



COMMONWEALTH of VIRGINIA

SARA REDDING WILSON
DIRECTOR

Department of Human Resource Management

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December 7, 2011

Division of Legislative Automated Systems
910 Capitol Square
General Assembly Building, Suite 660
Richmond, VA 23219
ATTN: Legislative Documents and Reports Processing

As required in § 2.2-2818 (R.) of the Code of Virginia, attached is a report on cost and utilization information for each of the mandated benefits set forth in § 2.2-2818, subsection B. This report is in the same detail and form as reports submitted pursuant to § 38.2-3419.1.

Please note that § 2.2-2818 (R.) stipulates annual reporting by November 30 and this report for FY 2011 is being submitted after the required date. We apologize for the delay. The next report, for FY 2012, will be submitted prior to the November 30, 2012 due date.

Please contact Charles R. Reed, Associate Director, Office of State and Local Health Benefit Programs at 804-786-3124 (email charles.reed@dhrm.virginia.gov) if you have questions about this report.

Sincerely,

A handwritten signature in cursive script that reads "Gene Raney".

Gene Raney
Director, Office of Health Benefit Program

December 5, 2011

Charles S. Reed
Associate Director, Policy and Instruction
Commonwealth of Virginia
Office of State and Local Benefit Plans
101 N. 14th St.
Richmond, VA 23219

Re: SFY2011 Mandated Benefits Report

Dear Mr. Reed:

Aon Hewitt was retained by the Commonwealth of Virginia's Department of Human Resource Management to review and evaluate the Mandated Benefits Reports as prepared by Anthem and Optima for the Commonwealth's Health Benefits Plans. We reviewed the reports provided by each of the vendors as well as the insured "book of business" reports provided by both at our request. The Commonwealth specific reports for SFY2011 are attached along with a revised SFY2010 report from Anthem, which corrects some manual errors that were discovered during our review.

The reports provide cost and utilization information for each of the mandated benefits and providers as required. We reviewed and compared the reports specific to the Commonwealth's plans alongside the reports submitted for SFY2011. The Commonwealth reports reasonably tie to internal data.

To itemize and comment on any material impact of the mandated benefits provisions and project future trends, we would need to observe comparative data over time, typically three-to-five years. At this point, we do not have sufficient history to draw any specific conclusions on cost and utilization patterns.

However, we did compare SFY2011 over SFY2010 trends for some of the preventative mandated benefits. Specifically, we looked at the change in "visits per contracts" as a metric to measure change in volume of these procedures year over year. The "number of contracts" reported for each measure below represents the entire population and "visits per contracts" is defined over the entire COVA population. Generally, industry standard methodology used to report preventative procedures rates involves looking at only the subset of the enrolled population applicable for each measure. Please note that an independent analysis would need to be done to report preventative procedure rates for the measures we looked at. The results are shown in the table below.



Specific preventive benefits reported on COVA Mandates Reports

	SFY2010			SFY2011			Change in Visits per Contract
	Number of Visits	Number of Contracts	Visits per Contract	Number of Visits	Number of Contracts	Visits per Contract	
Childhood Immunizations	516,023	91,455	5.64	498,434	91,141	5.47	-3.1%
Mammograms	54,161	91,455	0.59	55,477	91,141	0.61	2.8%
Pap Smears	74,243	91,455	0.81	70,243	91,141	0.77	-5.1%
Early Intervention Services	4,400	91,455	0.05	4,545	91,141	0.05	3.7%
PSA Testing	20,238	91,455	0.22	20,305	91,141	0.22	0.7%
Colorectal Cancer Screening	27,591	91,455	0.30	26,716	91,141	0.29	-2.8%

Both vendors have suggested that the reported decrease in Childhood Immunizations could be caused by not getting all immunizations reported on claims, and see variation in HEDIS data reported using administrative data (claims only) versus hybrid data (claims plus chart review). In addition, data from health departments are not collected.

In addition, both vendors also attribute the drop in reported pap smears to be related to the change in American Congress of Obstetricians and Gynecologists guidelines for pap smears.

