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Health Insurer Information

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Health Insurer Information	
Name of Health Insurer:	Blue Cross and Blue Shield of Vermont
State of Domicile:	Vermont
Total number of states in which health insurer operates:	1
List of names of states where licensed (other than Vermont):	N/A
Total number of Vermont lives covered (defined as the total of the Individual Comprehensive Health Coverage, Small Group Comprehensive Health Coverage and Large Group Comprehensive Health Coverage columns in Part 1 of the filed Supplemental Healthcare Exhibit for the State of Vermont):	56,971
Contact Information	
Contact person:	Rebecca Heintz
Contact phone number:	(802) 371-3289

Tables 2.1 through 2.3: Claims Submissions and Denials

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Table 2.1: Total claims and denials

(1) Claims Category	(2) Total number	(3) Total denied	(4) Denial %	(5) PMPM Denial Rate
Medical claims	1,757,530	54,358	3.09%	0.07951
MHSA claims	225,065	13,183	5.86%	0.01928
Pharmacy Claims	615,948	151,646	25%	0.27928
Grand Total	2,598,543	219,187	8.4%	0.37807

Table 2.2: Administrative denials only

(1) Claims Category	(2) Total number	(3) Total denied	(4) Denial %	(5) PMPM Denial Rate
Medical claims	1,757,530	40,047	2.28%	0.05858
MHSA claims	225,065	11,679	5.19%	0.01708
Pharmacy Claims	615,948	89,556	15%	0.16493
Grand Total	2,598,543	141,282	5.4%	0.24059

Table 2.3: Member impact denials only

(1) Claims Category	(2) Total number	(3) Total denied	(4) Denial %	(5) PMPM Denial Rate
Medical claims	1,757,530	14,311	0.81%	0.02093
MHSA claims	225,065	1,504	0.67%	0.00220
Pharmacy Claims	615,948	62,090	10%	0.11435
Grand Total	2,598,543	77,905	3.0%	0.13748

Tables 3.1 through 3.3: Utilization Review

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Table 3.1: Pre-service Prior Authorization

PA request		PAs at 1st level appeal					PAs at 2nd level appeal				PAs at independent external review level appeal			
(1) PA category	(2) Count of PA types	(3) Percent of total PA denied	(4) Count of PAs appealed to 1st level	(5) Percent of total of PAs appealed to 1st level	(6) Count of PAs appealed to 1st level that were overturned	(7) Percent of PAs appealed to 1st level that were overturned	(8) Count of PAs appealed to 2nd level	(9) Percent of total of PAs appealed to 2nd level	(10) Count of PAs appealed to 2nd level that were overturned	(11) Percent of PAs appealed to 2nd level that were overturned	(12) Count of PAs appealed to independent external review	(13) Percent of total of PAs appealed to independent external review	(14) Count of PAs appealed to independent external review that were overturned	(15) Percent of PAs appealed to independent external review that were overturned
Medical	9504	14.61%	58	0.61%	43	74.14%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
MHSA	646	9.29%	4	0.62%	1	25.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
Pharmacy	8123	27.42%	412	5.07%	246	59.71%	21	0.26%	19	90.48%	3	0.04%	2	66.67%
Grand Total	18273	20.12%	474	2.59%	290	61.18%	21	0.11%	19	90.48%	3	0.02%	2	66.67%

Table 3.2: Concurrent Prior Authorization

PA request		PAs at 1st level appeal					PAs at 2nd level appeal				PAs at independent external review level appeal			
(1) PA category	(2) Count of PA types	(3) Percent of total PA denied	(4) Count of PAs appealed to 1st level	(5) Percent of total of PAs appealed to 1st level	(6) Count of PAs appealed to 1st level that were overturned	(7) Percent of PAs appealed to 1st level that were overturned	(8) Count of PAs appealed to 2nd level	(9) Percent of total of PAs appealed to 2nd level	(10) Count of PAs appealed to 2nd level that were overturned	(11) Percent of PAs appealed to 2nd level that were overturned	(12) Count of PAs appealed to independent external review	(13) Percent of total of PAs appealed to independent external review	(14) Count of PAs appealed to independent external review that were overturned	(15) Percent of PAs appealed to independent external review that were overturned
Medical	288	3.47%	1	0.35%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
MHSA	48	6.25%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
Pharmacy	1088	27.67%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
Grand Total	1424	22.05%	1	0.07%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%

