

Table of Contents (The Vermont Health Plan, LLC)

Tab 1	<u>General Information</u>
Tab 2	<u>Claim Submissions and Denials</u>
Tab 3	<u>Utilization Review</u>
Tab 4	<u>Adverse Benefit Determinations without Utilization Review</u>
Tab 5	<u>Claims Processed in a Timely Manner</u>
Tab 6	<u>Claims Processed Accurately, financially and administratively</u>
Tab 7	<u>Utilization Review Decisions Meeting Timeliness</u>
Tab 8	<u>Quality of Care Grievances</u>
Tab 9A	<u>Provider Satisfaction Survey Results</u>
Tab 9B	<u>Provider Satisfaction Survey - Actions Taken</u>
Tab 10	<u>Corporate Officer and Board Compensation</u>
Tab 11	<u>Vermont Marketing and Advertising Expenses</u>
Tab 12	<u>Federal and Vermont Lobbying Expenditures</u>
Tab 13	<u>Political Contributions</u>
Tab 14	<u>Dues Paid to Lobbying Groups</u>
Tab 15	<u>Legal Expenses Related to Claims or Services Denials</u>
Tab 16	<u>Vermont Charitable Contributions</u>

Health Insurer Information

[Return to Table of Content](#)

Health Insurer Information	
Name of Health Insurer:	The Vermont Health Plan, LLC
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):	2,176
Contact Information	
Contact person:	Rebecca Heintz
Contact phone number:	(802) 371-3289

Tables 2.1 through 2.3: Claims Submissions and Denials

[Return to Table of Content](#)

Table 2.1: Total claims and denials

(1) Claims Category	(2) Total number	(3) Total denied	(4) Denial %	(5) PMPM Denial Rate
Medical claims	29,838	7,706	25.8%	0.26393
MHSA claims	4,923	963	19.6%	0.03298
Pharmacy Claims	21,518	10,171	47.3%	0.34836
Grand Total	56,279	18,840	33.5%	0.65427

Table 2.2: Administrative denials only

(1) Claims Category	(2) Total number	(3) Total denied	(4) Denial %	(5) PMPM Denial Rate
Medical claims	29,838	3,841	12.9%	0.13155
MHSA claims	4,923	489	9.9%	0.01675
Pharmacy Claims	21,518	9,366	43.5%	0.32079
Grand Total	56,279	13,696	24.3%	0.46909

Table 2.3: Member impact denials only

(1) Claims Category	(2) Total number	(3) Total denied	(4) Denial %	(5) PMPM Denial Rate
Medical claims	29,838	3,865	13.0%	0.13298
MHSA claims	4,923	474	9.6%	0.01623
Pharmacy Claims	21,518	805	3.7%	0.02757
Grand Total	56,279	5,144	9.1%	0.17618

Tables 3.1 through 3.3: Utilization Review

[Return to Table of Content](#)

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	982	11%	4	0%	2	50%	0	0%	0	0%	0	0%	0	0%
MHSA	27	37%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Pharmacy	175	19%	2	1%	1	50%	0	0%	0	0%	0	0%	0	0%
Grand Total	1184	12%	6	1%	3	50%	0	0%	0	0%	0	0%	0	0%

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	47	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
MHSA	28	0%	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	75	0%	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	74	18%	0	0%	0	0	0	0%	0	0%	0	0%	0	0%
MHSA	5	40%	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	79	19%	0	0%	0	0	0	0%	0	0%	0	0%	0	0%

Table 4: Adverse Benefit Determinations

[Return to Table of Content](#)

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.	3	2	67%	0.00010	0.00007
Second level appeals of post-service adverse determinations.	0	0	0%	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

[Return to Table of Content](#)

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)	5	0	0%	2	40%	3	60%	0	0%

Table 6: Claims processed accurately

[Return to Table of Content](#)

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)	4	0	0%	1	25%	2	50%	1	25%

Tables 7.1 through 7.3: Utilization Review decision timelines

[Return to Table of Content](#)