We will continue to monitor the reports, and expect to have more information in the coming years as we are able to compare year over year results.

Please let me know if you have any questions or concerns regarding these reports at this time. I can be reached at (404) 240-6138.

Sincerely,

Kirsten R. Schatten, ASA, MAAA
Vice President

**Commonwealth of Virginia
July 2009 - June 2010 (FY2010)**

Revised November 18, 2011. Changes in Red.

Form MB1 - Part A: Claim Information - Benefits

Provide specific claim data for each mandated benefit

Note: Blank fields (0) indicate that there is no data available for the BOI criteria

TOTAL CLAIMS PAID OR INCURRED

Mandate	Number of Visits	Number of Days	Total Claim payments	Number of Contracts/Certificates	Claim Cost per Contract/Certificate	Annual Admin Cost
Dependent Children (Handicapped) Doctor to Include	3420	95	1119645	82533	13.57	21273
Dentist	659	0	136629	82533	1.66	2596
Newborn Children	4599	944	3690114	82533	44.71	70112
Child Health Supervision Services	30814	0	2722252	82533	32.98	51723
Childhood Immunizations	515056	0	22049844	82533	267.16	418947
Infant Hearing Screening and Related Diagnostics	9308	0	451106	82533	5.47	8571
Mental Health Services						
Inpatient	379	45	74523	82533	0.90	1416
Partial Hospitalization	0	0	0	82533	0.00	0
Outpatient	19823	0	1440844	82533	17.46	27376
Substance Abuse Services						
Inpatient	145	104	146849	82533	1.78	2790
Partial Hospitalization	0	17	5252	82533	0.06	100
Outpatient	1160	0	146334	82533	1.77	2780
Biologically based Mental Illness	6950	133	610009	82533	7.39	11590
Obstetrical Services						
Normal pregnancy	9809	121	2947119	82533	35.71	55995
Other	18607	5239	16788737	82533	203.42	318986
Postpartum Services	545	4	98477	82533	1.19	1871
Pregnancy from Rape / Incest	32	0	7482	82533	0.09	142
Mammograms	49969	0	5915641	82533	71.68	112397
Pap Smears	73357	0	5989377	82533	72.57	113798
Bones and Joints	263	152	261759	82533	3.17	4973
Hemophilia and Congenital Bleeding Disorders	1051	21	787665	82533	9.54	14966
Reconstructive Breast Surgery	355	0	1316765	82533	15.95	25019
Early Intervention Services	3749	0	264207	82533	3.20	5020
PSA Testing	18469	0	428298	82533	5.19	8138
Colorectal Cancer Screening	26212	0	9229077	82533	111.82	175352
Clinical Trials for Treatment Studies on Cancer	11	0	3239	82533	0.04	62
Minimum Hospital Stay for Hysterectomy	482	131	1910800	82533	23.15	36305
Diabetes	104855	1	12947132	82533	156.87	245996
Hospice Care	1299	0	687603	82533	8.33	13064
Hospitalization and Anesthesia for Dental Procedures	659	0	136629	82533	1.66	2596
Treatment of Morbid Obesity	41	0	72966	82533	0.88	1386
Lymphedema	438	0	39728	82533	0.48	755
Prosthetic Devices	0	0	0	82533	0.00	0

**Commonwealth of Virginia
July 2009 - June 2010 (FY2010)**

Form MB1 - Part B: Providers

Determines the cost of each mandate based on the listing of the CPT and ICD-9-CM Codes provided by the BOI

Note: Blank fields (0) indicate that there is no data available for the BOI criteria

