarks' section.

#### Coordination with Other Health Plan

Plan Amount Remaining (before Other Health Plan)	\$0.00
This Plan Benefit (before Other Health Plan)	\$0.00
Other Health Plan Paid	\$0.00
This Plan Payment (after Other Health Plan)	\$0.00
* Patient Responsibility (after Other Health Plan)	\$61.95

## Your Claim Remarks

### General Remarks:

- (1) Your provider may have sent diagnosis codes with your claim. You may obtain these codes and their meanings by contacting us at the number listed at the top of the first page. We will also provide your treatment codes and their meanings, if they do not appear on this statement. If you have questions about your diagnosis or your treatment, please contact your provider. [H63]

## Your benefit balances to date for 1/1/15 to 12/31/15

Description		
Individual	Annual limit	Amount remaining
<b>Senthil (self)</b>		
Medical In Network Deductible	\$500.00	\$438.05
Medical In Network Coinsurance	\$3,500.00	\$3,438.05
Medical Out of Network Deductible	\$1,000.00	\$938.05
Medical Out of Network Coinsurance	\$7,000.00	\$6,938.05
<b>Family</b>		
Medical In Network Deductible	\$1,000.00	\$938.05
Medical In Network Coinsurance	\$7,000.00	\$6,938.05
Medical Out of Network Deductible	\$2,000.00	\$1,938.05
Medical Out of Network Coinsurance	\$14,000.00	\$13,938.05

### Make better health decisions and take action with confidence

With iTriage - a free healthcare app - you can find answers to your medical questions. Search symptoms and conditions, store your health information, and find local doctors. Text iTriage to 31996 to download the free app or visit [www.itriagehealth.com](http://www.itriagehealth.com).

### It's all about balance

You don't have to give up your favorite foods, but don't eat too much of one thing. Your body needs a variety of vitamins and nutrients that you can get from eating grains, vegetables, fruits, dairy products and meats.

Si necesita asistencia lingüística en español, llámenos al número que figura en su tarjeta de identificación (ID) médica.

Pour une aide en français, veuillez nous appeler au numéro figurant sur votre carte d'identité.

若需要中文协助，请拨打您医疗身分证上的电话联系我們。

Para sa tulong sa wikang Tagalog, tawagan kami sa numero na nasa iyong Medikal na ID card.

Ya'áti' t'áá dinék'ehjí bee aká'a'áyeed biniiyé, nihich'í' hodiínihjí' éí azeé' ál'íidi naaltsoos bee nées ho'dílnígíí number bikáá' yisdzoh.

Für Auskünfte auf Deutsch rufen Sie einfach die Nummer auf Ihrer Krankenversicherungskarte an.

Do you need this in another language? Call us.

## More Information

**Do you have questions? Call us free of charge at the toll-free number on the first page of this statement or on your member ID card.**

### Appeals

**Please send your written appeal along with a copy of this entire EOB to this address:**

Appeals Resolution Team  
PO Box 14463  
Lexington, KY 40512

If you disagree with a claim decision, you can ask us to review it. The process is called an appeal. You or someone you name to act for you, your authorized representative, can ask for this review. Call our Member Services Department using the telephone number displayed on the member ID card or send your written request to the above address.

Your request should include:

- Name, date of birth, and address
- Member ID number
- Group ID and name of your group, usually your employer
- Any other claim documents or records or other facts you would like us to consider. This could be new details that you did not give us the first time.

You have the right to look at the relevant documents we used to make our decision on your claim. A copy of the specific rule, guideline, or protocol relied upon in the adverse benefit determination will be provided free of charge upon request by you or your authorized representative. You can ask for these (free of charge) by calling or writing us. You have 180 days from the time you get this explanation to appeal. You might even have more time if your plan brochure or Summary Plan Description says so.

### When to expect a decision

- If your plan allows for one appeal we'll let you know our decision 60 days after we get your appeal request. Some states might require a different time period.
- Your plan may allow two appeals. In that case, we will let you know our first decision 30 days from the date we receive your appeal request, unless your state gives us a different amount of time. If you don't agree with that first decision, you have a second chance to appeal.

