

# List of Over-Utilized Codes

FY2005

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The Comprehensive Error Rate Testing Program



# Carrier

## AdminaStar IN/KY 00630/00660

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,132	3,636	\$8,994	\$196,791	\$112,708,541	\$2,464,239,006	4.6%	1.2%	2.3% - 6.9%
Hospital visit - subsequent	125	214	\$2,456	\$13,006	\$30,887,336	\$163,122,191	18.9%	7.5%	4.2% - 33.7%
Office visits - established	620	632	\$1,236	\$29,435	\$15,333,644	\$368,952,938	4.2%	1.8%	0.6% - 7.7%
Other drugs	61	78	\$1,097	\$10,116	\$13,722,190	\$127,266,851	10.8%	16.5%	( 21.5%) - 43.0%
Consultations	76	83	\$853	\$9,251	\$10,754,361	\$115,955,235	9.3%	4.1%	1.1% - 17.4%
All Codes With Less Than 30 Lines	363	488	\$722	\$61,429	\$9,093,595	\$768,788,318	1.2%	0.8%	( 0.4%) - 2.8%
Hospital visit - initial	35	35	\$614	\$3,328	\$7,735,653	\$41,849,950	18.5%	10.5%	( 2.1%) - 39.1%
Minor procedures - other (Medicare fee schedule)	81	124	\$459	\$5,430	\$5,758,967	\$68,214,087	8.4%	7.3%	( 5.9%) - 22.8%
Nursing home visit	61	65	\$410	\$3,126	\$5,141,083	\$39,269,593	13.1%	9.2%	( 5.0%) - 31.2%
Emergency room visit	51	51	\$344	\$3,873	\$4,275,485	\$48,166,721	8.9%	7.0%	( 4.8%) - 22.5%
Chiropractic	46	58	\$261	\$1,446	\$3,246,239	\$18,005,326	18.0%	12.1%	( 5.6%) - 41.7%
Oncology - radiation therapy	12	37	\$163	\$7,227	\$1,979,377	\$91,469,421	2.2%	10.4%	( 18.2%) - 22.5%
Specialist - ophthalmology	42	63	\$89	\$3,016	\$1,138,080	\$37,709,038	3.0%	5.4%	( 7.5%) - 13.6%
Ambulatory procedures - skin	24	32	\$66	\$2,230	\$846,008	\$27,995,566	3.0%	4.8%	( 6.4%) - 12.5%
Lab tests - other (non-Medicare fee schedule)	250	419	\$69	\$5,005	\$844,531	\$62,189,829	1.4%	1.0%	( 0.6%) - 3.3%
Ambulance	33	74	\$49	\$9,516	\$622,667	\$117,697,221	0.5%	1.0%	( 1.5%) - 2.5%
Other tests - electrocardiograms	85	90	\$32	\$1,136	\$392,913	\$14,150,290	2.8%	4.1%	( 5.2%) - 10.8%
Lab tests - automated general profiles	117	119	\$18	\$994	\$233,860	\$12,282,273	1.9%	4.7%	( 7.4%) - 11.2%
Specialist - psychiatry	46	58	\$14	\$2,039	\$172,437	\$25,650,905	0.7%	1.9%	( 3.1%) - 4.5%
Lab tests - routine venipuncture (non Medicare fee schedule)	197	199	\$12	\$504	\$149,757	\$6,285,962	2.4%	2.4%	( 2.2%) - 7.0%
Lab tests - blood counts	84	90	\$11	\$764	\$138,996	\$9,518,669	1.5%	3.0%	( 4.5%) - 7.4%
Lab tests - urinalysis	52	52	\$11	\$185	\$133,037	\$2,319,460	5.7%	8.2%	( 10.3%) - 21.7%
Advanced imaging - CAT: other	25	41	\$3	\$3,278	\$40,957	\$40,528,560	0.1%	0.3%	( 0.5%) - 0.7%
Standard imaging - musculoskeletal	53	61	\$2	\$1,283	\$26,145	\$16,058,704	0.2%	0.4%	( 0.6%) - 0.9%
Other tests - other	43	55	\$2	\$1,634	\$23,713	\$20,516,487	0.1%	0.3%	( 0.5%) - 0.7%
Standard imaging - other	23	31	\$1	\$1,277	\$17,511	\$15,967,479	0.1%	0.3%	( 0.4%) - 0.6%
Echography - heart	18	49	\$0	\$2,799	\$0	\$35,127,532	0.0%	0.0%	0.0% - 0.0%
Immunizations/Vaccinations	34	65	\$0	\$564	\$0	\$7,079,322	0.0%	0.0%	0.0% - 0.0%
Minor procedures - musculoskeletal	28	33	\$0	\$2,610	\$0	\$32,584,500	0.0%	0.0%	0.0% - 0.0%
Minor procedures - skin	33	41	\$0	\$2,615	\$0	\$33,035,280	0.0%	0.0%	0.0% - 0.0%
Specialist - pathology	32	34	\$0	\$1,774	\$0	\$22,245,512	0.0%	0.0%	0.0% - 0.0%
Standard imaging - chest	105	117	\$0	\$1,136	\$0	\$14,157,415	0.0%	0.0%	0.0% - 0.0%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Standard imaging - nuclear medicine	18	48	\$0	\$4,764	\$0	\$60,078,373	0.0%	0.0%	0.0% - 0.0%

**BCBS AR AR/NM/OK/MO/LA 00520/00521/00522/00523/00528**

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							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	4,111	7,332	\$29,529	\$406,232	\$264,618,233	\$3,650,665,743	7.2%	3.5%	0.5% - 14.0%
Hospital visit - subsequent	290	559	\$5,599	\$28,365	\$49,390,827	\$253,734,033	19.5%	10.4%	( 0.9%) - 39.9%
Ambulance	50	158	\$2,987	\$21,065	\$27,467,834	\$190,191,762	14.4%	18.2%	( 21.2%) - 50.0%
Office visits - established	1,114	1,129	\$2,706	\$50,769	\$25,310,971	\$460,951,533	5.5%	2.4%	0.7% - 10.3%
Consultations	145	150	\$2,720	\$15,231	\$24,468,210	\$137,522,815	17.8%	9.9%	( 1.6%) - 37.2%
Chemotherapy	24	37	\$2,542	\$21,959	\$21,623,689	\$189,591,391	11.4%	29.9%	( 47.1%) - 70.0%
All Codes With Less Than 30 Lines	374	450	\$2,239	\$68,563	\$20,974,603	\$621,929,190	3.4%	3.9%	( 4.3%) - 11.1%
Hospital visit - initial	76	76	\$1,970	\$8,308	\$17,369,716	\$74,183,566	23.4%	13.9%	( 3.8%) - 50.6%
Office visits - new	94	94	\$1,117	\$7,369	\$10,047,553	\$65,998,607	15.2%	13.2%	( 10.6%) - 41.1%
Nursing home visit	91	99	\$790	\$4,100	\$7,553,261	\$37,837,440	20.0%	22.0%	( 23.1%) - 63.0%
No Service Code	68	75	\$874	\$15,497	\$7,102,581	\$148,422,675	4.8%	24.1%	( 42.4%) - 52.0%
Other drugs	116	184	\$631	\$14,649	\$5,829,783	\$125,898,516	4.6%	15.2%	( 25.2%) - 34.4%
Minor procedures - other (Medicare fee schedule)	165	281	\$672	\$11,230	\$5,782,767	\$101,570,474	5.7%	12.0%	( 17.7%) - 29.1%
Emergency room visit	143	144	\$735	\$10,175	\$5,776,764	\$89,899,883	6.4%	8.9%	( 11.0%) - 23.8%
Oncology - other	20	34	\$460	\$4,675	\$4,001,317	\$38,921,080	10.3%	25.9%	( 40.5%) - 61.1%
Standard imaging - other	54	75	\$378	\$1,924	\$3,303,516	\$17,946,178	18.4%	30.6%	( 41.5%) - 78.3%
Lab tests - other (non-Medicare fee schedule)	436	765	\$303	\$8,376	\$2,696,970	\$77,935,644	3.5%	4.6%	( 5.5%) - 12.5%
Ambulatory procedures - skin	69	111	\$270	\$8,018	\$2,593,008	\$71,548,038	3.6%	11.2%	( 18.3%) - 25.5%
Specialist - pathology	57	66	\$261	\$4,784	\$2,398,902	\$41,702,699	5.8%	16.6%	( 26.7%) - 38.2%
Anesthesia	69	71	\$232	\$9,286	\$2,353,965	\$83,617,757	2.8%	7.6%	( 12.1%) - 17.7%
Other tests - other	81	110	\$219	\$4,239	\$2,074,895	\$35,474,917	5.8%	10.9%	( 15.5%) - 27.2%
Advanced imaging - CAT: other	59	94	\$192	\$6,830	\$1,860,764	\$60,216,248	3.1%	9.1%	( 14.7%) - 20.9%
Standard imaging - chest	217	236	\$208	\$2,714	\$1,828,485	\$23,867,808	7.7%	8.6%	( 9.2%) - 24.5%
Specialist - psychiatry	76	86	\$184	\$3,963	\$1,756,574	\$37,169,275	4.7%	19.5%	( 33.4%) - 42.9%
Chiropractic	86	133	\$196	\$3,487	\$1,677,742	\$29,941,048	5.6%	10.1%	( 14.2%) - 25.4%
Specialist - ophthalmology	126	180	\$130	\$9,701	\$1,199,023	\$86,720,570	1.4%	4.7%	( 7.7%) - 10.5%
Lab tests - blood counts	168	172	\$101	\$1,657	\$910,099	\$15,065,275	6.0%	8.6%	( 10.7%) - 22.8%
Standard imaging - musculoskeletal	128	157	\$110	\$3,444	\$882,299	\$31,259,107	2.8%	8.0%	( 13.0%) - 18.6%
Other tests - electrocardiograms	144	153	\$94	\$1,630	\$878,297	\$14,536,663	6.0%	8.4%	( 10.5%) - 22.6%
Oncology - radiation therapy	14	39	\$83	\$7,390	\$875,785	\$66,168,860	1.3%	5.3%	( 9.0%) - 11.6%
Echography - other	30	32	\$89	\$1,095	\$853,310	\$9,640,160	8.9%	21.3%	( 32.8%) - 50.5%

