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BLUE CROSS AND BLUE SHIELD OF VERMONT

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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):	58,999
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	1,498,779	70,629	4.7%	0.09919
MHSA claims	332,265	8,720	2.6%	0.01225
Pharmacy Claims	650,970	111,501	17.1%	0.20774
Grand Total	2,482,014	190,850	7.7%	0.31917

Table 2.2: Administrative denials only

(1) Claims Category	(2) Total number	(3) Total denied	(4) Denial %	(5) PMPM Denial Rate
Medical claims	1,498,779	46,091	3.1%	0.06473
MHSA claims	332,265	6,237	1.9%	0.00876
Pharmacy Claims	650,970	63,629	9.8%	0.11855
Grand Total	2,482,014	115,957	4.7%	0.19203

Table 2.3: Member impact denials only

(1) Claims Category	(2) Total number	(3) Total denied	(4) Denial %	(5) PMPM Denial Rate
Medical claims	1,498,779	24,538	1.6%	0.03446
MHSA claims	332,265	2,483	0.7%	0.00349
Pharmacy Claims	650,970	47,872	7.4%	0.08919
Grand Total	2,482,014	74,893	3.0%	0.12714

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	27,334	8.8%	105	0.4%	73	70%	2	0.0%	0	0%	0	0.0%	0	0%
MHSA	1,922	2.6%	9	0.5%	3	33%	1	0.1%	1	100%	0	0.0%	0	0%
Pharmacy	16,219	32.4%	688	6.3%	306	44%	10	0.1%	9	90%	6	0.1%	4	67%
Grand Total	45,475	16.9%	802	2.0%	382	48%	13	0.0%	10	77%	6	0.0%	4	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	3,036	0.5%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
MHSA	1,830	0.6%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Pharmacy	-	0.0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Grand Total	4,866	0.5%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%

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	2,339	14.0%	6	0.3%	3	50%	0	0%	0	0%	2	0.1%	1	50%
MHSA	257	7.8%	3	1.2%	0	0%	0	0%	0	0%	0	0.0%	0	0%
Pharmacy	167	28.1%	0	0.0%	0	0%	0	0%	0	0%	0	0.0%	0	0%
Grand Total	2,763	14.3%	9	0.3%	3	33%	0	0%	0	0%	2	0.1%	1	50%

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.	53	33	62%	0.00007	0.00005
Second level appeals of post-service adverse determinations.	1	1	100%	0.00000	0.00000
External review of post-service appeal determinations	0	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)	34	2	6%	2	6%	13	38%	17	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)	32	0	0%	3	9%	9	28%	20	63%

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	786	53%	
Not Timely	694	47%	
Total Concurrent Reviews	1,480		
Urgent Pre-Service Reviews			
Timely	890	74%	
Not Timely	316	26%	
Total Urgent Pre-Service Reviews	1,206		
Non-Urgent Pre-Service Reviews			
Timely	15,688	89%	
Not Timely	2,002	11%	
Total Non-UrgentPre-Service Reviews	17,690		
Post-Service Reviews			
Timely	1,327	82%	
Not Timely	295	18%	
Total Post-Service Reviews	1,622		
Total Medical UR Decisions Made	21,998		

Table 7.2: Mental Health and Substance Abuse Services		UR Decisions Made	
(1)	(2)	(3)	
Review types involving MHSA claims	#	%	
Urgent Concurrent Reviews			
Timely	388	55%	
Not Timely	312	45%	
Total Concurrent Reviews	700		
Urgent Pre-Service Reviews			
Timely	549	77%	
Not Timely	163	23%	
Total Urgent Pre-Service Reviews	712		
Non-Urgent Pre-Service Reviews			
Timely	269	73%	
Not Timely	97	27%	
Total Non-UrgentPre-Service Reviews	366		
Post-Service Reviews			
Timely	149	87%	
Not Timely	22	13%	
Total Post-Service Reviews	171		
Total MHSA UR Decisions Made	1,949		

Table 7.3: Pharmacy		UR Decisions Made	
(1)	(2)	(3)	
Review types involving Pharmacy claims	#	%	
Urgent Concurrent Reviews			
Timely	-	-	
Not Timely	-	-	
Total Concurrent Reviews	-		
Urgent Pre-Service Reviews			
Timely	4,420	99%	
Not Timely	37	1%	
Total Urgent Pre-Service Reviews	4,457		
Non-Urgent Pre-Service Reviews			
Timely	14,273	100%	
Not Timely	4	0%	
Total Non-UrgentPre-Service Reviews	14,277		
Post-Service Reviews			
Timely	124	74%	
Not Timely	44	26%	
Total Post-Service Reviews	168		
Total Pharmacy UR Decisions Made	18,902		

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	17	0.29	5	12	-	-	-	-	-
Plan administration	-	-	-	-	-	-	-	-	-
Access to health care	-	-	-	-	-	-	-	-	-
Total	17	0.29	5	12	-	-	-	-	-

Table 9A: Provider Satisfaction Survey Results

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	Strongly Disagree			Disagree		Neither Agree nor		Agree		Strongly Agree	
	(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?	264	0	0.0%	2	0.8%	32	12.1%	167	63.3%	63	23.9%
Would you recommend the Plan to your patients?	255	0	0.0%	8	3.1%	43	16.9%	144	56.5%	60	23.5%
Would you recommend the Plan to other practitioners?	262	0	0.0%	8	3.1%	43	16.4%	147	56.1%	64	24.4%
Are you satisfied with the Plan's responsiveness when you need assistance?	257	9	3.5%	16	6.2%	47	18.3%	123	47.9%	62	24.1%
Are you satisfied with the quality of communications from the Plan?	261	2	0.8%	10	3.8%	67	25.7%	133	51.0%	49	18.8%

Table 9B: Actions taken for provider satisfaction

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Table 9B: Actions taken on provider satisfaction

Due to the seven percent response rate for our provider satisfaction survey in 2021, no actions were recommended. We attribute the low response rate to resource constraints within the provider offices due to the continued impact of the pandemic and staffing shortages. In 2022, we modified the survey and eliminated some questions to improve the response rate.

Tables 10.1 through 10.2: Corporate Officer and Direct Compensation

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Table 10.1: Corporate Officer Compensation

(1) Title of Company Officers	(2) Salary	(3) Bonus	(4) Other Compensation
Chief Executive Officer	\$ 695,770	\$ -	\$ 46,666
Vice President & Treasurer	427,629	-	36,722
Vice President	380,372	-	38,465
Vice President	335,144	-	31,481
Vice President	267,137	-	97,151
Vice President	316,002	-	45,962
Vice President	328,474	-	30,456
Vice President	256,530	-	19,880
Vice President	254,076	-	20,447

Table 10.2: Direct Compensation

(1) Title of Company Officers	(2) Stipend	(3) Bonus	(4) Other Compensation
Board Chairperson	\$ -	\$ -	\$ 54,000
Board Member	-	-	51,500
Board Member	-	-	41,000
Board Member	-	-	38,500
Board Member	-	-	32,500
Board Member	-	-	32,500
Board Member	-	-	30,000
Board Member	-	-	23,250
Board Member	-	-	23,000
Board Member	-	-	20,000
Board Member	-	-	17,000
Board Member	-	-	14,000
Board Member	-	-	5,250
Board Member	-	-	3,750

Table 11: Vermont Marketing and Advertising Expenses

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Table 11: Vermont Marketing and Advertising Expenses

Total	\$274,253
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Table 12: Federal and Vermont Lobbying Expenditures

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Table 12: Lobbying Expenditures

Federal	NONE
Vermont	\$20,950

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	\$17,474
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