Mandate	Number of Visits	Total Claim payments	Cost per visit	Number of Contracts/Certificates	Claim Cost per Contract/Certificate	Annual Admin Cost
Chiropractor	77521	2410295	31.09	82533	29.20	45796
Optometrist	14115	1129814	80.04	82533	13.69	21466
Optician	86	10405	120.99	82533	0.13	198
Psychologist	36	18112	503.11	82533	0.22	344
Clinical Social Worker	81	1952	24.10	82533	0.02	37
Podiatrist	14387	1472162	102.33	82533	17.84	2791
Professional Counselor	37	1220	32.97	82533	0.01	23
Physical Therapist	68527	4022355	58.70	82533	48.74	76425
Clinical Nurse Specialist	4	478	119.50	82533	0.01	9
Audiologist	1135	214439	188.93	82533	2.60	4074
Speech Pathologist	3010	185066	61.48	82533	2.24	3516
Certified Nurse Midwife	563	74799	132.86	82533	0.91	1421
Licensed Acupuncturist	0	0	0.00	82533	0.00	0
Marriage and Family Therapist	3	150	50.00	82533	0.00	3

Psychologist
 Clinical Social Worker
 Podiatrist
 Professional Counselor
 Physical Therapist
 Clinical Nurse Specialist
 Audiologist
 Speech Pathologist
 Certified Nurse Midwife
 Licensed Acupuncturist
 Marriage and Family Therapist
 Prosthetic Devices

Number of Contracts/Certificates:

Issued or Renewed
 In Force

Annual Premium for Individual Standard Policy (30 year old male in Richmond):

Without Mandates
 With Mandates

Average Dollar Amount for Converting Group to Individual:

Covered in Policy or Certificate
 Onetime Charge

**Commonwealth of Virginia
July 2009 - June 2010 (FY2010)**

Revised November 18, 2011. Changes in Red.

Form MB1 - Part D: Utilization and Expenditures for Selected Procedures by Provider Type

Selected Procedure Codes are listed in Part D to obtain information about utilization and costs for specific types of services. Report identifies expenditures and visits for the Procedure Codes indicated by instructions. Other claims should not be included in this Part.

Note: Blank fields (0) indicate that there is no data available for the BOI criteria

Procedure Code/Provider Type	Number of Visits	Claim Payments	Cost Per Visit
1. 99203 - Office Visit, Intermediate Service to New Patient			
Chiropractor	1187	51038	43.00
Clinical Social Worker	0	0	0.00
Physical Therapist	1	0	0.00
Podiatrist	2272	210019	92.44
Professional Counselor	0	0	0.00
Psychiatrist	5	75	15.00
Psychologist	0	0	0.00
Physician	11938	1186605	99.40
Certified Nurse Midwife	9	291	32.33
Marriage and Family Therapist	0	0	0.00
2. 90806-90807, 90818-90819 - Individual/Medical Psychotherapy, 45 to 50 Minute Session			
Clinical Nurse Specialist	0	0	0.00
Clinical Social Worker	69	1669	24.19
Professional Counselor	31	413	13.32
Psychiatrist	9	352	39.11
Psychologist	0	0	0.00
Physician	20	1063	53.15
Marriage and Family Therapist	0	0	0.00
3. 90853 - Group Psychotherapy			
Clinical Nurse Specialist	0	0	0.00
Clinical Social Worker	0	0	0.00
Professional Counselor	0	0	0.00
Psychiatrist	0	0	0.00
Psychologist	0	0	0.00
Physician	9	290	32.22
Marriage and Family Therapist	0	0	0.00
4. 92507 - Speech, Language or Hearing Therapy, Individual			
Audiologist	0	0	0.00
Physical Therapist	11	272	24.73
Speech Pathologist	2582	146876	56.88
Physician	0	0	0.00
5. 97110 - Physical Medicine Treatment, each 15 minutes, Therapeutic Exercise			
Chiropractor	17505	478368	27.33
Physical Therapist	54132	1881992	34.77
Physician	242	10571	43.68
Podiatrist	9	259	28.78
Speech Pathologist	3	27	9.00
6. 97124 - Physical Medicine Treatment, Massage			
Chiropractor	6450	140699	21.81
Physical Therapist	350	13789	39.40
Physician	64	2061	32.20
Podiatrist	0	0	0.00
7. 97035 - Physical Medicine Treatment, Ultrasound, each 15 minutes			
Chiropractor	5911	64904	10.98
Physical Therapist	6165	93156	15.11
Physician	154	3049	19.80
Podiatrist	48	321	6.69
8. 92352 - Fitting of Spectacle Prosthesis for Aphakia, monofocal			
Ophthalmologist	0	0	0.00
Optician	0	0	0.00
Optometrist	0	0	0.00
Physician	0	0	0.00
9. 11750 - Excision of Nail and Nail Matrix, Partial or Complete, for Permanent Removal			
Physician	52	9714	186.81
Podiatrist	507	118220	233.18