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Lab tests - automated general profiles	188	193	\$81	\$1,977	\$788,921	\$18,434,130	4.3%	7.7%	( 10.8%) - 19.3%
Other tests - cardiovascular stress tests	24	34	\$108	\$1,778	\$750,797	\$15,828,489	4.7%	19.5%	( 33.4%) - 42.9%
Minor procedures - skin	67	77	\$61	\$5,592	\$627,079	\$49,377,094	1.3%	11.6%	( 21.4%) - 23.9%
Other - non-Medicare fee schedule	31	32	\$41	\$510	\$385,949	\$4,716,135	8.2%	32.7%	( 55.8%) - 72.2%
Lab tests - routine venipuncture (non Medicare fee schedule)	348	349	\$45	\$966	\$383,162	\$8,669,597	4.4%	4.6%	( 4.6%) - 13.4%
Minor procedures - musculoskeletal	47	56	\$49	\$5,365	\$340,446	\$50,467,835	0.7%	9.5%	( 18.0%) - 19.3%
Ambulatory procedures - other	26	37	\$31	\$3,499	\$317,386	\$33,846,073	0.9%	2.2%	( 3.4%) - 5.2%
Lab tests - urinalysis	115	115	\$16	\$416	\$147,597	\$3,832,113	3.9%	7.2%	( 10.3%) - 18.0%
Lab tests - glucose	35	37	\$4	\$112	\$33,384	\$1,009,228	3.3%	10.3%	( 16.8%) - 23.5%
Echography - heart	40	111	\$0	\$4,994	\$0	\$45,983,853	0.0%	0.0%	0.0% - 0.0%
Imaging/procedure - heart including cardiac catheter	14	55	\$0	\$2,311	\$0	\$20,496,174	0.0%	0.0%	0.0% - 0.0%
Imaging/procedure - other	27	34	\$0	\$1,523	\$0	\$13,715,013	0.0%	0.0%	0.0% - 0.0%
Immunizations/Vaccinations	61	114	\$0	\$907	\$0	\$8,264,056	0.0%	0.0%	0.0% - 0.0%
Major procedure, cardiovascular-Other	25	30	\$0	\$6,255	\$0	\$53,465,153	0.0%	0.0%	0.0% - 0.0%
Standard imaging - breast	54	54	\$0	\$2,110	\$0	\$18,672,931	0.0%	0.0%	0.0% - 0.0%
Standard imaging - nuclear medicine	22	54	\$0	\$7,422	\$0	\$64,424,657	0.0%	0.0%	0.0% - 0.0%

**CIGNA ID 05130**

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							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	1,927	3,284	\$4,940	\$176,959	\$5,262,686	\$188,530,590	2.8%	0.5%	1.9% - 3.7%
All Codes With Less Than 30 Lines	299	393	\$910	\$64,775	\$969,115	\$69,011,070	1.4%	0.8%	( 0.3%) - 3.1%
Minor procedures - other (Medicare fee schedule)	147	306	\$698	\$8,469	\$743,976	\$9,023,251	8.2%	3.3%	1.8% - 14.7%
Hospital visit - subsequent	69	129	\$621	\$6,107	\$661,716	\$6,506,566	10.2%	3.0%	4.3% - 16.0%
Office visits - established	593	600	\$512	\$26,315	\$545,471	\$28,036,332	1.9%	0.4%	1.1% - 2.8%
Ambulance	22	47	\$410	\$6,071	\$437,110	\$6,468,393	6.8%	5.5%	( 4.1%) - 17.6%
Consultations	54	57	\$264	\$5,667	\$281,339	\$6,038,048	4.7%	2.0%	0.8% - 8.5%
Nursing home visit	22	30	\$245	\$1,259	\$261,426	\$1,341,651	19.5%	10.0%	( 0.1%) - 39.1%
Office visits - new	53	53	\$241	\$3,422	\$256,920	\$3,645,716	7.0%	3.0%	1.2% - 12.9%
Chiropractic	77	119	\$213	\$2,436	\$227,313	\$2,595,375	8.8%	3.1%	2.6% - 14.9%
Minor procedures - skin	33	40	\$168	\$1,968	\$179,423	\$2,096,813	8.6%	6.6%	( 4.5%) - 21.6%
Emergency room visit	45	46	\$154	\$3,221	\$164,390	\$3,431,486	4.8%	2.6%	( 0.4%) - 10.0%
Ambulatory procedures - skin	35	60	\$93	\$4,314	\$99,028	\$4,596,420	2.2%	2.2%	( 2.1%) - 6.4%
Specialist - pathology	31	38	\$82	\$2,884	\$87,352	\$3,072,075	2.8%	2.9%	( 2.8%) - 8.4%

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Minor procedures - musculoskeletal	29	32	\$74	\$3,132	\$79,127	\$3,336,485	2.4%	2.4%	( 2.4%) - 7.1%
Standard imaging - musculoskeletal	93	123	\$61	\$2,033	\$65,181	\$2,165,691	3.0%	1.9%	( 0.8%) - 6.8%
Specialist - ophthalmology	53	78	\$37	\$3,946	\$39,441	\$4,203,801	0.9%	0.9%	( 0.9%) - 2.8%
Ambulatory procedures - other	26	35	\$31	\$3,547	\$32,495	\$3,779,167	0.9%	0.7%	( 0.4%) - 2.1%
Lab tests - automated general profiles	47	48	\$30	\$536	\$31,472	\$570,604	5.5%	3.8%	( 1.9%) - 12.9%
Lab tests - other (non-Medicare fee schedule)	141	236	\$24	\$2,253	\$25,367	\$2,400,355	1.1%	0.6%	( 0.0%) - 2.2%
Specialist - psychiatry	38	46	\$22	\$1,432	\$23,311	\$1,525,314	1.5%	1.5%	( 1.5%) - 4.5%
Lab tests - blood counts	43	43	\$15	\$419	\$16,428	\$446,379	3.7%	2.6%	( 1.5%) - 8.9%
Standard imaging - chest	75	76	\$11	\$698	\$11,400	\$743,294	1.5%	1.5%	( 1.5%) - 4.5%
Lab tests - routine venipuncture (non Medicare fee schedule)	153	153	\$9	\$426	\$9,589	\$453,858	2.1%	1.2%	( 0.3%) - 4.5%
Other tests - electrocardiograms	70	82	\$8	\$998	\$8,662	\$1,063,647	0.8%	0.8%	( 0.8%) - 2.4%
Lab tests - urinalysis	39	39	\$5	\$128	\$5,636	\$136,339	4.1%	3.4%	( 2.6%) - 10.9%
Advanced imaging - CAT: other	32	41	\$0	\$3,406	\$0	\$3,628,435	0.0%	0.0%	0.0% - 0.0%
Anesthesia	38	38	\$0	\$5,709	\$0	\$6,082,603	0.0%	0.0%	0.0% - 0.0%
Echography - heart	15	41	\$0	\$2,667	\$0	\$2,841,300	0.0%	0.0%	0.0% - 0.0%
Immunizations/Vaccinations	56	103	\$0	\$653	\$0	\$696,118	0.0%	0.0%	0.0% - 0.0%
No Service Code	29	32	\$0	\$4,730	\$0	\$5,039,795	0.0%	0.0%	0.0% - 0.0%
Other drugs	53	80	\$0	\$2,038	\$0	\$2,171,146	0.0%	0.0%	0.0% - 0.0%
Other tests - other	28	40	\$0	\$1,298	\$0	\$1,383,063	0.0%	0.0%	0.0% - 0.0%