### What happens next

If you appeal, we will review our decision and provide you with a written determination. If we continue to deny the payment, coverage, or service requested or you do not receive a timely decision, you may be able to request an external review of your claim by an independent third party, who will review the denial and issue a final decision.

### Employer sponsored plans

If you don't agree with our final decision, you may have the right to bring a lawsuit under Section 502(a) of a law called ERISA. Check with your employee benefits coordinator to see which appeals process your plan allows and if your plan is governed by ERISA.

### Coordination of benefits

If you are covered by more than one health benefit plan, you should file all your claims with each plan.

### Your privacy

Your health information is confidential. Any information you give us will be kept private. When contacting us about this notice or for help with other questions, please be prepared to provide your member name, member ID, and date of birth.

### Prevent fraud

If you suspect fraud or abuse involving these services or would like to report other healthcare fraud-related issues, please call the toll-free hotline at 1-800-338-6361 or e-mail us at [aetnasiu@aetna.com](mailto:aetnasiu@aetna.com).

### Resources available to help you

Need help understanding this notice or our decision? **Call us free of charge at the toll-free number on your medical ID card.**

There are also other resources available to help you. Most plans are now subject to health care reform law. Call us or ask your employer if your plan is subject to the law. If it is, you can also contact the Employee Benefits Security Administration at 1-866-444-EBSA (3272) for help, if your health plan is provided by your employer. **In addition, some states offer a Consumer Assistance Program. Refer to the list of Consumer Resource Information for States and Territories to see if your state is on the list. If you have questions, contact the Consumer Assistance Program for your state only.**

