

November 24, 2015

Gene Raney  
Director, Office of Health Benefits  
Commonwealth of Virginia  
Department of Human Resource Management  
101 N. 14th Street  
Richmond, VA 23219

**Re: SFY2015 Mandated Benefits Report**

Dear Mr. Raney:

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 Aetna for the Commonwealth's Health Benefits Plans. The Commonwealth specific reports for Anthem and Book of Business (BOB) reports for Aetna for SFY2015 are attached.

The reports provide cost and utilization information for each of the mandated benefits and providers as required. We reviewed and compared the Anthem reports specific to the Commonwealth's plans alongside the reports submitted for SFY2011- SFY2014. Because SFY2014 represents the first data submission year for Aetna, and because Aetna provided data for their book of business (not specific to the Commonwealth), the Aetna information is provided in a separate table.

We have a rolling 5 year period of Anthem data to compare, which allows us to draw some general conclusions on cost and utilization patterns related to the mandated benefit provisions. However, to itemize and fully comment on any material impact of the mandates and project future mandate related trends, Aon Hewitt would need to incorporate data beyond the scope of the reporting requirements of the Mandated Benefits Reports. The Mandated Benefit Reports capture the total claims cost and visits for each mandate and do not contain any information on the cost and utilization patterns related to the specific populations covered by each of the mandated benefits and providers. An independent study would need to be developed to determine reporting metrics that would be appropriate to measure and report on cost, utilization, and health outcomes being driven by the mandates.

Aon Hewitt did compare overall trends across **Part A: Claim Information - Benefits**, **Part B: Claim Information – Providers** and **Part D: Utilization and Expenditures for Selected Procedures by Provider Type** by combining the Anthem and Optima Commonwealth Mandated Benefit reports for SFY2011 through SFY 2014 and the Anthem reports for SFY2014 and SFY2015. We observed reasonable trends in total claims paid, claim cost per contract, and visits per contract, a metric we calculated to measure change in utilization volume year over year.

While we do not have data on the Aetna HealthAware specific population, Anthem covers approximately 95% of the contracts for the Commonwealth. Therefore, we can still make reasonable observations about trend from the Anthem data.



For Part A, total claims per contract increased at an annual rate of 14.2% and claims cost per visit increased at an annual rate of 3.5% from SFY2011 to SFY2015. Total utilization, measured by “visits per contract”, has increased at an annual rate of 10.4% in the same time period. The rate of change from SFY 2014 to SFY 2015 is now at 12.2% after the spike from SFY 2013 to SFY 2014 at 23.6%.

In addition, we compared the trends for some of the preventive mandated benefits. Specifically, we looked at the change in “visits per contract” to measure change in volume of these procedures year over year for SFY 2015, SFY 2014, SFY 2013, SFY2012, and SFY2011. The “number of contracts” reported for each measure below represents the entire COVA population and “visits per contract-” is defined over the entire COVA population. Generally, industry standard methodology used to report preventive procedure- 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 reviewed. The results are shown in the tables listed in Exhibit A accompanying this letter.

In SFY2015, there were significant increases in Visits per Contract in several categories, most notably Outpatient Substance Abuse, Mental Health, and Diabetes.

For Part B, total claims paid per contract increased at an annual rate of 15.5% and claims cost per visit increased at an annual rate of 2.5% over the four years. Total utilization, measured by “visits per contract”, increased at an annual rate of 12.6%. For Part D, total claims payments for the selected procedures increased at an annual rate of 3.3% and claims cost per visit decreased at an annual rate of 0.6% over the four years. The majority of cost and visits reported for Part B and Part D are for Physical Therapists and Chiropractors.

As stated, Aetna data has been provided for their book of business, not the Commonwealth specific population, for SFY2014 and SFY2015. Trends were included in Exhibit A for the Aetna book of business based on data we received for SFY2014 and SFY2015 for informational purposes.

We will continue to monitor the reports, and will continue to provide a general comparison of year over year results as additional results become available. However, it is important to note that our ability to analyze and isolate the impact of the mandated benefits will be limited using the current format of the Mandated Benefit Report, which does not identify the specific population covered by each mandate. We are available to discuss these limitations and what reporting requirements are necessary to accomplish this segmentation. In the future we will also work with Aetna to obtain a Commonwealth HealthAware specific population report.