The Commonwealth of Virginia
June 1, 2010 - July 1, 2011 (FY2011)

Revised November 18, 2011. Changes in Red

BOI FORM MB-1 PART A: CLAIM INFORMATION – BENEFITS

Provide specific claim data for each mandated benefit

Note: Blank fields (0) indicate that there is no data available for the BOI criteria

Mandate	Number of Visits	Number of Days	Total Claim payments	Number of Contracts/ Certificates	Claim Cost per Contract/ Certificate	Annual Admin Cost
Dependent Children (Handicapped)	3807	177	1434074	82281	17.43	27247
Doctor to Include Dentist	687	0	154415	82281	1.88	2934
Newborn Children	6189	586	2687603	82281	32.66	51064
Child Health Supervision Services	30405	0	2690825	82281	32.70	51126
Childhood Immunizations	497515	0	23577144	82281	286.54	447966
Infant Hearing Screening and Related Diagnostics	8446	0	395359	82281	4.80	7512
Mental Health Services						
Inpatient	615	46	121979	82281	1.48	2318
Partial Hospitalization	0	0	0	82281	0.00	0
Outpatient	20181	0	1533301	82281	18.63	29133
Substance Abuse Services						
Inpatient	69	150	116817	82281	1.42	2220
Partial Hospitalization	0	0	0	82281	0.00	0
Outpatient	1618	0	187667	82281	2.28	3566
Biologically based Mental Illness	7591	81	687552	82281	8.36	13063
Obstetrical Services						
Normal pregnancy	9187	115	2814541	82281	34.21	53476
Other	18344	4532	17005695	82281	206.68	323108
Postpartum Services	410	2	81259	82281	0.99	1544
Pregnancy from Rape / Incest	41	0	8271	82281	0.10	157
Mammograms	51110	0	6379953	82281	77.54	121219
Pap Smears	69382	0	5827643	82281	70.83	110725
Bones and Joints	268	270	198197	82281	2.41	3766
Hemophilia and Congenital Bleeding Disorders	917	37	928030	82281	11.28	17633
Reconstructive Breast Surgery	324	0	1203681	82281	14.63	22870
Early Intervention Services	3831	0	261990	82281	3.18	4978
PSA Testing	18474	0	437053	82281	5.31	8304
Colorectal Cancer Screening	25351	0	9631347	82281	117.05	182996
Clinical Trials for Treatment Studies on Cancer	24	0	26833	82281	0.33	510
Minimum Hospital Stay for Hysterectomy	534	85	2018200	82281	24.53	38346
Diabetes	102431	0	13242938	82281	160.95	251616
Hospice Care	1488	0	551499	82281	6.70	10478
Hospitalization and Anesthesia for Dental Procedures	687	0	154415	82281	1.88	2934
Treatment of Morbid Obesity	9	0	9566	82281	0.12	182
Lymphedema	301	28	32297	82281	0.39	614
Prosthetic Devices	0	0	0	82281	0.00	0

No data available

No data available

No data available

The Commonwealth of Virginia
June 1, 2010 - July 1, 2011 (FY 2011)

BOI Form MB-1 PART B: CLAIM INFORMATION – PROVIDERS

Determines the cost of each mandate based on the listing of the CPT and ICD-9-CM Codes provided by the BOI

Note: Blank fields (0) indicate that there is no data available for the BOI criteria