## Consumer Resource Information for States and Territories

State	Mailing Address, Telephone, E-Mail, and/or Web Address
AR	<p>Consumer Assistance Program: Arkansas Insurance Department, Consumer Services Division, 1200 West Third St., Little Rock, AR 72201            Tel: 855-332-2227, E-Mail: <a href="mailto:Insurance.consumers@arkansas.gov">Insurance.consumers@arkansas.gov</a>            Arkansas Department of Insurance - for insured plans only: Arkansas Insurance Department Consumer Services Division, 1200 West Third St., Little Rock, AR 72201            Tel: 800-282-9134, Web: <a href="http://insurance.arkansas.gov/">http://insurance.arkansas.gov/</a></p>
AZ	<p>Arizona Department of Insurance Consumer Services, 2910 N. 44th Street, Ste. 210, Phoenix, AZ 85018-7269            Tel: 800-325-2548, 602-364-2499 (Phoenix), 602-364-2977 (Spanish)            E-Mail: <a href="mailto:consumers@azinsurance.gov">consumers@azinsurance.gov</a>, Web: <a href="http://www.id.state.az.us/">http://www.id.state.az.us/</a></p>
CA	<p>Consumer Assistance Program: California Department of Managed Health Care and Department of Insurance, 980 9th St Suite #500, Sacramento, CA 95814            Tel: 888-466-2219, Web: <a href="http://www.HealthHelp.ca.gov">http://www.HealthHelp.ca.gov</a>            California Department of Insurance - for insured plans only: California Department of Insurance, Consumer Services Division, 300 South Spring Street, South Tower, Los Angeles, CA 90013            Tel: 800-927-4357, Web: <a href="http://www.insurance.ca.gov/">http://www.insurance.ca.gov/</a></p>
CT	<p>Connecticut Department of Insurance, 153 Market Street, Hartford, CT 06103            Tel: 800-203-3447, Web: <a href="http://www.ct.gov/cid/cwp/view.asp?a=1272&amp;Q=480608">http://www.ct.gov/cid/cwp/view.asp?a=1272&amp;Q=480608</a></p>
DC	<p>Consumer Assistance Program: District of Columbia Healthcare Finance, Office of the Ombudsman, 441 4th St., NW (9th and 10th Fl.), Washington, DC 20001            Tel: 877-685-6391, E-Mail: <a href="mailto:healthcareombudsman@dc.gov">healthcareombudsman@dc.gov</a>, Web: <a href="http://ombudsman.dc.gov">http://ombudsman.dc.gov</a>            District of Columbia Department of Insurance - for insured plans only: 810 First Street, NE, Suite 701, Washington, DC 20002            Tel: 202-727-8000, E-Mail: <a href="mailto:disb@dc.gov">disb@dc.gov</a></p>
DE	<p>Insurance Commissioner and Department of Insurance, 841 Silver Lake Blvd, Dover, DE 19904            Tel: 302-674-7300, E-Mail: <a href="mailto:consumer@state.de.us">consumer@state.de.us</a>, Web: <a href="http://www.delawareinsurance.gov/">http://www.delawareinsurance.gov/</a></p>
GA	<p>Georgia Office of Insurance and Safety Fire Commissioner, Consumer Services Division, 2 Martin Luther King, Jr. Drive, West Tower, Suite 716, Atlanta, GA 30334            Tel: 800-656-2298, Web: <a href="http://www.oci.ga.gov/consumerservice/home.aspx">http://www.oci.ga.gov/consumerservice/home.aspx</a></p>
Guam	<p>Guam Department of Insurance, Dept. of Revenue &amp; Taxation, Taxpayer Services Division, P.O. Box 23607, GMF, Guam 96921            Fax: 671-633-2643, E-Mail: <a href="mailto:pinadm@revtax.gov.gu">pinadm@revtax.gov.gu</a>, Web: <a href="https://www.guamtax.com">https://www.guamtax.com</a></p>
IA	<p>Iowa State Insurance Division, Consumer Advocate Bureau, 330 Maple Street, Des Moines, Iowa 50319            Tel: 515-281-5705, 877-955-1212, E-Mail: <a href="mailto:consumer.advocate@iid.iowa.gov">consumer.advocate@iid.iowa.gov</a>, Web: <a href="http://insuranceca.iowa.gov/">http://insuranceca.iowa.gov/</a></p>
IL	<p>Consumer Assistance Program: Illinois Department of Insurance, 100 Randolph St., 9th Floor, Chicago, IL 60601            Tel: 877-527-9431, Web: <a href="http://www.insurance.illinois.gov">http://www.insurance.illinois.gov</a>            Illinois Department of Insurance - for insured plans only: 320 W. Washington St, Springfield, IL 62727            Tel: 866-445-5364, Web: <a href="http://www.insurance.illinois.gov">http://www.insurance.illinois.gov</a></p>
KS	<p>Consumer Assistance Program: Kansas Insurance Department, Consumer Assistance Division, 420 SW 9th Street, Topeka, KS 66612            Tel: 800-432-2484 (in state), 785-296-7829 (all others), E-Mail: <a href="mailto:CAP@ksinsurance.org">CAP@ksinsurance.org</a>,            Web: <a href="http://www.ksinsurance.org">http://www.ksinsurance.org</a>            Kansas Department of Insurance - for insured plans only: Kansas Insurance Department, Consumer Assistance Division, 420 SW 9th Street, Topeka, KS 66612            Tel: 785-296-3071, E-Mail: <a href="mailto:commissioner@ksinsurance.org">commissioner@ksinsurance.org</a></p>
KY	<p>Kentucky Health Insurance Advocate, Department of Insurance, P.O. Box 517, Frankfort, KY 40602-0517            Tel: 877-587-7222, E-Mail: <a href="mailto:DOI.CAPOmbudsman@ky.gov">DOI.CAPOmbudsman@ky.gov</a>, Web: <a href="http://healthinsurancehelp.ky.gov">http://healthinsurancehelp.ky.gov</a></p>
MA	<p>Massachusetts Division of Insurance, Customer Services Division, 1000 Washington Street, Suite 810, Boston, MA 02118-6200            Tel: 877-563-4467, Web: <a href="http://www.mass.gov/doi">http://www.mass.gov/doi</a></p>