Please let me know if you have any questions or concerns regarding these reports at this time. I can be reached at (804) 320-8438.

Sincerely,

Paul Mack  
Vice President



## Exhibit A

### Anthem/Optima

	Number of Visits					Number of Contracts					Visits per Contract				
	SFY2011	SFY2012	SFY2013	SFY2014	SFY2015	SFY2011	SFY2012	SFY2013	SFY2014	SFY2015	SFY2011	SFY2012	SFY2013	SFY2014	SFY2015
Childhood Immunizations	498,434	499,087	511,769	545,262	582,642	91,141	90,206	90,339	86,287	84,237	5.47	5.53	5.66	6.32	6.92
Mammograms	55,477	54,241	54,288	53,072	54,572	91,141	90,206	90,339	86,287	84,237	0.61	0.60	0.60	0.62	0.65
Pap Smears	70,243	68,858	65,069	65,888	64,898	91,141	90,206	90,339	86,287	84,237	0.77	0.76	0.72	0.76	0.77
Early Intervention Services	4,545	4,175	4,156	3,649	4,012	91,141	90,206	90,339	86,287	84,237	0.05	0.05	0.05	0.04	0.05
PSA Testing	20,305	19,588	18,109	17,734	18,190	91,141	90,206	90,339	86,287	84,237	0.22	0.22	0.20	0.21	0.22
Colorectal Cancer Screening	26,716	26,456	27,070	28,057	29,286	91,141	90,206	90,339	86,287	84,237	0.29	0.29	0.30	0.33	0.35

  

	Paid Claims					Paid Per Visit					Paid per Contract				
	SFY2011	SFY2012	SFY2013	SFY2014	SFY2015	SFY2011	SFY2012	SFY2013	SFY2014	SFY2015	SFY2011	SFY2012	SFY2013	SFY2014	SFY2015
Childhood Immunizations	\$23,751,915	\$25,555,926	\$27,652,118	\$30,957,219	\$34,471,436	\$48	\$51	\$54	\$57	\$59	\$261	\$283	\$306	\$359	\$409
Mammograms	\$7,080,921	\$7,305,169	\$7,728,966	\$7,540,077	\$7,895,361	\$128	\$135	\$142	\$142	\$145	\$78	\$81	\$86	\$87	\$94
Pap Smears	\$5,853,068	\$5,847,196	\$5,908,018	\$6,474,314	\$6,481,027	\$83	\$85	\$91	\$98	\$100	\$64	\$65	\$65	\$75	\$77
Early Intervention Services	\$796,207	\$903,743	\$1,032,696	\$294,843	\$325,249	\$175	\$216	\$248	\$81	\$81	\$9	\$10	\$11	\$3	\$4
PSA Testing	\$480,015	\$466,056	\$439,120	\$417,351	\$411,446	\$24	\$24	\$24	\$24	\$23	\$5	\$5	\$5	\$5	\$5
Colorectal Cancer Screening	\$9,941,704	\$10,626,255	\$11,506,578	\$13,044,465	\$13,090,062	\$372	\$402	\$425	\$465	\$447	\$109	\$118	\$127	\$151	\$155

  

	Visit Per Contract				Paid Per Visit				Paid Per Contract			
	2012 vs. 2011	2013 vs. 2012	2014 vs. 2013	2015 vs. 2014	2012 vs. 2011	2013 vs. 2012	2014 vs. 2013	2015 vs. 2014	2012 vs. 2011	2013 vs. 2012	2014 vs. 2013	2015 vs. 2014
Childhood Immunizations	1.2%	2.4%	11.5%	9.5%	7.5%	5.5%	5.1%	4.2%	8.7%	8.0%	17.2%	14.1%
Mammograms	-1.2%	-0.1%	2.4%	5.3%	5.5%	5.7%	-0.2%	1.8%	4.2%	5.6%	2.1%	7.3%
Pap Smears	-1.0%	-5.6%	6.0%	0.9%	1.9%	6.9%	8.2%	1.6%	0.9%	0.9%	14.7%	2.5%
Early Intervention Services	-7.2%	-0.6%	-8.1%	12.6%	23.6%	14.8%	-67.5%	0.3%	14.7%	14.1%	-70.1%	13.0%
PSA Testing	-2.5%	-7.7%	2.5%	5.1%	0.6%	1.9%	-2.9%	-3.9%	-1.9%	-5.9%	-0.5%	1.0%
Colorectal Cancer Screening	0.1%	2.2%	8.5%	6.9%	7.9%	5.8%	9.4%	-3.9%	8.0%	8.1%	18.7%	2.8%

