



*List of Demands Presented to Incoming Regence President
Jonathan Hensley on July 30th*

Mr. Hensley, we demand to know the answers to the following questions.
You have until August 13th to get back to us.

1. How many different products do you offer? How do they vary? May we have copies of the policies for each of these products?
2. What is the demographic breakdown for each product they offer (age, race, income, gender, geography, and industry)?
3. For each of your products, how much have you raised premiums each year for the past five years? What are the caps or limits on services in each of these products, and what have been the changes on those caps or limits over the past five years?
4. How many claims did you receive and what percentage of them did you deny in 2003-07? What were the stated reasons for these denials? What were the five health conditions and five treatments most commonly associated with each of these reasons for denial?
5. Can you provide us with out-of-pocket costs and outcomes information for your members with the following conditions relative to other insurers in this market: heart disease, diabetes, cancer, hypertension, stroke, pulmonary conditions and mental illness?
6. For each year between 2002 and 2007, what percentage of health care claims costs has been borne by your company, and what percentage has been borne out-of-pocket by enrollees?
7. Of applicants for their individual products, how many fail the health screen? Of those who fail, how many do they offer coverage to, and how do they decide which to accept and which to reject?
8. How many people have you rejected for coverage?
9. Does Regence provide services to any association plans in Washington State? If so, can the association remove a small group from the association pool for reasons of medical costs within the small group? What standards govern this decision?
10. What is the complete compensation package for your top five executives?