**CIGNA NC 05535**

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Overall	2,079	3,812	\$9,603	\$190,905	\$101,175,981	\$2,011,334,548	5.0%	0.7%	3.7% - 6.3%
Hospital visit - subsequent	106	187	\$1,961	\$9,918	\$20,656,818	\$104,495,814	19.8%	4.8%	10.3% - 29.3%
All Codes With Less Than 30 Lines	388	549	\$1,392	\$75,900	\$14,666,369	\$799,670,976	1.8%	0.6%	0.6% - 3.0%
Consultations	67	69	\$1,187	\$7,464	\$12,503,158	\$78,636,836	15.9%	4.3%	7.5% - 24.3%
Office visits - established	602	609	\$1,159	\$28,679	\$12,210,578	\$302,151,547	4.0%	0.9%	2.3% - 5.7%
Other drugs	67	101	\$651	\$9,041	\$6,859,864	\$95,257,703	7.2%	4.9%	( 2.5%) - 16.9%
Minor procedures - other (Medicare fee schedule)	95	137	\$620	\$5,684	\$6,527,459	\$59,888,158	10.9%	4.0%	3.0% - 18.8%
Office visits - new	36	36	\$327	\$2,492	\$3,442,785	\$26,252,806	13.1%	4.2%	5.0% - 21.3%
Specialist - pathology	39	43	\$322	\$2,178	\$3,388,631	\$22,947,829	14.8%	12.5%	( 9.7%) - 39.3%
No Service Code	50	53	\$311	\$5,122	\$3,277,057	\$53,969,563	6.1%	5.5%	( 4.8%) - 16.9%
Standard imaging - musculoskeletal	58	85	\$295	\$2,071	\$3,104,375	\$21,819,128	14.2%	5.4%	3.7% - 24.8%

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Nursing home visit	42	43	\$264	\$1,664	\$2,778,819	\$17,533,268	15.8%	5.9%	4.3% - 27.4%
Ambulance	26	60	\$252	\$6,546	\$2,658,605	\$68,963,175	3.9%	3.8%	( 3.6%) - 11.3%
Standard imaging - nuclear medicine	16	32	\$250	\$1,910	\$2,633,952	\$20,125,708	13.1%	12.9%	( 12.2%) - 38.4%
Lab tests - other (non-Medicare fee schedule)	340	662	\$118	\$7,185	\$1,237,957	\$75,700,718	1.6%	0.7%	0.2% - 3.1%
Chiropractic	39	55	\$86	\$1,367	\$909,135	\$14,402,026	6.3%	2.5%	1.4% - 11.2%
Specialist - ophthalmology	66	97	\$81	\$5,110	\$856,350	\$53,842,712	1.6%	1.6%	( 1.5%) - 4.6%
Other tests - electrocardiograms	65	75	\$67	\$807	\$704,424	\$8,504,819	8.3%	4.3%	( 0.2%) - 16.8%
Anesthesia	38	38	\$58	\$3,852	\$606,546	\$40,584,453	1.5%	1.5%	( 1.5%) - 4.4%
Other tests - other	25	37	\$52	\$1,039	\$549,126	\$10,945,017	5.0%	5.0%	( 4.7%) - 14.8%
Standard imaging - breast	30	30	\$35	\$1,337	\$369,280	\$14,088,375	2.6%	2.6%	( 2.5%) - 7.7%
Emergency room visit	41	41	\$33	\$3,341	\$347,682	\$35,197,179	1.0%	1.0%	( 0.9%) - 2.9%
Lab tests - automated general profiles	141	153	\$24	\$1,218	\$248,329	\$12,832,823	1.9%	1.3%	( 0.7%) - 4.6%
Lab tests - blood counts	102	104	\$22	\$940	\$228,838	\$9,899,338	2.3%	1.6%	( 0.9%) - 5.5%
Lab tests - routine venipuncture (non Medicare fee schedule)	217	218	\$21	\$582	\$221,252	\$6,131,839	3.6%	1.3%	1.0% - 6.2%
Standard imaging - chest	87	92	\$9	\$923	\$95,244	\$9,722,126	1.0%	1.0%	( 0.9%) - 2.9%
Lab tests - urinalysis	61	61	\$9	\$217	\$93,347	\$2,289,852	4.1%	2.3%	( 0.3%) - 8.5%
Ambulatory procedures - skin	26	43	\$0	\$1,921	\$0	\$20,236,545	0.0%	0.0%	0.0% - 0.0%
Echography - heart	15	43	\$0	\$1,970	\$0	\$20,758,805	0.0%	0.0%	0.0% - 0.0%
Immunizations/Vaccinations	30	59	\$0	\$426	\$0	\$4,485,409	0.0%	0.0%	0.0% - 0.0%

**CIGNA TN 05440**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,012	3,703	\$14,774	\$218,411	\$107,032,155	\$1,582,267,523	6.8%	0.8%	5.2% - 8.3%
Hospital visit - subsequent	141	315	\$3,054	\$15,776	\$22,125,456	\$114,287,315	19.4%	5.6%	8.4% - 30.3%
Consultations	78	82	\$2,074	\$8,832	\$15,025,110	\$63,980,198	23.5%	4.4%	14.9% - 32.1%
All Codes With Less Than 30 Lines	273	386	\$1,424	\$72,896	\$10,318,978	\$528,088,320	2.0%	0.6%	0.7% - 3.2%
Office visits - established	558	565	\$1,211	\$25,552	\$8,773,232	\$185,110,826	4.7%	0.8%	3.1% - 6.3%
Hospital visit - initial	37	37	\$1,097	\$4,111	\$7,950,336	\$29,782,465	26.7%	6.2%	14.5% - 38.9%
Other drugs	77	119	\$865	\$9,432	\$6,269,554	\$68,329,396	9.2%	6.3%	( 3.2%) - 21.5%
Ambulance	36	95	\$744	\$9,421	\$5,386,892	\$68,246,520	7.9%	4.8%	( 1.5%) - 17.3%
Nursing home visit	53	58	\$694	\$2,590	\$5,030,176	\$18,762,298	26.8%	7.4%	12.4% - 41.3%
Emergency room visit	78	78	\$544	\$6,429	\$3,942,641	\$46,576,739	8.5%	3.3%	2.1% - 14.9%
Office visits - new	33	33	\$484	\$2,924	\$3,508,409	\$21,182,882	16.6%	5.6%	5.6% - 27.5%
Specialist - psychiatry	61	73	\$413	\$3,876	\$2,988,403	\$28,077,704	10.6%	4.8%	1.2% - 20.1%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Standard imaging - nuclear medicine	26	56	\$369	\$5,513	\$2,674,357	\$39,937,211	6.7%	5.6%	( 4.2%) - 17.6%
Minor procedures - other (Medicare fee schedule)	89	135	\$307	\$4,258	\$2,225,274	\$30,843,268	7.2%	3.5%	0.4% - 14.0%
Other tests - other	44	63	\$263	\$3,767	\$1,903,476	\$27,289,002	7.0%	4.4%	( 1.6%) - 15.6%
Anesthesia	39	39	\$251	\$4,144	\$1,815,818	\$30,024,139	6.0%	5.8%	( 5.3%) - 17.4%
Ambulatory procedures - skin	20	33	\$160	\$2,995	\$1,157,806	\$21,697,599	5.3%	4.5%	( 3.4%) - 14.1%
Echography - heart	15	42	\$141	\$2,437	\$1,023,929	\$17,651,291	5.8%	4.3%	( 2.7%) - 14.3%
Specialist - ophthalmology	43	68	\$135	\$3,522	\$981,549	\$25,516,143	3.8%	2.5%	( 1.0%) - 8.7%
Chiropractic	47	64	\$134	\$1,522	\$973,942	\$11,027,774	8.8%	4.1%	0.7% - 16.9%
Standard imaging - breast	28	30	\$112	\$1,196	\$814,927	\$8,665,000	9.4%	6.7%	( 3.8%) - 22.6%
Lab tests - other (non-Medicare fee schedule)	198	342	\$95	\$3,965	\$690,757	\$28,722,169	2.4%	1.2%	0.0% - 4.8%
Other tests - electrocardiograms	95	106	\$42	\$1,187	\$301,803	\$8,596,902	3.5%	1.8%	( 0.1%) - 7.1%
Minor procedures - skin	25	35	\$35	\$2,427	\$252,179	\$17,580,803	1.4%	1.5%	( 1.5%) - 4.4%
Lab tests - glucose	12	32	\$29	\$133	\$213,204	\$966,480	22.1%	21.9%	( 20.9%) - 65.0%
Lab tests - automated general profiles	102	109	\$29	\$923	\$210,451	\$6,689,732	3.1%	1.9%	( 0.5%) - 6.8%
Lab tests - urinalysis	53	54	\$18	\$199	\$128,371	\$1,444,831	8.9%	3.7%	1.6% - 16.2%
No Service Code	30	36	\$17	\$7,113	\$124,242	\$51,527,371	0.2%	0.3%	( 0.3%) - 0.7%
Lab tests - routine venipuncture (non Medicare fee schedule)	170	170	\$12	\$450	\$86,933	\$3,259,997	2.7%	1.3%	0.1% - 5.2%
Standard imaging - chest	103	112	\$11	\$1,498	\$78,167	\$10,855,356	0.7%	0.7%	( 0.7%) - 2.1%
Standard imaging - musculoskeletal	59	82	\$6	\$2,102	\$42,597	\$15,230,200	0.3%	0.3%	( 0.3%) - 0.8%
Lab tests - blood counts	84	87	\$2	\$735	\$13,185	\$5,321,547	0.2%	0.2%	( 0.2%) - 0.7%
Advanced imaging - CAT: other	34	50	\$0	\$4,001	\$0	\$28,984,345	0.0%	0.0%	0.0% - 0.0%
Immunizations/Vaccinations	26	50	\$0	\$417	\$0	\$3,023,321	0.0%	0.0%	0.0% - 0.0%
Specialist - pathology	24	35	\$0	\$1,456	\$0	\$10,545,077	0.0%	0.0%	0.0% - 0.0%
Standard imaging - other	27	32	\$0	\$613	\$0	\$4,443,304	0.0%	0.0%	0.0% - 0.0%