Provider	Number of Visits	Total Claim payments	Cost per visit	Number of Contracts/Certificates	Claim Cost per Contract/Certificate	Annual Admin Cost
Chiropractor	75497	2370682	31.40	82281	28.81	45043
Optometrist	13099	1039486	79.36	82281	12.63	19750
Optician	7	207	29.57	82281	0.00	4
Psychologist	58	19281	332.43	82281	0.23	366
Clinical Social Worker	80	2275	28.44	82281	0.03	43
Podiatrist	14119	1453033	102.91	82281	17.66	27608
Professional Counselor	60	1150	19.17	82281	0.01	22
Physical Therapist	72234	4315915	59.75	82281	52.45	82002
Clinical Nurse Specialist	59	2060	34.92	82281	0.03	39
Audiologist	1115	220706	197.94	82281	2.68	4193
Speech Pathologist	3371	194854	57.80	82281	2.37	3702
Certified Nurse Midwife	492	64196	130.48	82281	0.78	1220
Licensed Acupuncturist	0	0	0.00	82281	0.00	0
Marriage and Family Therapist	0	0	0.00	82281	0.00	0

No data available
No data available

Psychologist
 Clinical Social Worker
 Podiatrist
 Professional Counselor
 Physical Therapist
 Clinical Nurse Specialist
 Audiologist
 Speech Pathologist
 Certified Nurse Midwife
 Licensed Acupuncturist
 Marriage and Family Therapist
 Prosthetic Devices

Number of Contracts/Certificates:

Issued or Renewed
 In Force

Annual Premium for Individual Standard Policy (30 year old male in Richmond):

Without Mandates
 With Mandates

Average Dollar Amount for Converting Group to Individual:

Covered in Policy or Certificate
 Onetime Charge

**The Commonwealth of Virginia
June 1, 2010 - July 1, 2011 (FY2011)**

BOI Form MB1 - Part D: Utilization and Expenditures for Selected Procedures by Provider Type

Selected Procedure Codes are listed in Part D to obtain information about utilization and costs for specific types of services. Report identifies expenditures and visits for the Procedure Codes indicated by instructions. Other claims should not be included in this Part.

Note: Blank fields (0) indicate that there is no data available for the BOI criteria

Procedure Code/Provider Type	Number of Visits	Claim Payments	Cost Per Visit	
1. 99203 - Office Visit, Intermediate Service to New Patient				
Chiropractor	1201	52211	43.47	
Clinical Social Worker	0	0	0.00	No data available
Physical Therapist	0	0	0.00	
Podiatrist	2386	225199	94.38	
Professional Counselor	0	0	0.00	No data available
Psychiatrist	3	79	26.33	
Psychologist	0	0	0.00	No data available
Physician	11814	1204897	101.99	
Certified Nurse Midwife	2	102	51.00	
Marriage and Family Therapist	0	0	0.00	No data available
2. 90806-90807, 90818-90819 - Individual/Medical Psychotherapy, 45 to 50 Minute Session				
Clinical Nurse Specialist	44	1477	33.57	
Clinical Social Worker	63	1287	20.43	
Professional Counselor	37	474	12.81	
Psychiatrist	2	83	41.50	
Psychologist	0	0	0.00	No data available
Physician	18	640	35.56	
Marriage and Family Therapist	0	0	0.00	No data available
3. 90853 - Group Psychotherapy				
Clinical Nurse Specialist	0	0	0.00	No data available
Clinical Social Worker	0	0	0.00	No data available
Professional Counselor	0	0	0.00	No data available
Psychiatrist	0	0	0.00	No data available
Psychologist	0	0	0.00	No data available
Physician	10	145	14.50	
Marriage and Family Therapist	0	0	0.00	No data available
4. 92507 - Speech, Language or Hearing Therapy, Individual				
Audiologist	17	77	4.53	
Physical Therapist	16	707	44.19	
Speech Pathologist	2911	153392	52.69	
Physician	4	17	4.25	
5. 97110 - Physical Medicine Treatment, each 15 minutes, Therapeutic Exercise				
Chiropractor	16190	446602.71	27.59	
Physical Therapist	57619	1909306	33.14	
Physician	570	34401	60.35	
Podiatrist	10	390	39.00	
Speech Pathologist	0	0	0.00	No data available
6. 97124 - Physical Medicine Treatment, Massage				
Chiropractor	6761	155341	22.98	
Physical Therapist	529	14150.16	26.75	
Physician	22	562	25.55	
Podiatrist	0	0	0.00	No data available
7. 97035 - Physical Medicine Treatment, Ultrasound, each 15 minutes				
Chiropractor	6292	69876	11.11	
Physical Therapist	5612	85004	15.15	
Physician	112	2731	24.38	
Podiatrist	33	124	3.76	
8. 92352 - Fitting of Spectacle Prosthesis for Aphakia, monofocal				
Ophthalmologist	0	0	0.00	No data available
Optician	0	0	0.00	No data available
Optometrist	0	0	0.00	No data available
Physician	0	0	0.00	No data available
9. 11750 - Excision of Nail and Nail Matrix, Partial or Complete, for Permanent Removal				
Physician	54	11434	211.73	
Podiatrist	414	106459	257.15	