Table 3.3: Post-service with Utilization Review (UR)

UR request		UR requests at 1st level appeal					UR requests at 2nd level appeal				UR requests at independent external review level appeal			
(1) UR category	(2) Count of UR request types	(3) Percent of total UR requests denied	(4) Count of UR requests appealed to 1st level	(5) Percent of total of UR requests appealed to 1st level	(6) Count of UR requests appealed to 1st level that were overturned	(7) Percent of UR requests appealed to 1st level that were overturned	(8) Count of UR requests appealed to 2nd level	(9) Percent of total of UR requests appealed to 2nd level	(10) Count of UR requests appealed to 2nd level that were overturned	(11) Percent of UR requests appealed to 2nd level that were overturned	(12) Count of UR requests appealed to independent external review	(13) Percent of total of UR requests appealed to independent external review	(14) Count of UR requests appealed to independent external review that were overturned	(15) Percent of UR requests appealed to independent external review that were overturned
Medical	1197	10.53%	2	0.17%	1	50.00%	0	0.00%	0	0.00%	1	0.08%	0	0.00%
MHSA	71	30.99%	8	11.27%	2	25.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
Pharmacy	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
Grand Total	1268	11.67%	10	0.79%	3	30.00%	0	0.00%	0	0.00%	1	0.08%	0	0.00%

Table 4: Adverse Benefit Determinations

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Table 4: Adverse Benefit Determinations without Utilization Review					
	Totals and percentages			PMPM	
(1) Adverse Benefit Determination Level	(2) Total Appeals	(3) Total Overturned	(4) Overturned Rate	(5) Appeals	(6) Overturned
First level appeals of post-service adverse determinations.	83	48	58%	0.00012	0.00007
Second level appeals of post-service adverse determinations.	2	0	0%	0.00000	0.00000
External review of post-service appeal determinations	1	0	0%	0.00000	0.00000

Table 5: Claims processed in timely manner

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Table 5: Claims processing - timely processing	(1) Denominator	Never		Sometimes		Usually		Always	
		(2) Numerator	(3) Rate	(4) Numerator	(5) Rate	(6) Numerator	(7) Rate	(8) Numerator	(9) Rate
CAHPS: Claims processing is timely (Q40)	109	1	0.90%	9	8.30%	45	41.30%	54	49.50%

Table 6: Claims processed accurately

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Table 6: Claims processed accurately	(1) Denominator	Never		Sometimes		Usually		Always	
		(2) Numerator	(3) Rate	(4) Numerator	(5) Rate	(6) Numerator	(7) Rate	(8) Numerator	(9) Rate
CAHPS: Claims are processed correctly (Q41)	110	0	0	5	4.50%	29	26.40%	76	69.10%

Tables 7.1 through 7.3: Utilization Review decision timelines

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Table 7.1: Medical Services		UR Decisions Made	
(1)	(2)	(3)	
Review types involving medical claims	#	%	
Urgent Concurrent Reviews			
Timely	183	100%	
Not Timely	0	0%	
Total Concurrent Reviews	183		
Urgent Pre-Service Reviews			
Timely	929	94%	
Not Timely	65	6%	
Total Urgent Pre-Service Reviews	994		
Non-Urgent Pre-Service Reviews			
Timely	7483	98%	
Not Timely	105	2%	
Total Non-UrgentPre-Service Reviews	7588		
Post-Service Reviews			
Timely	1069	100%	
Not Timely	0	0%	
Total Post-Service Reviews	1069		
Total Medical UR Decisions Made	9834		