#### Aon Hewitt

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## Exhibit A

### Aetna

	Number of Visits		Number of Contracts		Paid Claims	
	SFY2014	SFY2015	SFY2014	SFY2015	SFY2014	SFY2015
Childhood Immunizations	1,609	1,594	57,984	67,450	\$934,290	\$936,826
Mammograms	12,315	14,756	57,984	67,450	\$2,199,161	\$2,441,230
Pap Smears	26,033	28,902	57,984	67,450	\$2,604,659	\$2,804,091
Early Intervention Services	3,987	4,643	57,984	67,450	\$2,990,356	\$3,178,131
PSA Testing / Colorectal Cancer Screening	8,218	6,273	57,984	67,450	\$4,533,693	\$6,230,803

	Visits Per Contract		Paid Per Visit		Paid Per Contract	
	SFY2014	SFY2015	SFY2014	SFY2015	SFY2014	SFY2015
Childhood Immunizations	0.03	0.02	\$581	\$588	\$16	\$14
Mammograms	0.21	0.22	\$179	\$165	\$38	\$36
Pap Smears	0.45	0.43	\$100	\$97	\$45	\$42
Early Intervention Services	0.07	0.07	\$750	\$684	\$52	\$47
PSA Testing / Colorectal Cancer Screening	0.14	0.09	\$552	\$993	\$78	\$92

	Visit Per Contract	Paid Per Visit	Paid Per Contract
	2015 vs. 2014	2015 vs. 2014	2015 vs. 2014
Childhood Immunizations	-14.8%	1.2%	-13.8%
Mammograms	3.0%	-7.4%	-4.6%
Pap Smears	-4.6%	-3.0%	-7.5%
Early Intervention Services	0.1%	-8.7%	-8.6%
PSA Testing / Colorectal Cancer Screening	-34.4%	80.0%	18.1%

**Anthem - FY 2015**

Form MB1 - Part A: Claim Information - Benefits

**GROUP TOTAL CLAIMS PAID OR INCURRED**

	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	122	1985851	84237	23.57	41703
Doctor to Include Dentist	0	0	0	84237	0.00	0
Newborn Children	5339	777	4124460	84237	48.96	86614
Child Health Supervision Services	38405	6	4056338	84237	48.15	85183
Childhood Immunizations	582642	0	34471436	84237	409.22	723900
Infant Hearing Screening and Related Diagnostics	10620	0	316600	84237	3.76	6649
<b>Mental Health Services</b>						
Inpatient	4418	3838	5558631	84237	65.99	116731
Partial Hospitalization	1706	0	521790	84237	6.19	10958
Outpatient	158722	0	11474551	84237	136.22	240966
<b>Substance Abuse Services</b>						
Inpatient	468	713	760341	84237	9.03	15967
Partial Hospitalization	0	4669	1128679	84237	13.40	23702
Outpatient	8563	0	1203202	84237	14.28	25267.24
Biologically based Mental Illness	67872	3224	10671851	84237	126.69	224108.9
<b>Obstetrical Services</b>						
Normal pregnancy	12685	103	4060352	84237	48.20	85267
Other	23432	5621	25378785	84237	301.28	532954
Postpartum Services	1936	5	343678	84237	4.08	7217.24
Pregnancy from Rape / Incest	41	0	9684	84237	0.11	203
Mammograms	54572	0	7895361	84237	93.73	165803
Pap Smears	64898	0	6481027	84237	76.94	136102
Bones and Joints	301	368	259035	84237	3.08	5440
Hemophilia and Congenital Bleeding Disorders	884	81	1031618	84237	12.25	21664
Reconstructive Breast Surgery	1460	2	1557740	84237	18.49	32713
Early Intervention Services	4012	31	325249	84237	3.86	6830
PSA Testing	18190	0	411446	84237	4.88	8640
Colorectal Cancer Screening	29286	0	13090062	84237	155.40	274891
Clinical Trials for Treatment Studies on Cancer	34	0	8718	84237	0.10	183
Minimum Hospital Stay for Hysterectomy	443	49	787258	84237	9.35	16532
Diabetes	128712	1	15665432	84237	185.97	328974
Hospice Care	0	0	0	84237	0.00	0
Hospitalization and Anesthesia for Dental Procedures	6	0	3155	84237	0.04	66
Treatment of Morbid Obesity	30	0	33062	84237	0.39	694
Lymphedema	426	0	58920	84237	0.70	1237
Prosthetic Devices	0	0	0	84237	0.00	0
Telemedicine	883	0	48085	84237	0.57	1010

