



November 30, 2016

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

Re: SFY2016 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 SFY2016 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 SFY2012- SFY2015. 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) on a calendar year basis, the Aetna information is provided in a separate table. Note that the Virginia Bureau of Insurance shortened the reporting period for 2015 because the ICD-10 codes were not available. Therefore, the FY2016 data for Part A in this report only includes data through October 2015.

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 SFY2012 and SFY 2013 and the Anthem reports for SFY2014 through SFY2016. With the exception of SFY2016 (because of the missing data), 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. Note, however, that the SFY2016 trends for Part A may be misleading as they reflect partial year data.

For Part A, total claims per contract increased at an annual rate of 5.0% and claims cost per visit increased at an annual rate of 0.5% from SFY2012 to SFY2016. Total utilization, measured by “visits per contract”, has increased at an annual rate of 4.5% in the same time period. The rate of change from SFY 2015 to SFY 2016 decreased 18.3% following double digit increases for the past two years.

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 2016, SFY 2015, SFY 2014, SFY2013, and SFY2012. 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.

For Part B, total claims paid per contract increased at an annual rate of 18.8% and claims cost per visit increased at an annual rate of 4.4% over the five year period. Total utilization, measured by “visits per contract”, increased at an annual rate of 13.8%. 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 five year period. 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 2013 through 2015. Trends were included in Exhibit A for the Aetna book of business based on data we received for these years for informational purposes. However the trends for 2015 may be misleading because it only reflects a partial year’s data.

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 804.560.2274.

Sincerely,

Aon Consulting, Inc., an Aon Hewitt company



Marc Vallario
Vice President

Exhibit A

Anthem/Optima

	Number of Visits					Number of Contracts					Paid Claims				
	SFY2012	SFY2013	SFY2014	SFY2015	SFY2016	SFY2012	SFY2013	SFY2014	SFY2015	SFY2016	SFY2012	SFY2013	SFY2014	SFY2015	SFY2016
Childhood Immunizations	499,087	511,769	545,262	582,642	565,452	90,206	90,339	86,287	84,237	82,584	\$25,555,926	\$27,652,118	\$30,957,219	\$34,471,436	\$31,905,773
Mammograms	54,241	54,288	53,072	54,572	50,560	90,206	90,339	86,287	84,237	82,584	\$7,305,169	\$7,728,966	\$7,540,077	\$7,895,361	\$3,515,925
Pap Smears	68,858	65,069	65,888	64,898	37,361	90,206	90,339	86,287	84,237	82,584	\$5,847,196	\$5,908,018	\$6,474,314	\$6,481,027	\$2,548,199
Early Intervention Services	4,175	4,156	3,649	4,012	4,139	90,206	90,339	86,287	84,237	82,584	\$903,743	\$1,032,696	\$294,843	\$325,249	\$332,818
PSA Testing	19,588	18,109	17,734	18,190	17,475	90,206	90,339	86,287	84,237	82,584	\$466,056	\$439,120	\$417,351	\$411,446	\$379,385
Colorectal Cancer Screening	26,456	27,070	28,057	29,286	24,856	90,206	90,339	86,287	84,237	82,584	\$10,626,255	\$11,506,578	\$13,044,465	\$13,090,062	\$10,374,298

	Visits per Contract					Paid Per Visit					Paid per Contract				
	SFY2012	SFY2013	SFY2014	SFY2015	SFY2016	SFY2012	SFY2013	SFY2014	SFY2015	SFY2016	SFY2012	SFY2013	SFY2014	SFY2015	SFY2016
Childhood Immunizations	5.53	5.66	6.32	6.92	6.85	\$51	\$54	\$57	\$59	\$56	\$283	\$306	\$359	\$409	\$386
Mammograms	0.60	0.60	0.62	0.65	0.61	\$135	\$142	\$142	\$145	\$70	\$81	\$86	\$87	\$94	\$43
Pap Smears	0.76	0.72	0.76	0.77	0.45	\$85	\$91	\$98	\$100	\$68	\$65	\$65	\$75	\$77	\$31
Early Intervention Services	0.05	0.05	0.04	0.05	0.05	\$216	\$248	\$81	\$81	\$80	\$10	\$11	\$3	\$4	\$4
PSA Testing	0.22	0.20	0.21	0.22	0.21	\$24	\$24	\$24	\$23	\$22	\$5	\$5	\$5	\$5	\$5
Colorectal Cancer Screening	0.29	0.30	0.33	0.35	0.30	\$402	\$425	\$465	\$447	\$417	\$118	\$127	\$151	\$155	\$126