**Cahaba GBA AL/GA/MS 00510/00511/00512**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	3,087	5,720	\$17,173	\$331,827	\$185,348,351	\$3,691,995,350	5.0%	1.8%	1.5% - 8.5%
Hospital visit - subsequent	181	308	\$3,282	\$16,918	\$36,451,443	\$183,696,379	19.8%	12.1%	( 3.9%) - 43.6%
Minor procedures - other (Medicare fee schedule)	141	288	\$2,826	\$12,288	\$25,465,531	\$126,058,088	20.2%	13.4%	( 6.1%) - 46.5%
Office visits - established	923	936	\$2,021	\$42,077	\$22,779,639	\$466,587,199	4.9%	1.9%	1.1% - 8.7%
Consultations	122	125	\$1,714	\$13,400	\$17,961,082	\$148,379,019	12.1%	7.3%	( 2.3%) - 26.5%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
All Codes With Less Than 30 Lines	384	458	\$1,565	\$78,165	\$17,855,263	\$869,497,853	2.1%	3.6%	( 5.0%) - 9.1%
Office visits - new	66	66	\$1,228	\$5,283	\$14,162,863	\$58,933,353	24.0%	12.6%	( 0.7%) - 48.8%
Oncology - radiation therapy	14	32	\$504	\$6,365	\$6,316,294	\$67,362,320	9.4%	24.6%	( 38.9%) - 57.6%
Hospital visit - initial	43	43	\$669	\$4,022	\$6,262,371	\$39,931,250	15.7%	10.7%	( 5.3%) - 36.7%
Emergency room visit	109	109	\$439	\$8,063	\$4,864,841	\$86,325,682	5.6%	6.4%	( 6.9%) - 18.2%
No Service Code	35	35	\$291	\$8,642	\$4,129,763	\$94,810,125	4.4%	10.7%	( 16.6%) - 25.4%
Advanced imaging - CAT: other	40	59	\$306	\$3,838	\$3,603,014	\$41,648,046	8.7%	12.7%	( 16.3%) - 33.6%
Nursing home visit	65	67	\$363	\$2,963	\$3,354,312	\$32,583,613	10.3%	11.0%	( 11.3%) - 31.9%
Specialist - pathology	42	47	\$212	\$3,346	\$3,168,493	\$37,431,038	8.5%	16.6%	( 24.0%) - 41.0%
Lab tests - other (non-Medicare fee schedule)	411	791	\$217	\$9,114	\$2,938,075	\$97,170,374	3.0%	2.9%	( 2.7%) - 8.8%
Other drugs	119	178	\$207	\$27,696	\$2,832,308	\$359,308,320	0.8%	1.5%	( 2.1%) - 3.7%
Ambulatory procedures - skin	41	73	\$220	\$6,755	\$2,321,077	\$65,670,359	3.5%	6.7%	( 9.6%) - 16.7%
Ambulance	48	109	\$200	\$14,715	\$2,099,397	\$164,750,034	1.3%	2.7%	( 4.0%) - 6.6%
Specialist - ophthalmology	103	148	\$208	\$8,388	\$1,737,799	\$91,936,350	1.9%	4.3%	( 6.6%) - 10.3%
Chiropractic	41	54	\$129	\$1,141	\$1,629,915	\$13,807,215	11.8%	18.5%	( 24.5%) - 48.1%
Standard imaging - musculoskeletal	104	139	\$131	\$3,039	\$1,481,622	\$32,766,460	4.5%	6.2%	( 7.7%) - 16.7%
Chemotherapy	25	33	\$132	\$13,564	\$964,110	\$149,354,566	0.6%	3.5%	( 6.1%) - 7.4%
Standard imaging - other	39	45	\$65	\$1,226	\$748,923	\$11,900,867	6.3%	12.8%	( 18.8%) - 31.4%
Minor procedures - skin	48	55	\$51	\$3,698	\$372,970	\$41,568,533	0.9%	12.9%	( 24.4%) - 26.1%
Minor procedures - musculoskeletal	52	64	\$47	\$4,401	\$341,395	\$53,892,024	0.6%	5.7%	( 10.6%) - 11.8%
Lab tests - automated general profiles	168	173	\$34	\$1,682	\$306,510	\$19,911,669	1.5%	4.8%	( 7.8%) - 10.9%
Lab tests - urinalysis	78	78	\$23	\$256	\$270,585	\$2,892,429	9.4%	8.8%	( 7.9%) - 26.6%
Other tests - other	59	82	\$23	\$3,508	\$228,495	\$34,256,982	0.7%	1.8%	( 2.9%) - 4.2%
Standard imaging - chest	140	152	\$20	\$2,026	\$220,345	\$21,485,890	1.0%	2.3%	( 3.5%) - 5.6%
Lab tests - routine venipuncture (non Medicare fee schedule)	247	248	\$18	\$672	\$204,777	\$7,539,835	2.7%	3.2%	( 3.6%) - 9.0%
Lab tests - blood counts	146	158	\$17	\$1,383	\$179,093	\$15,915,538	1.1%	2.6%	( 3.9%) - 6.2%
Other tests - electrocardiograms	96	104	\$9	\$1,177	\$62,272	\$12,391,015	0.5%	2.0%	( 3.5%) - 4.5%
Lab tests - glucose	44	44	\$3	\$129	\$33,774	\$1,406,013	2.4%	6.1%	( 9.5%) - 14.3%
Anesthesia	59	61	\$0	\$5,147	\$0	\$54,233,569	0.0%	0.0%	0.0% - 0.0%
Echography - heart	29	79	\$0	\$4,723	\$0	\$48,275,672	0.0%	0.0%	0.0% - 0.0%
Imaging/procedure - heart including cardiac catheter	9	42	\$0	\$1,178	\$0	\$12,332,508	0.0%	0.0%	0.0% - 0.0%
Imaging/procedure - other	20	31	\$0	\$2,065	\$0	\$20,320,498	0.0%	0.0%	0.0% - 0.0%
Immunizations/Vaccinations	51	88	\$0	\$746	\$0	\$8,005,177	0.0%	0.0%	0.0% - 0.0%
Specialist - psychiatry	33	45	\$0	\$1,989	\$0	\$21,446,543	0.0%	0.0%	0.0% - 0.0%
Standard imaging - breast	29	30	\$0	\$1,124	\$0	\$12,734,815	0.0%	0.0%	0.0% - 0.0%
Standard imaging - nuclear medicine	19	43	\$0	\$4,918	\$0	\$63,478,132	0.0%	0.0%	0.0% - 0.0%

**First Coast Service Options FL 00590**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	1,989	3,714	\$28,858	\$242,671	\$831,028,166	\$6,988,287,421	11.9%	3.9%	4.2% - 19.6%
Other drugs	73	97	\$11,534	\$30,406	\$332,147,137	\$875,603,615	37.9%	21.5%	( 4.2%) - 80.1%
All Codes With Less Than 30 Lines	382	511	\$5,808	\$71,576	\$167,244,182	\$2,061,192,199	8.1%	2.6%	3.1% - 13.2%
Hospital visit - subsequent	109	222	\$2,458	\$14,444	\$70,797,758	\$415,957,562	17.0%	3.4%	10.4% - 23.6%
Office visits - established	571	575	\$1,958	\$31,437	\$56,371,716	\$905,289,960	6.2%	0.9%	4.4% - 8.0%
Consultations	76	82	\$1,565	\$10,428	\$45,053,485	\$300,300,413	15.0%	2.9%	9.4% - 20.6%
Minor procedures - other (Medicare fee schedule)	123	228	\$1,466	\$8,805	\$42,220,976	\$253,551,627	16.7%	5.3%	6.3% - 27.0%
Ambulance	28	61	\$760	\$8,593	\$21,898,384	\$247,442,841	8.8%	5.6%	( 2.1%) - 19.8%
Emergency room visit	35	35	\$698	\$3,416	\$20,100,276	\$98,379,591	20.4%	7.3%	6.2% - 34.7%
Specialist - pathology	47	57	\$408	\$3,775	\$11,739,824	\$108,710,071	10.8%	7.6%	( 4.2%) - 25.8%
Office visits - new	42	43	\$387	\$3,737	\$11,134,503	\$107,622,395	10.3%	5.1%	0.4% - 20.3%
Lab tests - other (non-Medicare fee schedule)	287	531	\$377	\$6,128	\$10,853,153	\$176,458,188	6.2%	2.1%	2.1% - 10.2%
Nursing home visit	44	47	\$318	\$2,666	\$9,154,684	\$76,769,181	11.9%	3.8%	4.4% - 19.4%
Other tests - other	33	44	\$307	\$2,649	\$8,850,008	\$76,286,249	11.6%	6.7%	( 1.6%) - 24.8%
Specialist - ophthalmology	73	129	\$167	\$7,923	\$4,801,961	\$228,170,201	2.1%	1.2%	( 0.3%) - 4.5%
Echography - heart	25	71	\$154	\$5,394	\$4,440,554	\$155,324,086	2.9%	2.1%	( 1.2%) - 7.0%
Lab tests - automated general profiles	117	123	\$86	\$1,192	\$2,484,637	\$34,336,256	7.2%	2.6%	2.2% - 12.3%
Lab tests - blood counts	94	99	\$85	\$911	\$2,444,609	\$26,229,796	9.3%	3.1%	3.3% - 15.3%
Other tests - electrocardiograms	69	80	\$68	\$1,019	\$1,958,509	\$29,345,096	6.7%	3.2%	0.4% - 12.9%
Anesthesia	38	39	\$52	\$4,424	\$1,510,422	\$127,402,732	1.2%	1.2%	( 1.2%) - 3.5%
Ambulatory procedures - other	23	30	\$48	\$2,969	\$1,376,514	\$85,485,857	1.6%	1.5%	( 1.3%) - 4.5%
Minor procedures - skin	37	50	\$37	\$5,017	\$1,067,806	\$144,473,525	0.7%	0.8%	( 0.8%) - 2.3%
Standard imaging - musculoskeletal	44	63	\$37	\$1,861	\$1,053,120	\$53,598,817	2.0%	1.5%	( 1.0%) - 4.9%
Lab tests - urinalysis	54	54	\$28	\$210	\$800,855	\$6,052,919	13.2%	4.7%	4.1% - 22.4%
Lab tests - routine venipuncture (non Medicare fee schedule)	173	175	\$24	\$609	\$691,137	\$17,526,079	3.9%	1.6%	0.9% - 7.0%
Standard imaging - chest	55	58	\$19	\$671	\$552,910	\$19,309,788	2.9%	2.0%	( 1.1%) - 6.8%
Immunizations/Vaccinations	18	34	\$9	\$340	\$249,097	\$9,782,755	2.5%	2.6%	( 2.5%) - 7.6%
Minor procedures - musculoskeletal	33	45	\$1	\$2,669	\$29,949	\$76,864,500	0.0%	0.0%	( 0.0%) - 0.1%
Ambulatory procedures - skin	41	69	\$0	\$5,681	\$0	\$163,603,330	0.0%	0.0%	0.0% - 0.0%
Specialist - psychiatry	38	62	\$0	\$3,723	\$0	\$107,217,792	0.0%	0.0%	0.0% - 0.0%