**Anthem - FY 2015****Form MB1 - Part B: Providers****Group Values**

	Total Number of Visits	Total Claim payments	Total Cost per visit	Number of Contracts/ Certificates	Claim Cost per Contract/ Certificate	Annual Admin Cost
Chiropractor	84687	3411707	40.29	84237	40.50	71646
Optometrist	15918	1448807	91.02	84237	17.20	30425
Optician	4	451	112.75	84237	0.01	9
Psychologist	3206	632632	197.33	84237	7.51	13285.2657
Clinical Social Worker	31911	1650124	51.71	84237	19.59	34652.604
Podiatrist	15856	1687789	106.44	84237	20.04	35444
Professional Counselor	32589	1721798	52.83	84237	20.44	36157.758
Physical Therapist	84211	5293742	62.86	84237	62.84	111169
Clinical Nurse Specialist	12883	2678698	207.93	84237	31.80	56252.658
Audiologist	1666	308734	185.31	84237	3.67	6483.4161
Speech Pathologist	0	0	0.00	84237	0.00	0
Certified Nurse Midwife	1091	227075	208.14	84237	2.70	4768.5813
Licensed Acupuncturist	0	0	0.00	84237	0.00	0
Marriage and Family Therapist	0	0	0.00	84237	0.00	0

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

Procedure Code/ Provider Type	Number of Visits	Cost Per Claim Payments	Cost Per Visit
<b>1. 99203 - Office Visit, Intermediate Service to New Patient</b>			
Chiropractor	1453	64937	44.69
Clinical Social Worker	0	0	0.00
Physical Therapist	1	347	0.00
Podiatrist	2906	272401	93.74
Professional Counselor	0	0	0.00
Psychiatrist	71	4230.95	59.59
Psychologist	0	0	0.00
Physician	18984	1908277	100.52
Certified Nurse Midwife	17	1209	71.12
Marriage and Family Therapist	0	0	0.00
<b>2. 90806-90807, 90818-90819 - Individual/Medical Psychotherapy, 45 to 50 Minute Session</b>			
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	0	0	0.00
Marriage and Family Therapist	0	0	0.00
<b>3. 90853 - Group Psychotherapy</b>			
Clinical Nurse Specialist	7	206	29.43
Clinical Social Worker	1568	35127.01	22.40
Professional Counselor	1005	22990.36	22.88
Psychiatrist	123	3315.36	26.95
Psychologist	8	136	17.00
Physician	146	2994	20.51
Marriage and Family Therapist	0	0	0.00
<b>4. 92507 - Speech, Language or Hearing Therapy, Individual</b>			
Audiologist	15	309	20.60
Physical Therapist	19	192	10.11
Speech Pathologist	0	0	0.00
Physician	57	5126	89.93
<b>5. 97110 - Physical Medicine Treatment, each 15 minutes, Therapeutic Exercise</b>			
Chiropractor	18771	598836.2	31.90
Physical Therapist	70786	2,570,407.00	36.31
Physician	1813	69,727.90	38.46
Podiatrist	48	1598.3	33.30
Speech Pathologist	0	0	0.00
<b>6. 97124 - Physical Medicine Treatment, Massage</b>			
Chiropractor	11708	457100	39.04
Physical Therapist	865	32311	37.35
Physician	8	0	0.00
Podiatrist	0	0	0.00
<b>7. 97035 - Physical Medicine Treatment, Ultrasound, each 15 minutes</b>			
Chiropractor	5309	55111	10.38
Physical Therapist	3882	53263	13.72
Physician	93	1112	11.95
Podiatrist	3	35	11.67
<b>8. 92352 - Fitting of Spectacle Prosthesis for Aphakia, monofocal</b>			
Ophthalmologist	0	0	0.00
Optician	0	0	0.00
Optometrist	0	0	0.00
Physician	0	0	0.00
<b>9. 11750 - Excision of Nail and Nail Matrix, Partial or Complete, for Permanent Removal</b>			
Physician	40	9616	240.40
Podiatrist	469	120399	256.72