Form MB 1 - Part A: Claim Information - Benefits

[Edit Individual Values](#)

[Edit Group Values](#)

Individual Values						
a	b	c	d	e	f	g
Number of Visits	Number of Days	Total Claim Payments	Number of Contracts/ Certificates	Claim Cost Per Contract/ Certificate	Annual Administrative Cost	Percent of Total Health Claims

INDIVIDUAL TOTAL CLAIMS PAID OR INCURRED

\$ -

- Dependent Children (Handicapped)
- Doctor to Include Dentist
- Newborn Children

- Child Health Supervision Services
- Childhood Immunizations
- Infant Hearing Screening and Related Diagnostics
- Mental Health Services
 - Inpatient
 - Partial Hospitalization
 - Outpatient
- Substance Abuse Services
 - Inpatient
 - Partial Hospitalization
 - Outpatient
- Postpartum Services
- Pregnancy from Rape / Incest
- Mammograms
- Bone Marrow Transplants
- Pap Smears
- Bones and Joints
- Hemophilia and Congenital Bleeding Disorders
- Reconstructive Breast Surgery
- Early Intervention Services
- PSA Testing
- Colorectal Cancer Screening
- Clinical Trials for Treatment Studies on Cancer
- Minimum Hospital Stay for Hysterectomy
- Diabetes
- Hospice Care
- Hospitalization and Anesthesia for Dental Procedures
- Treatment of Morbid Obesity

Group Values						
a	b	c	d	e	f	g
Number of Visits	Number of Days	Total Claim Payments	Number of Contracts/Certificates	Claim Cost Per Contract/ Certificate	Annual Administrative Cost	Percent of Total Health Claims

GROUP TOTAL CLAIMS PAID OR INCURRED

\$ 70,183,066

Dependent Children (Handicapped)						
Doctor to Include Dentist	796	\$ 426,792	8,860	\$ 48.17	69,477.74	0.61%
Newborn Children	140	\$ 43,997	8,860	\$ 4.97	7,162.32	0.06%
Child Health Supervision Services	415	\$ 31,717	8,860	\$ 3.58	5,163.17	0.05%
Childhood Immunizations	919	\$ 174,772	8,860	\$ 19.73	28,451.22	0.25%
Infant Hearing Screening and Related Diagnostics	168	\$ 6,335	8,860	\$ 0.72	1,031.27	0.01%
Mental Health Services <ul style="list-style-type: none"> Inpatient Partial Hospital Outpatient 						
Substance Abuse Services <ul style="list-style-type: none"> Inpatient Partial Hospital Outpatient 						
Biologically Based Mental Illness						