**First Coast Service Options CT 00591**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,006	3,510	\$11,672	\$200,045	\$60,161,032	\$1,031,129,981	5.8%	0.6%	4.6% - 7.1%
Hospital visit - subsequent	100	194	\$2,679	\$11,144	\$13,809,638	\$57,439,258	24.0%	5.5%	13.3% - 34.8%
All Codes With Less Than 30 Lines	358	454	\$1,917	\$63,987	\$9,879,085	\$329,821,149	3.0%	0.9%	1.3% - 4.7%
Office visits - established	516	526	\$1,853	\$29,426	\$9,551,879	\$151,677,517	6.3%	1.0%	4.4% - 8.2%
Consultations	75	75	\$1,343	\$9,363	\$6,923,555	\$48,260,874	14.3%	3.7%	7.2% - 21.5%
Minor procedures - other (Medicare fee schedule)	88	150	\$1,053	\$5,842	\$5,427,621	\$30,113,582	18.0%	4.6%	9.0% - 27.1%
Office visits - new	32	32	\$608	\$2,467	\$3,133,050	\$12,717,042	24.6%	5.2%	14.3% - 34.9%
Nursing home visit	82	89	\$496	\$5,170	\$2,554,253	\$26,647,655	9.6%	2.8%	4.1% - 15.1%
Ambulance	40	79	\$470	\$13,570	\$2,422,041	\$69,944,915	3.5%	2.5%	( 1.4%) - 8.3%
No Service Code	40	40	\$398	\$2,679	\$2,049,268	\$13,806,906	14.8%	11.4%	( 7.5%) - 37.2%
Emergency room visit	54	54	\$251	\$4,509	\$1,292,539	\$23,240,386	5.6%	3.7%	( 1.8%) - 12.9%
Specialist - ophthalmology	74	109	\$190	\$7,034	\$980,435	\$36,256,697	2.7%	1.4%	( 0.1%) - 5.5%
Other tests - electrocardiograms	86	95	\$114	\$1,657	\$587,354	\$8,540,363	6.9%	2.5%	2.0% - 11.8%
Ambulatory procedures - skin	56	86	\$86	\$2,719	\$443,286	\$14,013,137	3.2%	2.2%	( 1.2%) - 7.5%
Echography - heart	15	43	\$53	\$4,250	\$273,188	\$21,907,179	1.2%	1.3%	( 1.3%) - 3.8%
Other tests - other	63	90	\$50	\$3,814	\$257,724	\$19,660,596	1.3%	1.3%	( 1.2%) - 3.8%
Lab tests - other (non-Medicare fee schedule)	259	473	\$44	\$5,024	\$227,364	\$25,894,688	0.9%	0.5%	( 0.2%) - 1.9%
Lab tests - blood counts	87	97	\$22	\$839	\$111,955	\$4,326,881	2.6%	1.8%	( 1.0%) - 6.1%
Lab tests - routine venipuncture (non Medicare fee schedule)	181	182	\$15	\$504	\$77,317	\$2,597,860	3.0%	1.3%	0.4% - 5.5%
Other drugs	31	47	\$15	\$1,552	\$76,286	\$8,000,688	1.0%	0.8%	( 0.6%) - 2.5%
Standard imaging - chest	67	72	\$10	\$1,011	\$51,493	\$5,213,349	1.0%	1.0%	( 0.9%) - 2.9%
Lab tests - urinalysis	56	58	\$6	\$176	\$31,700	\$909,303	3.5%	2.5%	( 1.5%) - 8.5%
Advanced imaging - CAT: other	25	41	\$0	\$4,665	\$0	\$24,046,496	0.0%	0.0%	0.0% - 0.0%
Immunizations/Vaccinations	42	76	\$0	\$859	\$0	\$4,428,063	0.0%	0.0%	0.0% - 0.0%
Lab tests - automated general profiles	95	100	\$0	\$867	\$0	\$4,467,856	0.0%	0.0%	0.0% - 0.0%
Minor procedures - skin	27	30	\$0	\$3,309	\$0	\$17,056,396	0.0%	0.0%	0.0% - 0.0%
Specialist - pathology	48	52	\$0	\$4,615	\$0	\$23,785,731	0.0%	0.0%	0.0% - 0.0%
Specialist - psychiatry	52	70	\$0	\$3,571	\$0	\$18,406,974	0.0%	0.0%	0.0% - 0.0%
Standard imaging - musculoskeletal	55	66	\$0	\$2,472	\$0	\$12,742,041	0.0%	0.0%	0.0% - 0.0%
Standard imaging - nuclear medicine	13	30	\$0	\$2,950	\$0	\$15,206,400	0.0%	0.0%	0.0% - 0.0%