## Form 1 MB - Part A: Claim Information - Benefits

	Group Values					
	a Number of Visits	b Number of Days	c Total Claim Payments	d Number of Contracts/ Certificantes	e Claim Cost Per Contract/ Certificate	f Annual Administrative Cost
<b>GROUP TOTAL CLAIMS PAID OR INCURRED</b>	<b>\$ 358,119,820</b>					
Dependent Children (Handicapped)	3792	73	888043	67450	\$ 13.17	
Doctor to Include Dentist	4451	0	1253908	67450	\$ 18.59	
Newborn Children	3975	3946	10114834	67450	\$ 149.96	
Child Health Supervision Services	19492	4	4455336	67450	\$ 66.05	
Childhood Immunizations	1594	832	936826	67450	\$ 13.89	
Infant Hearing Screening and Related Diagnostics	0	0	0	67450	\$ -	
Mental Health Services						
Inpatient	1511	2057	4567935	67450	\$ 67.72	
Partial Hospital	82	77	137598	67450	\$ 2.04	
Outpatient	51515	0	8107808	67450	\$ 120.20	
Substance Abuse Services						
Inpatient	478	965	4257270	67450	\$ 63.12	
Partial Hospital	2	1	2621	67450	\$ 0.04	
Outpatient	8077	0	6444659	67450	\$ 95.55	
Biologically Based Mental Illness	28880	4016	10817325	67450	\$ 160.38	
Obstetrical Services						
Normal Pregnancy	12819	113	3422373	67450	\$ 50.74	
All Other	18763	4158	17264271	67450	\$ 255.96	
Postpartum Services	1077	4	185796	67450	\$ 2.75	
Pregnancy from Rape / Incest	0	0	0	67450	\$ -	
Mammograms	14756	0	2441230	67450	\$ 36.19	
Bone Marrow Transplants						
Pap Smears	28902	0	2804091	67450	\$ 41.57	
Bones and Joints	48470	674	8222197	67450	\$ 121.90	
Hemophilia and Congenital Bleeding Disorders	2347	566	5627102	67450	\$ 83.43	
Reconstructive Breast Surgery	620	27	1583664	67450	\$ 23.48	
Early Intervention Services	4643	1508	3178131	67450	\$ 47.12	
PSA Testing	6273	0	648508	67450	\$ 9.61	
Colorectal Cancer Screening	10154	0	5582295	67450	\$ 82.76	
Clinical Trials for Treatment Studies on Cancer	214	13	90006	67450	\$ 1.33	
Minimum Hospital Stay for Hysterectomy	148	0	619156	67450	\$ 9.18	
Diabetes	1116	11	435303	67450	\$ 6.45	
Hospice Care	83	28	76623	67450	\$ 1.14	
Hospitalization and Anesthesia for Dental Procedures	728	0	384810	67450	\$ 5.71	
Treatment of Morbid Obesity	12	2	44847	67450	\$ 0.66	
Lymphedema	20	0	0	67450	\$ -	
Prosthetic Devices and Components	2	0	0	67450	\$ -	
Telemedicine Services	13730	13	2076440	67450	\$ 30.78	
Autism Spectrum Disorder	804	0	148743	67450	\$ 2.21	