Obstetrical Services							
Normal Pregnancy	97	\$ 185,417	8,860	\$ 20.93	30,184.08	0.26%	
All Other	686	\$ 574,360	8,860	\$ 64.83	93,500.47	0.82%	
Postpartum Services							
Pregnancy from Rape / Incest							
Mammograms	4,367	\$ 700,968	8,860	\$ 79.12	114,111.14	1.00%	
Bone Marrow Transplants							
Pap Smears	861	\$ 25,425	8,860	\$ 2.87	4,138.92	0.04%	
Bones and Joints	38	\$ 7,286	8,860	\$ 0.82	1,186.14	0.01%	
Hemophilia and Congenital Bleeding Disorders	100	\$ 1,488	8,860	\$ 0.17	242.29	0.00%	
Reconstructive Breast Surgery			8,860	\$ -	-		
Early Intervention Services	714	\$ 534,217	8,860	\$ 60.30	86,965.61	0.76%	
PSA Testing	1,831	\$ 42,961	8,860	\$ 4.85	6,993.71	0.06%	
Colorectal Cancer Screening	1,365	\$ 310,357	8,860	\$ 35.03	50,523.17	0.44%	
Clinical Trials for Treatment Studies on Cancer	23	\$ 289,324	8,860	\$ 32.66	47,099.29	0.41%	
Minimum Hospital Stay for Hysterectomy	60	\$ 100,325	8,860	\$ 11.32	16,331.90	0.14%	
Diabetes	30	\$ 2,303	8,860	\$ 0.26	374.97	0.00%	
Hospice Care							
Hospitalization and Anesthesia for Dental Procedures	144	\$ 22,069	8,860	\$ 2.49	3,592.67	0.03%	
Treatment of Morbid Obesity	-	\$ -	8,860	\$ -	-		
Lymphedema	12	\$ 6,329	8,860	\$ 0.71	1,030.33	0.01%	

Form 1 MB - Part B: Claim Information - Providers

[Edit Group Values](#)

Marriage and Family Therapist

	Group Values						
	a	b	c	d	e	f	g
	Number of Visits	Total Claim Payments	Costs Per Visit	Number of Contracts/certificates	Claim Cost Per Contract / Certificate	Annual Administrative Costs	Percent of Total Health Claims
Chiropractor						-	
Optometrist	1,090	\$ 73,212	\$ 67.17	8,860	\$ 16.23	11,918.20	0.10%
Optician	3,584	\$ 458,986	\$ 128.07	8,860	\$ 27.99	74,718.69	0.01%
Psychologist							
Clinical Social Worker							
Podiatrist	1,702	\$ 155,303	\$ 91.25	8,860	\$ 18.65	25,281.95	0.22%
Professional Counselor							
Physical Therapist	4,169	\$ 1,213,214	\$ 291.01	8,860	\$ 14.33	197,499.90	1.73%
Clinical Nurse Specialist							
Audiologist	84	\$ 10,689	\$ 127.25	8,860	\$ 0.66	1,740.01	0.02%
Speech Pathologist	1	\$ 103	\$ 102.50	8,860	\$ 0.01	16.69	0.00%
Certified Nurse Midwife	6	\$ 453	\$ 75.43	8,860	\$ 0.08	73.68	0.00%
Licensed Acupuncturist							
Marriage and Family Therapist							

Form MB 1 - Part C: Premium Information

	Individual Policy		Group Certificates	
	Single	Family	Single	Family
Standard Policy:				
Deductible			225.00	450.00
Co-Insurance Percentage Paid by Insurer			100.00%	100.00%
Individual/Employee Out-of-Pocket Maximum			1,500.00	3,000.00
Annual Premium				
Premium Attributable to Each Mandate:				
Dependent Children (Handicapped)				
Doctor to Include Dentist			-	-
Newborn Children			-	-
Child Health Supervision Services			-	-
Childhood Immunizations			-	-
Infant Hearing Screening and Related Diagnostics			-	-