**KS BCBS KS/NE/W MO 00650/00655/00651**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	3,085	5,474	\$12,468	\$274,619	\$60,009,876	\$1,311,702,807	4.6%	1.7%	1.2% - 8.0%
Hospital visit - subsequent	158	309	\$3,024	\$17,413	\$14,541,402	\$84,630,284	17.2%	9.8%	( 2.0%) - 36.4%
Consultations	102	105	\$1,298	\$10,789	\$6,372,835	\$50,987,974	12.5%	11.2%	( 9.5%) - 34.5%
No Service Code	37	39	\$1,359	\$7,786	\$5,710,424	\$34,630,792	16.5%	27.2%	( 36.8%) - 69.8%
All Codes With Less Than 30 Lines	366	479	\$983	\$69,185	\$5,102,064	\$328,834,860	1.6%	2.1%	( 2.6%) - 5.7%
Office visits - established	776	781	\$1,047	\$36,622	\$4,931,494	\$175,087,150	2.8%	1.4%	0.0% - 5.6%
Hospital visit - initial	43	43	\$682	\$4,883	\$3,255,454	\$23,155,183	14.1%	12.0%	( 9.4%) - 37.5%
Ambulance	32	70	\$539	\$7,699	\$2,962,823	\$38,135,830	7.8%	16.6%	( 24.7%) - 40.2%
Minor procedures - other (Medicare fee schedule)	126	212	\$477	\$7,791	\$2,336,734	\$37,393,943	6.2%	6.6%	( 6.6%) - 19.1%
Anesthesia	49	50	\$407	\$7,577	\$2,239,721	\$35,439,416	6.3%	10.4%	( 14.1%) - 26.8%
Nursing home visit	61	70	\$500	\$3,143	\$2,011,855	\$14,852,984	13.5%	11.7%	( 9.4%) - 36.5%
Office visits - new	47	47	\$355	\$3,266	\$1,852,084	\$16,256,371	11.4%	10.2%	( 8.5%) - 31.3%
Chiropractic	179	250	\$263	\$7,637	\$1,283,386	\$35,640,812	3.6%	4.0%	( 4.2%) - 11.4%
Other tests - other	57	93	\$256	\$3,479	\$1,142,048	\$16,449,784	6.9%	10.6%	( 13.9%) - 27.8%
Specialist - ophthalmology	81	120	\$194	\$5,361	\$910,554	\$25,523,805	3.6%	5.3%	( 6.8%) - 13.9%
Specialist - pathology	60	69	\$166	\$3,705	\$849,867	\$17,536,640	4.8%	8.9%	( 12.6%) - 22.3%
Emergency room visit	71	71	\$166	\$5,145	\$828,199	\$24,423,741	3.4%	5.3%	( 6.9%) - 13.7%
Lab tests - other (non-Medicare fee schedule)	404	634	\$155	\$7,054	\$773,349	\$35,697,997	2.2%	2.7%	( 3.2%) - 7.5%
Other tests - electrocardiograms	81	87	\$92	\$1,032	\$461,546	\$4,942,569	9.3%	12.0%	( 14.2%) - 32.9%
Specialist - psychiatry	76	83	\$89	\$3,942	\$412,272	\$18,994,166	2.2%	5.2%	( 8.1%) - 12.4%
Minor procedures - musculoskeletal	48	53	\$75	\$3,763	\$374,082	\$17,529,430	2.1%	5.4%	( 8.5%) - 12.8%
Standard imaging - chest	143	154	\$63	\$1,892	\$314,490	\$8,891,751	3.5%	6.5%	( 9.3%) - 16.3%
Lab tests - automated general profiles	171	174	\$48	\$1,958	\$238,744	\$9,709,698	2.5%	4.3%	( 6.0%) - 10.9%
Other drugs	93	130	\$49	\$13,927	\$235,921	\$68,532,168	0.3%	0.7%	( 1.0%) - 1.7%
Ambulatory procedures - skin	43	60	\$37	\$3,603	\$183,996	\$16,696,387	1.1%	5.9%	( 10.4%) - 12.6%
Lab tests - blood counts	154	177	\$36	\$1,311	\$167,314	\$6,477,820	2.6%	4.2%	( 5.7%) - 10.8%
Standard imaging - musculoskeletal	97	113	\$35	\$2,813	\$149,047	\$13,384,296	1.1%	2.4%	( 3.6%) - 5.9%
Standard imaging - other	46	49	\$27	\$1,298	\$148,900	\$5,489,693	2.7%	17.4%	( 31.3%) - 36.7%
Lab tests - routine venipuncture (non Medicare fee schedule)	329	332	\$27	\$921	\$127,642	\$4,429,856	2.9%	2.8%	( 2.5%) - 8.3%
Lab tests - urinalysis	99	99	\$20	\$369	\$91,633	\$1,802,339	5.1%	7.8%	( 10.2%) - 20.3%
Advanced imaging - CAT: other	38	58	\$0	\$4,178	\$0	\$20,074,105	0.0%	0.0%	0.0% - 0.0%
Ambulatory procedures - other	35	42	\$0	\$6,244	\$0	\$28,602,999	0.0%	0.0%	0.0% - 0.0%
Echography - heart	27	73	\$0	\$5,057	\$0	\$24,199,331	0.0%	0.0%	0.0% - 0.0%
Immunizations/Vaccinations	67	132	\$0	\$1,144	\$0	\$5,261,197	0.0%	0.0%	0.0% - 0.0%
Minor procedures - skin	68	82	\$0	\$5,364	\$0	\$27,026,668	0.0%	0.0%	0.0% - 0.0%
Other - non-Medicare fee schedule	37	37	\$0	\$197	\$0	\$1,071,446	0.0%	0.0%	0.0% - 0.0%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Standard imaging - breast	48	48	\$0	\$1,877	\$0	\$8,847,925	0.0%	0.0%	0.0% - 0.0%
Standard imaging - nuclear medicine	18	49	\$0	\$5,192	\$0	\$25,061,396	0.0%	0.0%	0.0% - 0.0%

**BCBS MT 00751**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	1,980	3,286	\$5,776	\$204,958	\$5,147,227	\$182,633,486	2.8%	0.5%	1.9% - 3.7%
Hospital visit - subsequent	88	149	\$926	\$7,675	\$825,369	\$6,838,687	12.1%	3.3%	5.6% - 18.6%
Minor procedures - other (Medicare fee schedule)	114	202	\$846	\$7,465	\$753,557	\$6,651,650	11.3%	3.1%	5.3% - 17.3%
All Codes With Less Than 30 Lines	323	448	\$758	\$77,845	\$675,401	\$69,366,066	1.0%	0.6%	( 0.2%) - 2.2%
Office visits - established	597	607	\$715	\$27,088	\$637,539	\$24,137,211	2.6%	0.6%	1.5% - 3.8%
Other drugs	62	92	\$544	\$12,339	\$485,058	\$10,994,813	4.4%	4.2%	( 3.9%) - 12.7%
Consultations	67	72	\$429	\$6,722	\$382,629	\$5,989,473	6.4%	2.9%	0.6% - 12.2%
Hospital visit - initial	34	34	\$414	\$3,481	\$368,656	\$3,101,643	11.9%	4.7%	2.8% - 21.0%
Nursing home visit	47	57	\$181	\$2,087	\$161,401	\$1,859,669	8.7%	4.4%	( 0.0%) - 17.4%
Chiropractic	70	103	\$176	\$2,470	\$156,874	\$2,201,174	7.1%	4.1%	( 0.9%) - 15.1%
Lab tests - other (non-Medicare fee schedule)	119	168	\$149	\$1,609	\$133,136	\$1,433,467	9.3%	3.9%	1.6% - 17.0%
Emergency room visit	52	52	\$138	\$4,284	\$122,559	\$3,817,695	3.2%	1.8%	( 0.3%) - 6.7%
Ambulatory procedures - skin	35	48	\$115	\$4,908	\$102,394	\$4,373,059	2.3%	1.7%	( 1.0%) - 5.7%
Office visits - new	44	45	\$99	\$2,703	\$88,511	\$2,408,287	3.7%	1.9%	0.0% - 7.3%
Other tests - other	29	40	\$74	\$1,273	\$65,690	\$1,134,404	5.8%	5.7%	( 5.3%) - 16.9%
Specialist - ophthalmology	93	151	\$61	\$6,995	\$54,356	\$6,232,888	0.9%	0.9%	( 0.8%) - 2.6%
Standard imaging - musculoskeletal	84	105	\$33	\$2,397	\$29,272	\$2,135,787	1.4%	1.1%	( 0.9%) - 3.6%
Advanced imaging - CAT: other	17	31	\$30	\$1,464	\$27,107	\$1,304,448	2.1%	2.1%	( 2.0%) - 6.2%
Standard imaging - chest	83	86	\$30	\$978	\$26,741	\$871,767	3.1%	2.2%	( 1.3%) - 7.5%
Lab tests - blood counts	54	62	\$16	\$565	\$13,963	\$503,574	2.8%	2.1%	( 1.3%) - 6.8%
Specialist - pathology	47	56	\$12	\$3,004	\$10,506	\$2,676,591	0.4%	0.4%	( 0.4%) - 1.2%
Lab tests - urinalysis	41	44	\$11	\$150	\$9,713	\$133,760	7.3%	4.0%	( 0.5%) - 15.0%
Lab tests - routine venipuncture (non Medicare fee schedule)	125	131	\$9	\$378	\$8,020	\$336,827	2.4%	1.4%	( 0.3%) - 5.0%
Immunizations/Vaccinations	34	65	\$7	\$483	\$6,389	\$430,167	1.5%	1.5%	( 1.4%) - 4.4%
Minor procedures - skin	51	65	\$3	\$5,342	\$2,388	\$4,759,902	0.1%	0.1%	( 0.1%) - 0.2%
Ambulance	14	52	\$0	\$4,012	\$0	\$3,575,099	0.0%	0.0%	0.0% - 0.0%
Anesthesia	34	38	\$0	\$6,777	\$0	\$6,038,785	0.0%	0.0%	0.0% - 0.0%
Echography - heart	20	51	\$0	\$2,982	\$0	\$2,656,951	0.0%	0.0%	0.0% - 0.0%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Lab tests - automated general profiles	41	42	\$0	\$487	\$0	\$434,044	0.0%	0.0%	0.0% - 0.0%
Minor procedures - musculoskeletal	36	42	\$0	\$2,929	\$0	\$2,609,804	0.0%	0.0%	0.0% - 0.0%
Other tests - electrocardiograms	61	70	\$0	\$665	\$0	\$592,335	0.0%	0.0%	0.0% - 0.0%
Specialist - psychiatry	35	46	\$0	\$1,772	\$0	\$1,579,015	0.0%	0.0%	0.0% - 0.0%
Standard imaging - breast	32	32	\$0	\$1,632	\$0	\$1,454,443	0.0%	0.0%	0.0% - 0.0%