## Form 1 MB - Part B: Claim Information - Providers

	Group Values						
	a Number of Visits	b Total Claim Payments	c Costs Per Visit	d Number of Contracts/ certificates	e Claim Cost Per Contract / Certificate	f Annual Administrative Costs	g Percent of Total Health Claims
Chiropractor	34,494	\$ 1,484,748	\$ 43.04	67450	\$ 22.01	-	0.62%
Optometrist	17,043	\$ 1,940,687	\$ 113.87	67450	\$ 28.77	-	0.81%
Optician	388	\$ 99,870	\$ 257.40	67450	\$ 1.48	-	0.04%
Psychologist	6,902	\$ 697,647	\$ 101.08	67450	\$ 10.34	-	0.29%
Clinical Social Worker	6,645	\$ 557,960	\$ 83.97	67450	\$ 8.27	-	0.23%
Podiatrist	7,114	\$ 675,335	\$ 94.93	67450	\$ 10.01	-	0.28%
Professional Counselor	10,127	\$ 733,944	\$ 72.47	67450	\$ 10.88	-	0.31%
Physical Therapist	29,846	\$ 1,902,900	\$ 63.76	67450	\$ 28.21	-	0.80%
Clinical Nurse Specialist	123	\$ 16,653	\$ 135.39	67450	\$ 0.25	-	0.01%
Audiologist	453	\$ 96,467	\$ 212.95	67450	\$ 1.43	-	0.04%
Speech Pathologist	1,718	\$ 118,507	\$ 68.98	67450	\$ 1.76	-	0.05%
Certified Nurse Midwife	778	\$ 155,817	\$ 200.28	67450	\$ 2.31	-	0.07%
Licensed Acupuncturist	506	\$ 41,343	\$ 81.71	67450	\$ 0.61	-	0.02%
Marriage and Family Therapist	1,123	\$ 77,587	\$ 69.09	67450	\$ 1.15	-	0.03%

**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
<b>1. 99203 - Office Visit, Intermediate Service to New Patient</b>			
Chiropractor	75	2542	33.89
Clinical Social Worker	0	0	0.00
Physical Therapist	5	0	0.00
Podiatrist	494	35221	71.30
Professional Counselor	2	72	0.00
Psychiatrist	0	0	0.00
Psychologist	0	0	0.00
Physician	13536	1216426	89.87
Certified Nurse Midwife	9	1059	117.67
Marriage and Family Therapist	0	0	0.00
<b>2. 90806-90807, 90818-90819 - Individual/Medical Psychotherapy, 45 to 50 Minute Session</b>			
Clinical Nurse Specialist	0	0	0.00
Clinical Social Worker	3381	242629	71.76
Professional Counselor	3996	216375	54.15
Psychiatrist	0	0	0.00
Psychologist	3333	280521	84.16
Physician	3589	332165	92.55
Marriage and Family Therapist	524	40126	76.58
<b>3. 90853 - Group Psychotherapy</b>			
Clinical Nurse Specialist	0	0	0.00
Clinical Social Worker	321	5850	18.22
Professional Counselor	311	12777	41.08
Psychiatrist	0	0	0.00
Psychologist	77	4014	52.13
Physician	225	17328	77.01
Marriage and Family Therapist	7	181	25.86
<b>4. 92507 - Speech, Language or Hearing Therapy, Individual</b>			
Audiologist	2	1519	759.50
Physical Therapist	305	8641	28.33
Speech Pathologist	728	44983	61.79
Physician	212	18884	89.08
<b>5. 97110 - Physical Medicine Treatment, each 15 minutes, Therapeutic Exercise</b>			
Chiropractor	6280	365036	58.13
Physical Therapist	14631	938155	64.12
Physician	3631	265662	73.16
Podiatrist	6	335	55.83
Speech Pathologist	38	1778	46.79
<b>6. 97124 - Physical Medicine Treatment, Massage</b>			
Chiropractor	1009	45226	44.82
Physical Therapist	19	425	22.37
Physician	27	4731	175.22
Podiatrist	0	0	0.00
<b>7. 97035 - Physical Medicine Treatment, Ultrasound, each 15 minutes</b>			
Chiropractor	392	12854	32.79
Physical Therapist	412	21240	51.55
Physician	108	2880	26.67
Podiatrist	2	176	88.00
<b>8. 92352 - Fitting of Spectacle Prosthesis for Aphakia, monofocal</b>			
Ophthalmologist	0	0	0.00
Optician	0	0	0.00
Optometrist	0	0	0.00
Physician	0	0	0.00
<b>9. 11750 - Excision of Nail and Nail Matrix, Partial or Complete, for Permanent Removal</b>			
Physician	19	4549	239.42
Podiatrist	174	30639	176.09