Mental Health Services		
Inpatient		
Partial		
Hospitalization		
Outpatient		
Substance Abuse Services		
Inpatient		
Partial		
Hospitalization		
Outpatient		
Biologically Based Mental Illness		
Obstetrical Services		
Normal Pregnancy	-	-
All Other	-	-
Postpartum Services		
Pregnancy from Rape or Incest		
Mammograms	-	-
Bone Marrow Transplants	-	-
Pap Smears	-	-
Bones and Joints	-	-
Hemophilia and Congenital Bleeding Disorders	-	-
Reconstructive Breast Surgery	-	-
Early Intervention Services	-	-
PSA Testing	-	-
Colorectal Cancer Screening	-	-
Clinical Trials for Treatment Studies on Cancer	-	-
Minimum Hospital Stay for Hysterectomy	-	-
Diabetes	-	-
Hospice Care	-	-
Hospitalization and Anesthesia for Dental Procedures	-	-
Treatment of Morbid Obesity	-	-
Lymphedema	-	-
Chiropractor	-	-
Optometrist	-	-
Optician	-	-
Psychologist	-	-
Clinical Social Worker	-	-
Podiatrist	-	-
Professional Counselor	-	-
Physical Therapist	-	-
Clinical Nurse Specialist	-	-
Audiologist	-	-
Speech Pathologist	-	-
Certified Nurse Midwife	-	-
Licensed Acupuncturist	-	-
Marriage and Family Therapist	-	-
Number of Contracts/Certificates:		
Issued or Renewed		
In Force	3,827	4,221
Annual Premium for Individual Standard Policy (30 year old male in Richmond):		
Without Mandates	-	-
With Mandates	-	-
 Average Dollar Amount for Converting Group to Individual:		
Covered in Policy or Certificate	-	-
Onetime Charge	-	-

**Form MB 1 - Part D: Utilization and Expenditures
for Selected Procedures by Provider Type**

Procedure Code/Provider Type	Number of Visits	Claim Payments	Cost Per Visit
1. 99203 - Office Visit, Intermediate Service to New Patient			
Audiologist	1	\$ 96	\$ 96.26
Chiropractor			
Clinical Social Worker			
Physical Therapist			
Podiatrist	265	\$ 19,426	\$ 73.30

Professional Counselor				
Psychiatrist				
Psychologist				
Physician	2,640	\$	236,741	\$ 89.67
Ophthalmologist	53	\$	3,422	\$ 64.57
Optometrist	25	\$	1,457	\$ 58.28
Certified Nurse Midwife				
Marriage and Family Therapist				

2. 90806-90807, 90818-90819 - Individual/Medical Psychotherapy, 45 to 50 Minute Session

Clinical Nurse Specialist				
Clinical Social Worker				
Professional Counselor				
Physical Therapist				
Psychiatrist				
Psychologist				
Physician				
Marriage and Family Therapist				

3. 90853 - Group Psychotherapy

Clinical Nurse Specialist				
Clinical Social Worker				
Professional Counselor				
Psychiatrist				
Psychologist				
Physician				
Marriage and Family Therapist				

4. 92507 - Speech, Language or Hearing Therapy, Individual

Audiologist				
Chiropractor	21	\$	1,335	\$ 63.57
Physical Therapist	15	\$	985	\$ 65.64
Speech Pathologist				
Physician	31	\$	16,557	\$ 534.11

5. 97110 - Physical Medicine Treatment, each 15 minutes, Therapeutic Exercise

Chiropractor	309	\$	16,673	\$ 53.96
Physical Therapist	3,162	\$	686,653	\$ 217.16
Physician	261	\$	18,505	\$ 70.90
Podiatrist				
Speech Pathologist				

6. 97124 - Physical Medicine Treatment, Massage

Chiropractor				
Physical Therapist	45	\$	2,912	\$ 64.70
Physician	3	\$	121	\$ 40.47
Podiatrist				

7. 97035 - Physical Medicine Treatment, Ultrasound, each 15 minutes

Chiropractor	10	\$	87	\$ 8.73
Physical Therapist	383	\$	22,178	\$ 57.91
Physician	15	\$	349	\$ 23.24
Podiatrist				

8. 92352 - Fitting of Spectacle Prosthesis for Aphakia, monofocal

Ophthalmologist				
Optician				
Optometrist				
Physician				

9. 11750 - Excision of Nail and Nail Matrix, Partial or Complete, for Permanent Removal

Physician	6	\$	3,415	\$ 569.15
Podiatrist	31	\$	6,486	\$ 209.24