### HealthNow NY 00801

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,077	3,489	\$9,351	\$208,655	\$53,949,543	\$1,203,815,075	4.5%	0.6%	3.3% - 5.6%
Hospital visit - subsequent	137	273	\$1,597	\$15,407	\$9,214,838	\$88,889,528	10.4%	2.2%	6.0% - 14.8%
Office visits - established	601	606	\$1,562	\$30,407	\$9,012,851	\$175,429,234	5.1%	0.7%	3.7% - 6.6%
Consultations	85	87	\$1,186	\$10,166	\$6,843,900	\$58,650,513	11.7%	2.5%	6.7% - 16.6%
Minor procedures - other (Medicare fee schedule)	104	187	\$862	\$6,004	\$4,970,920	\$34,640,668	14.3%	4.6%	5.4% - 23.3%
All Codes With Less Than 30 Lines	308	455	\$822	\$60,665	\$4,743,144	\$350,002,057	1.4%	0.8%	( 0.2%) - 2.9%
No Service Code	32	35	\$817	\$9,381	\$4,712,509	\$54,122,279	8.7%	6.5%	( 4.0%) - 21.4%
Other drugs	42	56	\$535	\$12,777	\$3,089,402	\$73,718,182	4.2%	3.8%	( 3.3%) - 11.6%
Hospital visit - initial	32	32	\$460	\$3,898	\$2,652,600	\$22,491,279	11.8%	5.7%	0.6% - 23.0%
Nursing home visit	56	60	\$300	\$2,927	\$1,730,187	\$16,889,417	10.2%	3.9%	2.7% - 17.8%
Emergency room visit	57	57	\$226	\$4,579	\$1,301,636	\$26,417,764	4.9%	3.3%	( 1.6%) - 11.4%
Chiropractic	48	69	\$207	\$2,075	\$1,196,113	\$11,969,268	10.0%	5.3%	( 0.4%) - 20.4%
Echography - heart	28	75	\$196	\$5,167	\$1,129,304	\$29,811,098	3.8%	3.8%	( 3.6%) - 11.1%
Other tests - electrocardiograms	109	129	\$120	\$1,604	\$692,906	\$9,256,204	7.5%	3.1%	1.4% - 13.6%
Specialist - ophthalmology	72	90	\$110	\$5,898	\$633,250	\$34,028,418	1.9%	1.5%	( 1.0%) - 4.7%
Lab tests - other (non-Medicare fee schedule)	155	310	\$58	\$2,635	\$333,126	\$15,203,597	2.2%	1.2%	( 0.2%) - 4.6%
Advanced imaging - CAT: other	29	44	\$55	\$3,408	\$317,317	\$19,660,347	1.6%	1.6%	( 1.6%) - 4.8%
Other tests - other	32	51	\$54	\$2,872	\$311,317	\$16,568,176	1.9%	1.5%	( 1.0%) - 4.7%
Anesthesia	37	40	\$51	\$3,864	\$292,163	\$22,290,216	1.3%	1.3%	( 1.3%) - 3.9%
Office visits - new	32	33	\$50	\$1,609	\$288,932	\$9,285,109	3.1%	2.3%	( 1.5%) - 7.7%
Standard imaging - chest	88	91	\$34	\$940	\$195,237	\$5,420,819	3.6%	2.1%	( 0.6%) - 7.8%
Standard imaging - musculoskeletal	55	78	\$34	\$1,387	\$194,025	\$8,001,532	2.4%	1.8%	( 1.1%) - 6.0%
Minor procedures - skin	40	45	\$12	\$2,158	\$68,310	\$12,448,532	0.5%	0.6%	( 0.6%) - 1.7%
Lab tests - urinalysis	48	48	\$4	\$150	\$25,558	\$864,199	3.0%	2.9%	( 2.7%) - 8.7%
Ambulance	25	49	\$0	\$6,920	\$0	\$39,922,444	0.0%	0.0%	0.0% - 0.0%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Ambulatory procedures - skin	33	47	\$0	\$2,063	\$0	\$11,904,131	0.0%	0.0%	0.0% - 0.0%
Immunizations/Vaccinations	32	58	\$0	\$436	\$0	\$2,515,865	0.0%	0.0%	0.0% - 0.0%
Lab tests - automated general profiles	43	43	\$0	\$425	\$0	\$2,451,824	0.0%	0.0%	0.0% - 0.0%
Lab tests - blood counts	48	53	\$0	\$435	\$0	\$2,507,153	0.0%	0.0%	0.0% - 0.0%
Lab tests - routine venipuncture (non Medicare fee schedule)	115	115	\$0	\$312	\$0	\$1,800,055	0.0%	0.0%	0.0% - 0.0%
Specialist - pathology	40	61	\$0	\$2,932	\$0	\$16,918,322	0.0%	0.0%	0.0% - 0.0%
Specialist - psychiatry	55	80	\$0	\$2,385	\$0	\$13,761,303	0.0%	0.0%	0.0% - 0.0%
Standard imaging - nuclear medicine	19	32	\$0	\$2,769	\$0	\$15,975,543	0.0%	0.0%	0.0% - 0.0%

### Empire NY 00803

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,016	4,031	\$23,720	\$245,436	\$343,119,055	\$3,550,322,197	9.7%	0.9%	7.9% - 11.4%
Hospital visit - subsequent	122	229	\$4,401	\$16,731	\$63,661,341	\$242,014,325	26.3%	5.2%	16.1% - 36.5%
Consultations	106	121	\$3,923	\$16,626	\$56,751,221	\$240,501,100	23.6%	3.1%	17.5% - 29.7%
Office visits - established	529	546	\$3,794	\$32,002	\$54,880,556	\$462,920,888	11.9%	1.3%	9.3% - 14.4%
Minor procedures - other (Medicare fee schedule)	150	429	\$2,965	\$14,461	\$42,894,384	\$209,181,202	20.5%	4.1%	12.5% - 28.5%
All Codes With Less Than 30 Lines	322	461	\$2,343	\$68,907	\$33,885,914	\$996,769,808	3.4%	1.0%	1.5% - 5.3%
Hospital visit - initial	22	34	\$1,524	\$3,878	\$22,041,792	\$56,092,178	39.3%	11.5%	16.7% - 61.8%
Other tests - other	44	78	\$1,130	\$6,097	\$16,347,634	\$88,191,905	18.5%	13.7%	( 8.2%) - 45.3%
Office visits - new	44	44	\$988	\$4,800	\$14,285,013	\$69,437,663	20.6%	3.9%	12.9% - 28.3%
Nursing home visit	84	93	\$354	\$5,038	\$5,125,090	\$72,880,138	7.0%	2.6%	2.0% - 12.0%
Lab tests - other (non-Medicare fee schedule)	215	487	\$313	\$4,248	\$4,530,851	\$61,446,255	7.4%	3.3%	1.0% - 13.8%
Ambulatory procedures - other	34	48	\$283	\$1,369	\$4,091,393	\$19,807,756	20.7%	14.7%	( 8.2%) - 49.5%
Ambulance	32	65	\$239	\$8,696	\$3,463,739	\$125,791,231	2.8%	2.7%	( 2.6%) - 8.1%
Other tests - electrocardiograms	118	123	\$210	\$2,354	\$3,042,073	\$34,050,386	8.9%	3.1%	2.8% - 15.1%
Emergency room visit	34	35	\$202	\$3,328	\$2,929,098	\$48,143,298	6.1%	3.4%	( 0.5%) - 12.7%
Specialist - ophthalmology	72	110	\$198	\$9,050	\$2,867,476	\$130,912,125	2.2%	1.8%	( 1.3%) - 5.7%
Specialist - psychiatry	75	115	\$177	\$5,928	\$2,559,507	\$85,745,228	3.0%	1.7%	( 0.3%) - 6.3%
Specialist - pathology	36	50	\$142	\$4,519	\$2,047,432	\$65,370,572	3.1%	3.1%	( 3.0%) - 9.2%
Chiropractic	26	53	\$125	\$1,693	\$1,808,753	\$24,488,759	7.4%	6.3%	( 5.0%) - 19.7%
Minor procedures - skin	52	57	\$119	\$2,785	\$1,728,326	\$40,284,537	4.3%	4.2%	( 3.9%) - 12.5%
Lab tests - automated general profiles	72	80	\$84	\$714	\$1,210,609	\$10,331,186	11.7%	5.8%	0.3% - 23.1%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Immunizations/Vaccinations	29	50	\$61	\$474	\$878,484	\$6,856,598	12.8%	10.5%	( 7.8%) - 33.4%
Standard imaging - musculoskeletal	44	57	\$56	\$1,637	\$811,364	\$23,686,218	3.4%	2.5%	( 1.5%) - 8.3%
Lab tests - blood counts	73	82	\$33	\$716	\$471,283	\$10,351,293	4.6%	2.6%	( 0.5%) - 9.6%
Standard imaging - chest	84	98	\$22	\$1,126	\$321,710	\$16,283,841	2.0%	1.4%	( 0.7%) - 4.7%
Lab tests - urinalysis	49	49	\$18	\$158	\$262,547	\$2,281,482	11.5%	5.0%	1.8% - 21.2%
Lab tests - routine venipuncture (non Medicare fee schedule)	184	185	\$15	\$494	\$216,981	\$7,147,497	3.0%	1.3%	0.4% - 5.7%
Other drugs	40	56	\$0	\$11,186	\$4,484	\$161,811,224	0.0%	0.0%	( 0.0%) - 0.0%
Advanced imaging - CAT: other	37	56	\$0	\$8,823	\$0	\$127,626,600	0.0%	0.0%	0.0% - 0.0%
Ambulatory procedures - skin	24	36	\$0	\$2,208	\$0	\$31,932,362	0.0%	0.0%	0.0% - 0.0%
Echography - heart	15	42	\$0	\$4,382	\$0	\$63,385,341	0.0%	0.0%	0.0% - 0.0%
Other - non-Medicare fee schedule	32	32	\$0	\$153	\$0	\$2,218,558	0.0%	0.0%	0.0% - 0.0%
Standard imaging - other	19	30	\$0	\$856	\$0	\$12,380,643	0.0%	0.0%	0.0% - 0.0%