Table 7.2: Mental Health and Substance Abuse Services		UR Decisions Made	
(1)	(2)	(3)	
Review types involving MHSA claims	#	%	
Urgent Concurrent Reviews			
Timely	49	98%	
Not Timely	1	2%	
Total Concurrent Reviews	50		
Urgent Pre-Service Reviews			
Timely	183	92%	
Not Timely	17	9%	
Total Urgent Pre-Service Reviews	200		
Non-Urgent Pre-Service Reviews			
Timely	432	99.0%	
Not Timely	4	1%	
Total Non-UrgentPre-Service Reviews	436		
Post-Service Reviews			
Timely	72	100%	
Not Timely	0	0	
Total Post-Service Reviews	72		
Total MHSA UR Decisions Made	686		

Table 7.3: Pharmacy		UR Decisions Made	
(1)	(2)	(3)	
Review types involving Pharmacy claims	#	%	
Urgent Concurrent Reviews			
Timely	1193	100%	
Not Timely	0	0%	
Total Concurrent Reviews	1193		
Urgent Pre-Service Reviews			
Timely	1190	99.5%	
Not Timely	6	0.50%	
Total Urgent Pre-Service Reviews	1196		
Non-Urgent Pre-Service Reviews			
Timely	7802	99.9%	
Not Timely	10	0.1%	
Total Non-UrgentPre-Service Reviews	7812		
Post-Service Reviews			
Timely	0	0%	
Not Timely	0	0%	
Total Post-Service Reviews	0		
Total Pharmacy UR Decisions Made	10201		

Table 8: Quality of Care Grievances

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Table 8: Quality of Care Grievances

(1) Type of grievance	(2) Total # of grievances received during reporting period	(3) Total # of grievances per 1000 members	(4) # of grievances remaining unresolved from prior reporting period	(5) # of total grievances resolved after 1st review during reporting period	(6) # of 1st level reviews resolved in member's favor during reporting period	(7) % of 1st level reviews resolved in member's favor during reporting period	(8) # of grievances resolved after 2nd review during reporting period	(9) # of 2nd level reviews resolved in member's favor during reporting period	(10) % of 2nd level reviews resolved in member's favor during reporting period
Provider performance and office management	14	0.25	5	5	-	-	-	-	-
Plan administration	-	-	-	-	-	-	-	-	-
Access to health care	-	-	-	-	-	-	-	-	-
Total	14		5	5	-	-	-	-	-

Table 9A: Provider Satisfaction Survey Results

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	Very Dissatisfied			Dissatisfied		Somewhat Satisfied or		Satisfied		Very Satisfied	
	(1) Denominator	(2) Numerator	(3) Rate	(4) Numerator	(5) Rate	(6) Numerator	(7) Rate	(8) Numerator	(9) Rate	(10) Numerator	(11) Rate
Table 9A: Provider Satisfaction Survey Results											
Overall, are you satisfied with the Plan?	120	2	1.7%	2	1.7%	15	12.5%	67	55.8%	34	28.3%
Would you recommend the Plan to your friends/family?	102	24	23.5%	16	15.7%	35	34.3%	13	12.7%	14	13.7%
The Blue Cross network includes an adequate number of providers.	104	2	1.9%	5	4.8%	24	23.1%	48	46.2%	25	24.0%
Are you satisfied with the Plan's responsiveness when you need assistance?	119	4	3.4%	12	10.1%	19	16.0%	50	42.0%	34	28.6%
Are you satisfied with the quality of communications from the Plan?	118	1	0.8%	6	5.1%	24	20.3%	64	54.2%	23	19.5%

Table 9B: Actions taken for provider satisfaction

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Table 9B: Actions taken on provider satisfaction

Revised the provider satisfaction survey questions to collect more meaningful/actionable data.

Provider Relations created the monthly eNewsletter for providers with news and updates.

Updates to the Provider Resource Center for easier navigation.

Table 11: Vermont Marketing and Advertising Expenses

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Table 11: Vermont Marketing and Advertising Expenses

Total	\$	155,885
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Table 12: Federal and Vermont Lobbying Expenditures

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Table 12: Lobbying Expenditures

Federal	NONE
Vermont	\$49,326

Table 15: Legal Expenses related to claims or services denials

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Table 15: Legal Expenses related to claims or services denials

Total Legal Expenses	NONE
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Table 16: Vermont Charitable Contributions

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Table 16: Vermont Charitable Contributions

Total Charitable Contributions	\$	7,467
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