Table 7.1: Medical Services	UR Decisions Made	
(1)	(2)	(3)
Review types involving medical claims	#	%
Urgent Concurrent Reviews		
Timely	28	59.6%
Not Timely	19	40.4%
Total Concurrent Reviews	47	
Urgent Pre-Service Reviews		
Timely	52	76.5%
Not Timely	16	23.5%
Total Urgent Pre-Service Reviews	68	
Non-Urgent Pre-Service Reviews		
Timely	830	93.9%
Not Timely	54	6.1%
Total Non-UrgentPre-Service Reviews	884	
Post-Service Reviews		
Timely	71	97.3%
Not Timely	2	2.7%
Total Post-Service Reviews	73	
Total Medical UR Decisions Made	1072	

Table 7.2: Mental Health and Substance Abuse Services	UR Decisions Made	
(1)	(2)	(3)
Review types involving MHSA claims	#	%
Urgent Concurrent Reviews		
Timely	20	71.4%
Not Timely	8	28.6%
Total Concurrent Reviews	28	
Urgent Pre-Service Reviews		
Timely	16	84.2%
Not Timely	3	15.8%
Total Urgent Pre-Service Reviews	19	
Non-Urgent Pre-Service Reviews		
Timely	7	87.5%
Not Timely	1	12.5%
Total Non-UrgentPre-Service Reviews	8	
Post-Service Reviews		
Timely	5	100.0%
Not Timely	0	0.0%
Total Post-Service Reviews	5	
Total MHSA UR Decisions Made	60	

Table 7.3: Pharmacy	UR Decisions Made	
(1)	(2)	(3)
Review types involving Pharmacy claims	#	%
Urgent Concurrent Reviews		
Timely	0	0.0%
Not Timely	0	0.0%
Total Concurrent Reviews	0	
Urgent Pre-Service Reviews		
Timely	28	0.0%
Not Timely	2	0.0%
Total Urgent Pre-Service Reviews	30	
Non-Urgent Pre-Service Reviews		
Timely	142	97.9%
Not Timely	3	0.0%
Total Non-UrgentPre-Service Reviews	145	
Post-Service Reviews		
Timely	0	0.0%
Not Timely	0	0.0%
Total Post-Service Reviews	0	
Total Pharmacy UR Decisions Made	175	

Table 8: Quality of Care Grievances

[Return to Table of Content](#)

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	6	2.76	0	6	-	-	-	-	-
Plan administration	-	-	-	-	-	-	-	-	-
Access to health care	-	-	-	-	-	-	-	-	-
Total	6	2.76	0	6	-	-	-	-	-

Table 9A: Provider Satisfaction Survey Results

[Return to Table of Content](#)

Table 9A: Provider Satisfaction Survey Results	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
Overall, are you satisfied with the Plan?	450	8	1.8%	14	3.1%	23	5.1%	232	51.6%	173	38.4%
Would you recommend the Plan to your patients?	411	3	0.7%	5	1.2%	63	15.3%	162	39.4%	178	43.3%
Would you recommend the Plan to other practitioners?	442	5	1.1%	7	1.6%	45	10.2%	185	41.9%	200	45.2%
Are you satisfied with the Plan's responsiveness when you need assistance?	423	3	0.7%	13	3.1%	32	7.6%	192	45.4%	183	43.3%
Are you satisfied with the quality of communications from the Plan?	399	1	0.3%	12	3.0%	87	21.8%	238	59.6%	61	15.3%

Table 9B: Actions taken for provider satisfaction

[Return to Table of Content](#)

Table 9B: Actions taken on provider satisfaction

- The Provider Relations team continued to follow desk procedures for their out of office process and provider communication practices.
- Provider Relations distributes preventative brochures to providers via email or in-person visits.
- The Integrated Health Department achieved steady state for their transitions of care tools: PatientPing and WellFrame.

Table 11: Vermont Marketing and Advertising Expenses

[Return to Table of Content](#)

Table 11: Vermont Marketing and Advertising Expenses

Total	\$209,983
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Table 12: Federal and Vermont Lobbying Expenditures

[Return to Table of Content](#)

Table 12: Lobbying Expenditures	
Federal	NONE
Vermont	NONE

Table 15: Legal Expenses related to claims or services denials

[Return to Table of Content](#)

Table 15: Legal Expenses related to claims or services denials

Total Legal Expenses	NONE
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Table 16: Vermont Charitable Contributions

[Return to Table of Content](#)

Table 16: Vermont Charitable Contributions

Total Charitable Contributions	NONE
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