	Visit Per Contract				Paid Per Visit				Paid Per Contract			
	2013 vs. 2012	2014 vs. 2013	2015 vs. 2014	2016 vs. 2015	2013 vs. 2012	2014 vs. 2013	2015 vs. 2014	2016 vs. 2015	2013 vs. 2012	2014 vs. 2013	2015 vs. 2014	2016 vs. 2015
Childhood Immunizations	2.4%	11.5%	9.5%	-1.0%	5.5%	5.1%	4.2%	-4.6%	8.0%	17.2%	14.1%	-5.6%
Mammograms	-0.1%	2.4%	5.3%	-5.5%	5.7%	-0.2%	1.8%	-51.9%	5.6%	2.1%	7.3%	-54.6%
Pap Smears	-5.6%	6.0%	0.9%	-41.3%	6.9%	8.2%	1.6%	-31.7%	0.9%	14.7%	2.5%	-59.9%
Early Intervention Services	-0.6%	-8.1%	12.6%	5.2%	14.8%	-67.5%	0.3%	-0.8%	14.1%	-70.1%	13.0%	4.4%
PSA Testing	-7.7%	2.5%	5.1%	-2.0%	1.9%	-2.9%	-3.9%	-4.0%	-5.9%	-0.5%	1.0%	-5.9%
Colorectal Cancer Screening	2.2%	8.5%	6.9%	-13.4%	5.8%	9.4%	-3.9%	-6.6%	8.1%	18.7%	2.8%	-19.2%

Exhibit A

Aetna

	Number of Visits			Number of Contracts			Paid Claims		
	SFY2014	SFY2015	SFY2016	SFY2014	SFY2015	SFY2016	SFY2014	SFY2015	SFY2016
Childhood Immunizations	1,609	1,594	1,199	57,984	67,450	28,606	\$934,290	\$936,826	\$739,286
Mammograms	12,315	14,756	10,570	57,984	67,450	28,606	\$2,199,161	\$2,441,230	\$1,776,929
Pap Smears	26,033	28,902	19,666	57,984	67,450	28,606	\$2,604,659	\$2,804,091	\$2,004,243
Early Intervention Services	3,987	4,643	924	57,984	67,450	28,606	\$2,990,356	\$3,178,131	\$231,090
PSA Testing Colorectal Cancer Screening	8,218	6,273	4,638	57,984	67,450	28,606	\$4,533,693	\$6,230,803	\$4,428,632

	Visits Per Contract			Paid Per Visit			Paid Per Contract		
	SFY2014	SFY2015	SFY2016	SFY2014	SFY2015	SFY2016	SFY2014	SFY2015	SFY2016
Childhood Immunizations	0.03	0.02	0.04	\$581	\$588	\$617	\$16	\$14	\$26
Mammograms	0.21	0.22	0.37	\$179	\$165	\$168	\$38	\$36	\$62
Pap Smears	0.45	0.43	0.69	\$100	\$97	\$102	\$45	\$42	\$70
Early Intervention Services	0.07	0.07	0.03	\$750	\$684	\$250	\$52	\$47	\$8
PSA Testing Colorectal Cancer Screening	0.14	0.09	0.16	\$552	\$993	\$955	\$78	\$92	\$155

	Vest Per Contract		Paid Per Visit		Paid Per Contract	
	2015 vs. 2014	2016 vs. 2015	2015 vs. 2014	2016 vs. 2015	2015 vs. 2014	2016 vs. 2015
Childhood Immunizations	-14.8%	77.4%	1.2%	4.9%	-13.8%	86.1%
Mammograms	3.0%	68.9%	-7.4%	1.6%	-4.6%	71.6%
Pap Smears	-4.6%	60.4%	-3.0%	5.0%	-7.5%	68.5%
Early Intervention Services	0.1%	-53.1%	-8.7%	-63.5%	-8.6%	-82.9%
PSA Testing Colorectal Cancer Screening	-34.4%	74.3%	80.0%	-3.9%	18.1%	67.6%