## Consumer Resource Information for States and Territories

State	Mailing Address, Telephone, E-Mail, and/or Web Address
MD	<p>Consumer Assistance Program: Maryland Office of the Attorney General, Health Education and Advocacy Unit, 200 St. Paul Place, 16th Floor, Baltimore, MD 21202            Tel: 877-261-8807, E-Mail: <a href="mailto:heau@oag.state.md.us">heau@oag.state.md.us</a>, Web: <a href="http://www.oag.state.md.us/Consumer/HEAU.htm">http://www.oag.state.md.us/Consumer/HEAU.htm</a>            Maryland Department of Insurance - for insured plans only: Maryland Insurance Administration, 200 St. Paul Place, Suite 2700, Baltimore, MD 21202            Tel: 800-492-6116, Web: <a href="http://www.mdinsurance.state.md.us">http://www.mdinsurance.state.md.us</a></p>
ME	<p>Consumer Assistance Program: Maine Consumer Assistance Program, Consumers for Affordable Healthcare, 12 Church Street, Augusta, ME 04338            Tel: 800-965-7476, E-Mail: <a href="mailto:consumerhealth@mainecahc.org">consumerhealth@mainecahc.org</a>, Web: <a href="http://www.mainecahc.org">http://www.mainecahc.org</a>            Maine Department of Insurance - for insured plans only: Department of Professional &amp; Financial Regulation, Bureau of Insurance, #34 State House Station, Augusta, ME 04333-0034            Tel: 800-300-5000 (toll free in Maine), 207-624-8475, E-Mail: <a href="mailto:Insurance.PFR@maine.gov">Insurance.PFR@maine.gov</a></p>
MI	<p>Consumer Assistance Program: Michigan Department of Insurance and Financial Services, HICAP, 611 W. Ottawa Street, Lansing, MI 48933            Tel: 877-999-6442, Web: <a href="http://www.michigan.gov/HICAP">http://www.michigan.gov/HICAP</a>            Michigan Department of Insurance - for insured plans only: DIFS, P. O. Box 30220, Lansing MI 48909-7720            Tel: 877-999-6442, E-Mail: <a href="mailto:difs-info@michigan.gov">difs-info@michigan.gov</a></p>
MO	<p>Consumer Assistance Program: Missouri Department of Insurance, 301 W. High Street, Room 830, Jefferson City, MO 65101            Tel: 800-726-7390, E-Mail: <a href="mailto:consumeraffairs@insurance.mo.gov">consumeraffairs@insurance.mo.gov</a>, Web: <a href="http://www.insurance.mo.gov">http://www.insurance.mo.gov</a>            Missouri Department of Insurance - for insured plans only: P. O. Box 690, Jefferson City, MO 65102-0690            Tel: 573-751-4126, Web: <a href="http://insurance.mo.gov/">http://insurance.mo.gov/</a></p>
MP	<p>Consumer Assistance Program: Department of Commerce, Caller Box 10007 CK, 2nd Floor, Saipan, MP 96950            Tel: 670-644-3005, Web: <a href="http://cnmicap.wordpress.com">http://cnmicap.wordpress.com</a>            North Marianas Department of Insurance - for insured plans only: CNMI Department of Commerce, Caller box 10007, Saipan, MP 96950            Tel: 670-644-3000, E-Mail: <a href="mailto:info@commerce.gov.mp">info@commerce.gov.mp</a></p>
