

March 1, 2023

Sebastian Arduengo  
Vermont Department of Financial Regulation  
89 Main St, Drawer 20  
Montpelier, VT 05620-3101

RE: BCBSVT Act 152 2022 Reports

Attached please find BlueCross and BlueShield of Vermont's CY 2021 Act 152 Report. As was the case in CY 2021, we have not included a report for The Vermont Health Plan (TVHP); TVHP continues to not meet the minimum covered lives requirement.

Additionally, please note that we have corrected the wording to the questions in our Provider Satisfaction Survey from our CY 2021 results. As mentioned in our Act 152 CY 2021 cover letter, last year's data Since the discovery of this alteration last year, we have corrected the question wording in Questions 2 and 3, and the answer options in Question 5. No surveys were administered with CY 2021 format in place during CY 2022, and all data should now accurately reflect the Act 152 spreadsheet format.

I hope this is sufficient context to better understand the report. Please feel free to contact me if you have any questions or concerns.

Sincerely,  
Harley Johnson  
Manager, Medicare and Corporate Compliance Programs  
Encl.

*Harley Johnson*

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## Health Insurer Information

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Health Insurer Information	
<b>Name of Health Insurer:</b>	Blue Cross and Blue Shield of Vermont
<b>State of Domicile:</b>	Vermont
<b>Total number of states in which health insurer operates:</b>	1
<b>List of names of states where licensed (other than Vermont):</b>	N/A
<b>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 ):</b>	58,999
Contact Information	
<b>Contact person:</b>	Rebecca Heintz
<b>Contact phone number:</b>	(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
<b>Grand Total</b>	<b>2,482,014</b>	<b>190,850</b>	<b>7.7%</b>	<b>0.31917</b>

**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
<b>Grand Total</b>	<b>2,482,014</b>	<b>115,957</b>	<b>4.7%</b>	<b>0.19203</b>

**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
<b>Grand Total</b>	<b>2,482,014</b>	<b>74,893</b>	<b>3.0%</b>	<b>0.12714</b>

**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%
<b>Grand Total</b>	<b>45,475</b>	<b>16.9%</b>	<b>802</b>	<b>2.0%</b>	<b>382</b>	<b>48%</b>	<b>13</b>	<b>0.0%</b>	<b>10</b>	<b>77%</b>	<b>6</b>	<b>0.0%</b>	<b>4</b>	<b>67%</b>

**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%
<b>Grand Total</b>	<b>4,866</b>	<b>0.5%</b>	<b>0</b>	<b>0%</b>	<b>0</b>	<b>0%</b>	<b>0</b>	<b>0%</b>	<b>0</b>	<b>0%</b>	<b>0</b>	<b>0%</b>	<b>0</b>	<b>0%</b>

**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%
<b>Grand Total</b>	<b>2,763</b>	<b>14.3%</b>	<b>9</b>	<b>0.3%</b>	<b>3</b>	<b>33%</b>	<b>0</b>	<b>0%</b>	<b>0</b>	<b>0%</b>	<b>2</b>	<b>0.1%</b>	<b>1</b>	<b>50%</b>

## 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
<a href="#">CAHPS: Claims processing is timely (Q40)</a>	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
<a href="#">CAHPS: Claims are processed correctly (Q41)</a>	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	#	%	
<b>Urgent Concurrent Reviews</b>			
Timely	786	53%	
Not Timely	694	47%	
<b>Total Concurrent Reviews</b>	<b>1,480</b>		
<b>Urgent Pre-Service Reviews</b>			
Timely	890	74%	
Not Timely	316	26%	
<b>Total Urgent Pre-Service Reviews</b>	<b>1,206</b>		
<b>Non-Urgent Pre-Service Reviews</b>			
Timely	15,688	89%	
Not Timely	2,002	11%	
<b>Total Non-UrgentPre-Service Reviews</b>	<b>17,690</b>		
<b>Post-Service Reviews</b>			
Timely	1,327	82%	
Not Timely	295	18%	
<b>Total Post-Service Reviews</b>	<b>1,622</b>		
<b>Total Medical UR Decisions Made</b>	<b>21,998</b>		

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

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

**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	-	-	-	-	-	-	-	-	-
<b>Total</b>	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
<b>Table 9A: Provider Satisfaction Survey Results</b>											
<a href="#">Overall, are you satisfied with the Plan?</a>	264	0	0.0%	2	0.8%	32	12.1%	167	63.3%	63	23.9%
<a href="#">Would you recommend the Plan to your patients?</a>	255	0	0.0%	8	3.1%	43	16.9%	144	56.5%	60	23.5%
<a href="#">Would you recommend the Plan to other practitioners?</a>	262	0	0.0%	8	3.1%	43	16.4%	147	56.1%	64	24.4%
<a href="#">Are you satisfied with the Plan's responsiveness when you need assistance?</a>	257	9	3.5%	16	6.2%	47	18.3%	123	47.9%	62	24.1%
<a href="#">Are you satisfied with the quality of communications from the Plan?</a>	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

<b>Total Charitable Contributions</b>	\$17,474
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