Anthem - FY 2016

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)	3787	168	2580340	82584	31.25	54187
Doctor to Include Dentist	0	0	0	0	0.00	0
Newborn Children	1950	350	3726448	82584	45.12	78255
Child Health Supervision Services	36535	0	3867881	82584	46.84	81226
Childhood Immunizations	565452	0	31905773	82584	386.34	670021
Infant Hearing Screening and Related Diagnostics	10376	0	291102	82584	3.52	54187
Mental Health Services						
Inpatient	1359	1505	2005717	82584	24.29	42120
Partial Hospitalization	964	0	203300	82584	2.46	4269
Outpatient	53929	0	4068374	82584	49.26	85436
Substance Abuse Services						
Inpatient	217	747	659583	82584	7.99	13851
Partial Hospitalization	1962	0	478086.9	82584	5.79	10040
Outpatient	3446	0	416810	82584	5.05	8753
Biologically based Mental Illness	23984	1567	4164609	82584	50.43	87457
Obstetrical Services						
Normal pregnancy	4272	62	1514103	82584	18.33	31796
Other	8450	2199	25378785	82584	307.31	190522
			82584			
Postpartum Services	660	0	166599	82584	2.02	3499
Pregnancy from Rape / Incest	8	0	3251	82584	0.04	68
Mammograms	50560	0	3515925	82584	42.57	73834
Pap Smears	37361	0	2548199	82584	30.86	53512
Bones and Joints	101	165	146077	82584	1.77	3068
Hemophilia and Congenital Bleeding Disorders	278	12	654664	82584	7.93	13748
Reconstructive Breast Surgery	935	4	654664	82584	7.93	13748
Early Intervention Services	4139	31	332818	82584	4.03	6989
PSA Testing	17475	0	379385	82584	4.59	7967
Colorectal Cancer Screening	24856	0	10374298	82584	125.62	217860
Clinical Trials for Treatment Studies on Cancer	18	0	3658	82584	0.04	77
Minimum Hospital Stay for Hysterectomy	355	4	587429	82584	7.11	12336
Diabetes	126060	0	14783314	82584	179.01	310450
Hospice Care	0	0	0	82584	0.00	0
Hospitalization and Anesthesia for Dental Procedures	5	0	894	82584	0.01	19
Treatment of Morbid Obesity	24	0	43368	82584	0.53	911
Lymphedema	175	0	16931	82584	0.21	356
Prosthetic Devices	0	0	0	82584	0.00	0
Telemedicine	1363	0	83071	82584	1.01	1744

No data available

No data available

No data available

Anthem - FY 2016

Form MB1 - Part B: Providers

Group Values

	Number of Visits	Total Claim payments	Cost per visit	Number of Contracts/Certificates	Claim Cost per Contract/Certificate	Annual Admin Cost	
Chiropractor	86133	3657888	42.47	82584	44.29	76816	
Optometrist	16216	1495281	92.21	82584	18.11	31401	
Optician	0	0	0.00	82584	0.00	0	no data available
Psychologist	5260	1099231	208.98	82584	13.31	23084	
Clinical Social Worker	32649	1768890	54.18	82584	21.42	37147	
Podiatrist	16252	1831713	112.71	82584	22.18	38466	
Professional Counselor	35689	1947101	54.56	82584	23.58	40889	
Physical Therapist	100096	7227444	72.21	82584	87.52	151776	
Clinical Nurse Specialist	15505	3695381	238.33	82584	44.75	77603	
Audiologist	1666	222996	133.85	82584	2.70	4683	
Speech Pathologist	0	0	0.00	82584	0.00	0	no data available
Certified Nurse Midwife	944	206197	218.43	82584	2.50	4330	
Licensed Acupuncturist	0	0	0.00	82584	0.00	0	no data available
Marriage and Family Therapist	0	0	0.00	82584	0.00	0	no data available

Form MB1 - 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			
Chiropractor	1452	67780	47.00
Clinical Social Worker	0	0	0.00
Physical Therapist	0	0	0.00
Podiatrist	3230	308915	96.00
Professional Counselor	0	0	0.00
Psychiatrist	24	1265	53.00
Psychologist	0	0	0.00
Physician	17799	1828367	103.00
Certified Nurse Midwife	14	836	60.00
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	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
3. 90853 - Group Psychotherapy			
Clinical Nurse Specialist	1	22	22.00
Clinical Social Worker	1209	27909	23.00
Professional Counselor	894	20202	23.00
Psychiatrist	52	1569	30.00
Psychologist	5	85	17.00
Physician	125	2940	24.00
Marriage and Family Therapist	0	0	0.00
4. 92507 - Speech, Language or Hearing Therapy, Individual			
Audiologist	0	0	0.00
Physical Therapist	8	192	24.00
Speech Pathologist	0	0	0.00
Physician	141	7101	50.36
5. 97110 - Physical Medicine Treatment, each 15 minutes, Therapeutic Exercise			
Chiropractor	20064	667288.4	33.26
Physical Therapist	86642	3,885,370.00	44.84
Physician	1727	72,855.61	42.19
Podiatrist	154	5293.36	34.37
Speech Pathologist	0	0	0.00
6. 97124 - Physical Medicine Treatment, Massage			
Chiropractor	11108	452795	40.76
Physical Therapist	822	14603	17.77
Physician	15	125.12	8.34
Podiatrist	0	0	0.00
7. 97035 - Physical Medicine Treatment, Ultrasound, each 15 minutes			
Chiropractor	5381	54171	10.00
Physical Therapist	3974	57477	14.00
Physician	112	1416	13.00
Podiatrist	15	245	16.00
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	38	8841	232.67
Podiatrist	484	126937	262.27