MS	<p>Consumer Assistance Program: Health Help Mississippi, 800 North President Street, Jackson, MS 39202            Tel: 877-314-3843, E-Mail: <a href="mailto:healthhelpms@mhap.org">healthhelpms@mhap.org</a>, Web: <a href="http://www.healthhelpms.org">http://www.healthhelpms.org</a>            Mississippi Department of Insurance - for insured plans only: P.O. Box 79, Jackson, MS 39205-0079            Tel: 800-562-2957 (Consumers Only), Web: <a href="http://www.mid.ms.gov/">http://www.mid.ms.gov/</a></p>
MT	<p>Montana Commissioner of Securities and Insurance, 840 Helena Avenue, Helena, MT 59601            Tel In-state only: 800-332-6148, 406-444-2040, Web: <a href="http://www.csi.mt.gov/consumers/consumers.asp">http://www.csi.mt.gov/consumers/consumers.asp</a></p>
NC	<p>Consumer Assistance Program: Health Insurance Smart NC, North Carolina Department of Insurance, 430 N. Salisbury Street, Suite 1018, Raleigh, NC, 27603            Tel: 855-408-1212, Web: <a href="http://ncdoi.com/Smart/">http://ncdoi.com/Smart/</a>            North Carolina Department of Insurance - for insured plans only: Services for Consumers, 1201 Mail Service Center, Raleigh, NC 27699-1201, Tel: 800-546-5664, Web: <a href="http://www.ncdoi.com/">http://www.ncdoi.com/</a></p>
NH	<p>New Hampshire State Insurance Department, 21 South Fruit Street, Suite 14, Concord, NH 03301            Tel: 800-852-3416, E-Mail: <a href="mailto:consumerservices@ins.nh.gov">consumerservices@ins.nh.gov</a>, Web: <a href="http://www.nh.gov/insurance/">http://www.nh.gov/insurance/</a></p>
NJ	<p>New Jersey State Insurance Department, Office of Consumer Protection Services, NJ Department of Banking and Insurance, P.O. Box 329, Trenton, NJ 08625-0329            Tel: 609-292-7272, Consumer Hotline: 800-446-7467, Web: <a href="http://www.state.nj.us/dobi/consumer.htm">http://www.state.nj.us/dobi/consumer.htm</a></p>
NM	<p>Consumer Assistance Program: New México Consumer Assistance Program, PO Box 1689, Santa Fe, NM 87504-1689            Tel: 855-427-5674, E-Mail: <a href="mailto:mchb.grievance@state.nm.us">mchb.grievance@state.nm.us</a>, Web: <a href="http://www.OSI.state.nm.us">http://www.OSI.state.nm.us</a>            New Mexico Department of Insurance - for insured plans only: Office of Superintendent of Insurance, PO Box 1689, Santa Fe, NM 87504-1689            Tel: 855-427-5674, Web: <a href="http://www.osi.state.nm.us/">http://www.osi.state.nm.us/</a></p>
NV	<p>Nevada Division of Insurance, 2501 East Sahara Ave., Suite 302, Las Vegas, Nevada 89104            Tel: 702-486-4009, Web: <a href="http://doi.nv.gov/Consumers/">http://doi.nv.gov/Consumers/</a></p>
NY	<p>Department of Financial Services, One State Street, New York, NY 10004-1511            Tel: 800-342-3736, Web: <a href="http://www.dfs.ny.gov/consumer/chealth.htm">http://www.dfs.ny.gov/consumer/chealth.htm</a></p>
OK	<p>Oklahoma Insurance Department, Five Corporate Plaza, 3625 NW 56th, STE 100, Oklahoma City, OK 73112            Tel: 405-521-2991, Web: <a href="http://www.ok.gov/oid/Consumers/Consumer_Assistance/index.html">http://www.ok.gov/oid/Consumers/Consumer_Assistance/index.html</a></p>

## Consumer Resource Information for States and Territories

State	Mailing Address, Telephone, E-Mail, and/or Web Address
OR	Oregon Division of Insurance, 350 Winter St NE, Salem, OR 97309-0405 Tel: 888-877-4894, Web: <a href="http://www.insurance.oregon.gov/consumer/health-insurance/health.html">http://www.insurance.oregon.gov/consumer/health-insurance/health.html</a>
PA	Consumer Assistance Program: Pennsylvania Consumer Assistance Program, Pennsylvania Department of Insurance, Bureau of Consumer Services, 1209 Strawberry Square, Harrisburg, PA 17111 Tel: 877-881-6388, Web: <a href="http://www.pahealthoptions.com">http://www.pahealthoptions.com</a> Pennsylvania Department of Insurance Consumer Services - for insured plans only: Pennsylvania Insurance Department, Bureau of Consumer Services, 1209 Strawberry Square, Harrisburg, PA 17111 Tel: 717-787-2317, Web: <a href="http://www.insurance.pa.gov">http://www.insurance.pa.gov</a>
PR	Puerto Rico Department of Insurance, Office of the Commissioner of Insurance, B5 Calle, Tabonuco Suite 216, PMB 356 Guaynabo, PR 00968-3029 Tel: 787-304-8686, Fax: 787-273-6082, Web: <a href="http://www.ocs.gobierno.pr/ocspr/">http://www.ocs.gobierno.pr/ocspr/</a> <a href="http://www.planmedicogarantizado.com">www.planmedicogarantizado.com</a>
RI	Office of the Health Insurance Commissioner, 1511 Pontiac Ave, Building #69 First Floor, Cranston, RI 02920 Tel: 410-462-9517, Web: <a href="http://www.ohic.ri.gov/">http://www.ohic.ri.gov/</a>
SC	South Carolina Department of Insurance, P.O. Box 100105, Columbia, SC 29202 Tel: 800-768-3467, 803-737-6180, E-Mail: <a href="mailto:consumers@doi.sc.gov">consumers@doi.sc.gov</a>
TN	Tennessee Department of Commerce and Insurance, Consumer Insurance Services, 500 James Robertson Parkway, 4th Floor, Nashville, Tennessee 37243 Tel: 800-342-4029, 615-741-2218, Fax: 615-532-7389
TX	Texas Department of Insurance, 333 Guadalupe, Austin, TX 78701 Tel: 800-578-4677, Web: <a href="http://www.tdi.texas.gov/index.html">http://www.tdi.texas.gov/index.html</a>
VA	Virginia State Corporation Commission, Bureau of Insurance, Tyler Building, 1300 East Main Street, Richmond, Virginia 23219 Tel: 800-552-7945 (Virginia only), 804-371-9741, E-Mail: <a href="mailto:Bureauofinsurance@scc.virginia.gov">Bureauofinsurance@scc.virginia.gov</a> , Web: <a href="http://www.scc.virginia.gov/boi/index.aspx">http://www.scc.virginia.gov/boi/index.aspx</a>
VI	Consumer Assistance Program: U.S. Virgin Islands Division of Banking and Insurance, 1131 King Street, Suite 101, Christiansted, St. Croix, VI 00820 Tel: 340-773-6459, Web: <a href="http://ltg.gov.vi">http://ltg.gov.vi</a> Virgin Islands Department of Insurance - for insured plans only: St. Croix, Office of the Lieutenant Governor, 1131 King Street, Suite 101, Christiansted, St. Croix, VI 00820 Administration (STX) 340-773-6459, Web: <a href="http://ltg.gov.vi">http://ltg.gov.vi</a> Virgin Islands Department of Insurance - for insured plans only: St. Thomas, Office of the Lieutenant Governor, #18 Kongens Gade, St. Thomas, Virgin Islands 00802 Administration (STT) 340-774-7166, Web: <a href="http://ltg.gov.vi/">http://ltg.gov.vi/</a>
VT	Vermont Division of Financial Regulation, 89 Main Street, Montpelier, VT 05620-3101 Tel: 802-828-3301, Web: <a href="http://www.dfr.vermont.gov/insurance/health-insurance/health-insurance">http://www.dfr.vermont.gov/insurance/health-insurance/health-insurance</a>
WA	Washington State Office of the Insurance Commissioner, 5000 Capitol Blvd., SE, Tumwater, WA 98501 Tel: 800-562-6900, 360-725-7080, E-Mail: <a href="mailto:cap@oic.wa.gov">cap@oic.wa.gov</a> , Web: <a href="http://www.insurance.wa.gov/consumers/CAP-contact-us.shtml">http://www.insurance.wa.gov/consumers/CAP-contact-us.shtml</a>
WV	West Virginia Department of Insurance, P. O. Box 50540, Charleston, WV 25305-0540 Tel: 304-558-3386, 888-879-9842