Form 1 MB - Part A: Claim Information - Benefits

Group Values

	a	b	c	d	e	f		
	Number of Visits	Number of Days	Total Claim Payments	Number of Contracts/Certificates	Claim Cost Per Contract/Certificate	Annual Administrative Cost		
GROUP TOTAL CLAIMS PAID OR INCURRED						\$	83,420,387	
Dependent Children (Handicapped)	2512	92	727965	28606	\$ 25.45	128,464.00	0.87%	
Doctor to Include Dentist	3932	0	1290158	28606	\$ 45.10	227,675.00	1.55%	
Newborn Children	3081	3483	9418169	28606	\$ 329.24	1,662,030.00	11.29%	
Child Health Supervision Services	13288	0	3246639	28606	\$ 113.50	572,936.00	3.89%	
Childhood Immunizations	1199	674	739286	28606	\$ 25.84	130,462.00	0.89%	
Infant Hearing Screening and Related Diagnostics	0	0	0	28606	\$ -			
Mental Health Services								
Inpatient	986	1304	5549069	28606	\$ 193.98	979,247.00	6.65%	
Partial Hospital	4697	0	478679	28606	\$ 16.73	84,473.00	0.57%	
Outpatient	33590	4	5690520	28606	\$ 198.93	1,004,209.00	6.82%	
Substance Abuse Services								
Inpatient	323	627	3089064	28606	\$ 107.99	545,129.00	3.70%	
Partial Hospital	185	0	152893	28606	\$ 5.34	26,981.00	0.18%	
Outpatient	5682	0	4732548	28606	\$ 165.44	835,156.00	5.67%	
Biologically Based Mental Illness	22552	3001	9266352	28606	\$ 323.93	1,635,239.00	11.11%	
Obstetrical Services								
Normal Pregnancy	8758	82	2594138	28606	\$ 90.69	441,907.00	3.11%	
All Other	12324	2858	12080703	28606	\$ 422.31	2,131,889.00	14.48%	
Postpartum Services	829	0	132601	28606	\$ 4.64	23,400.00	0.16%	
Pregnancy from Rape / Incest	0	0	0	28606	\$ -			
Mammograms	10570	0	1776929	28606	\$ 62.12	313,576.00	2.13%	
Bone Marrow Transplants								
Pap Smears	19666	0	2004243	28606	\$ 70.06	353,690.00	2.40%	
Bones and Joints	35535	303	6034160	28606	\$ 210.94	1,064,852.00	7.23%	
Hemophilia and Congenital Bleeding Disorders	1813	578	4611219	28606	\$ 161.20	813,745.00	5.53%	
Reconstructive Breast Surgery	502	13	1216271	28606	\$ 42.52	214,636.00	1.46%	
Early Intervention Services	924	33	231090	28606	\$ 8.08	40,781.00	0.28%	
PSA Testing	4638	0	440216	28606	\$ 15.39	77,685.00	0.53%	
Colorectal Cancer Screening	7464	28	4428632	28606	\$ 154.81	781,523.00	5.31%	
Clinical Trials for Treatment Studies on Cancer	216	6	255352	28606	\$ 8.93	45,062.00	0.31%	
Minimum Hospital Stay for Hysterectomy	108	0	568864	28606	\$ 19.89	100,388.00	0.68%	
Diabetes	1058	22	531387	28606	\$ 18.58	93,774.00	0.64%	
Hospice Care	49	21	57978	28606	\$ 2.03	10,231.00	0.07%	
Hospitalization and Anesthesia for Dental Procedures	534	0	329454	28606	\$ 11.52	58,139.00	0.39%	
Treatment of Morbid Obesity	26	0	131507	28606	\$ 4.60	23,207.00	0.16%	
Lymphedema	23	0	19310	28606	\$ 0.68	3,408.00	0.02%	
Prosthetic Devices and Components	3	0	565	28606	\$ 0.02	100.00	0.00%	
Telemedicine Services	10878	0	1512064	28606	\$ 52.86	266,835.00	1.81%	
Autism Spectrum Disorder	817	0	172362	28606	\$ 6.03	30,417.00	0.21%	

Form 1 MB - Part B: Claim Information - Providers

	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	25,670	\$ 1,081,893	\$ 42.15	28606	\$ 37.82	190,922.00	1.30%
Optometrist	12,165	\$ 1,159,768	\$ 95.34	28606	\$ 40.54	204,665.00	1.39%
Optician	156	\$ 23,429	\$ 150.19	28606	\$ 0.82	4,135.00	0.03%
Psychologist	5,214	\$ 526,131	\$ 100.91	28606	\$ 18.39	92,847.00	0.63%
Clinical Social Worker	5,102	\$ 367,034	\$ 71.94	28606	\$ 12.83	64,771.00	0.44%
Podiatrist	5,252	\$ 471,308	\$ 89.74	28606	\$ 16.48	83,172.00	0.56%
Professional Counselor	7,575	\$ 501,771	\$ 66.24	28606	\$ 17.54	88,548.00	0.60%
Physical Therapist	23,242	\$ 1,481,220	\$ 63.73	28606	\$ 51.78	261,392.00	1.78%
Clinical Nurse Specialist	125	\$ 37,366	\$ 298.93	28606	\$ 1.31	6,594.00	0.04%
Audiologist	430	\$ 118,529	\$ 275.65	28606	\$ 4.14	20,917.00	0.14%
Speech Pathologist	1,158	\$ 94,772	\$ 81.84	28606	\$ 3.31	16,724.00	0.11%
Certified Nurse Midwife	474	\$ 94,778	\$ 199.95	28606	\$ 3.31	16,726.00	0.11%
Licensed Acupuncturist	481	\$ 30,465	\$ 63.34	28606	\$ 1.06	5,376.00	0.04%
Marriage and Family Therapist	818	\$ 57,327	\$ 70.08	28606	\$ 2.00	10,117.00	0.07%

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	61	3399	55.72
Clinical Social Worker	1	55	55.00
Physical Therapist	3	0	
Podiatrist	405	30491	75.29
Professional Counselor	1	89	89.00
Psychiatrist			
Psychologist			
Physician	10311	921103	89.33
Certified Nurse Midwife	6	586	97.67
Marriage and Family Therapist	1	0	
2. 90806-90807, 90818-90819 - Individual/Medical Psychotherapy, 45 to 50 Minute Session			
Clinical Nurse Specialist	1	0	
Clinical Social Worker	2726	191399	70.21
Professional Counselor	3558	182553	51.31
Psychiatrist	3	388	129.33
Psychologist	2135	193004	90.40
Physician	2869	239598	83.51
Marriage and Family Therapist	272	18949	69.67
3. 90853 - Group Psychotherapy			
Clinical Nurse Specialist			
Clinical Social Worker	179	3277	18.31
Professional Counselor	224	7042	31.44
Psychiatrist			
Psychologist	132	3128	23.70
Physician	84	5409	64.39
Marriage and Family Therapist	15	712	47.47
4. 92507 - Speech, Language or Hearing Therapy, Individual			
Audiologist			
Physical Therapist	268	8257	30.81
Speech Pathologist	507	44424	87.62
Physician	247	12899	52.22
5. 97110 - Physical Medicine Treatment, each 15 minutes, Therapeutic Exercise			
Chiropractor	4311	270227	62.68
Physical Therapist	11843	812857	68.64
Physician	2296	160763	70.02
Podiatrist	10	423	42.30
Speech Pathologist	53	1198	22.60
6. 97124 - Physical Medicine Treatment, Massage			
Chiropractor	1178	40167	34.10
Physical Therapist	6	497	82.83
Physician	49	2590	52.86
Podiatrist			
7. 97035 - Physical Medicine Treatment, Ultrasound, each 15 minutes			
Chiropractor	274	8796	32.10
Physical Therapist	315	16386	52.02
Physician	156	10415	66.76
Podiatrist	4	393	98.25
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	18	7647	424.83
Podiatrist	152	25675	168.91