### Empire NJ 00805

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,015	4,161	\$14,030	\$221,268	\$181,849,570	\$2,867,926,285	6.3%	0.7%	4.9% - 7.8%
Consultations	84	98	\$3,100	\$11,612	\$40,184,452	\$150,511,598	26.7%	3.7%	19.4% - 34.0%
Hospital visit - subsequent	99	211	\$3,055	\$17,125	\$39,600,545	\$221,964,031	17.8%	5.2%	7.7% - 28.0%
All Codes With Less Than 30 Lines	407	527	\$2,391	\$74,783	\$30,996,442	\$969,283,448	3.2%	1.0%	1.2% - 5.2%
Office visits - established	516	525	\$2,160	\$29,171	\$27,993,697	\$378,092,151	7.4%	1.0%	5.5% - 9.3%
Minor procedures - other (Medicare fee schedule)	100	219	\$1,245	\$7,259	\$16,139,546	\$94,088,704	17.2%	4.8%	7.7% - 26.6%
Nursing home visit	62	68	\$547	\$3,963	\$7,091,648	\$51,370,706	13.8%	4.5%	5.0% - 22.6%
Advanced imaging - CAT: other	17	30	\$391	\$6,873	\$5,063,204	\$89,080,456	5.7%	4.8%	( 3.8%) - 15.2%
Lab tests - other (non-Medicare fee schedule)	425	1,025	\$192	\$13,227	\$2,482,738	\$171,435,032	1.4%	0.7%	0.1% - 2.8%
Chiropractic	31	48	\$167	\$1,243	\$2,168,556	\$16,109,606	13.5%	9.5%	( 5.1%) - 32.0%
Anesthesia	32	35	\$160	\$4,137	\$2,073,809	\$53,620,270	3.9%	3.8%	( 3.6%) - 11.3%
Other tests - electrocardiograms	97	104	\$142	\$1,540	\$1,844,394	\$19,964,816	9.2%	3.5%	2.4% - 16.1%
Specialist - pathology	25	34	\$107	\$2,170	\$1,384,267	\$28,125,124	4.9%	3.1%	( 1.1%) - 10.9%
Minor procedures - skin	65	75	\$92	\$3,593	\$1,195,032	\$46,569,709	2.6%	1.9%	( 1.1%) - 6.2%
Echography - heart	19	54	\$77	\$4,976	\$998,798	\$64,499,082	1.5%	1.6%	( 1.6%) - 4.7%
Lab tests - automated general profiles	135	139	\$67	\$1,374	\$862,445	\$17,805,204	4.8%	4.6%	( 4.2%) - 13.9%
Other tests - other	38	52	\$49	\$2,510	\$641,455	\$32,530,283	2.0%	2.0%	( 2.0%) - 5.9%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Other drugs	36	55	\$34	\$7,714	\$444,832	\$99,980,784	0.4%	0.4%	( 0.3%) - 1.1%
Immunizations/Vaccinations	23	49	\$27	\$308	\$344,511	\$3,996,878	8.6%	5.1%	( 1.4%) - 18.7%
Standard imaging - chest	79	88	\$14	\$1,100	\$183,662	\$14,253,547	1.3%	1.1%	( 0.9%) - 3.5%
Lab tests - routine venipuncture (non Medicare fee schedule)	178	178	\$12	\$507	\$155,536	\$6,571,382	2.4%	1.2%	0.1% - 4.7%
Ambulance	32	66	\$0	\$7,130	\$0	\$92,415,141	0.0%	0.0%	0.0% - 0.0%
Ambulatory procedures - skin	40	51	\$0	\$3,044	\$0	\$39,449,157	0.0%	0.0%	0.0% - 0.0%
Lab tests - bacterial cultures	24	35	\$0	\$382	\$0	\$4,945,515	0.0%	0.0%	0.0% - 0.0%
Lab tests - blood counts	140	149	\$0	\$1,368	\$0	\$17,730,287	0.0%	0.0%	0.0% - 0.0%
Lab tests - urinalysis	51	51	\$0	\$221	\$0	\$2,864,189	0.0%	0.0%	0.0% - 0.0%
Specialist - ophthalmology	56	92	\$0	\$6,032	\$0	\$78,181,165	0.0%	0.0%	0.0% - 0.0%
Standard imaging - musculoskeletal	35	52	\$0	\$1,277	\$0	\$16,547,439	0.0%	0.0%	0.0% - 0.0%
Standard imaging - nuclear medicine	23	51	\$0	\$6,631	\$0	\$85,940,580	0.0%	0.0%	0.0% - 0.0%

**Nordian CO/ND/SD/WY/IA 00820/00824/00825/00826/00889**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,137	3,648	\$8,912	\$206,699	\$66,195,615	\$1,538,959,526	4.3%	1.5%	1.4% - 7.2%
All Codes With Less Than 30 Lines	345	474	\$2,048	\$70,723	\$14,383,941	\$530,181,344	2.7%	4.0%	( 5.1%) - 10.5%
Office visits - established	562	568	\$1,537	\$26,673	\$11,642,932	\$197,215,752	5.9%	2.2%	1.6% - 10.2%
Hospital visit - subsequent	113	162	\$1,178	\$8,294	\$8,732,169	\$60,715,940	14.4%	8.0%	( 1.2%) - 30.0%
Consultations	86	86	\$1,108	\$10,232	\$8,369,400	\$75,594,283	11.1%	5.2%	0.9% - 21.2%
Minor procedures - other (Medicare fee schedule)	103	181	\$1,064	\$6,290	\$8,250,604	\$47,628,417	17.3%	9.4%	( 1.1%) - 35.8%
Hospital visit - initial	31	31	\$510	\$3,422	\$3,844,721	\$25,646,625	15.0%	11.2%	( 7.0%) - 37.0%
Nursing home visit	40	43	\$341	\$2,100	\$2,589,790	\$15,448,281	16.8%	9.8%	( 2.5%) - 36.0%
Minor procedures - musculoskeletal	36	42	\$243	\$4,286	\$1,912,308	\$32,246,060	5.9%	8.3%	( 10.4%) - 22.3%
Anesthesia	31	32	\$278	\$4,415	\$1,892,076	\$32,735,346	5.8%	13.0%	( 19.7%) - 31.2%
Advanced imaging - CAT: other	31	46	\$101	\$2,720	\$795,869	\$19,833,213	4.0%	8.0%	( 11.7%) - 19.7%
Chiropractic	128	165	\$87	\$4,150	\$647,253	\$29,961,316	2.2%	2.5%	( 2.7%) - 7.0%
Lab tests - other (non-Medicare fee schedule)	231	389	\$67	\$3,606	\$500,108	\$26,951,640	1.9%	2.1%	( 2.3%) - 6.0%
Other tests - other	33	38	\$59	\$1,692	\$462,301	\$12,664,038	3.7%	5.5%	( 7.1%) - 14.4%
Standard imaging - musculoskeletal	82	107	\$42	\$2,644	\$310,014	\$20,024,171	1.5%	2.9%	( 4.2%) - 7.3%
Standard imaging - chest	93	99	\$40	\$1,118	\$295,140	\$8,268,669	3.6%	4.2%	( 4.7%) - 11.8%
Minor procedures - skin	48	53	\$33	\$4,974	\$223,471	\$35,634,806	0.6%	1.1%	( 1.5%) - 2.7%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Other tests - electrocardiograms	68	83	\$27	\$927	\$209,879	\$6,851,786	3.1%	3.9%	( 4.6%) - 10.7%
Lab tests - automated general profiles	69	69	\$27	\$772	\$209,564	\$5,833,282	3.6%	3.5%	( 3.2%) - 10.4%
Other drugs	62	85	\$24	\$17,441	\$188,478	\$132,709,541	0.1%	0.2%	( 0.2%) - 0.5%
Lab tests - urinalysis	47	50	\$24	\$175	\$180,648	\$1,272,094	14.2%	11.2%	( 7.8%) - 36.2%
Specialist - ophthalmology	81	127	\$23	\$6,298	\$158,093	\$45,775,228	0.3%	0.6%	( 0.9%) - 1.6%
Office visits - new	30	30	\$12	\$1,577	\$92,886	\$11,759,766	0.8%	1.2%	( 1.6%) - 3.2%
Lab tests - routine venipuncture (non Medicare fee schedule)	193	195	\$12	\$564	\$91,357	\$4,176,001	2.2%	2.0%	( 1.8%) - 6.2%
Emergency room visit	61	61	\$11	\$5,193	\$87,056	\$38,685,299	0.2%	0.4%	( 0.5%) - 0.9%
Lab tests - blood counts	81	96	\$10	\$796	\$77,838	\$5,894,572	1.3%	2.2%	( 3.0%) - 5.6%
Immunizations/Vaccinations	41	80	\$7	\$630	\$47,721	\$4,660,715	1.0%	2.5%	( 3.9%) - 6.0%
Ambulatory procedures - skin	30	46	\$0	\$4,542	\$0	\$32,782,795	0.0%	0.0%	0.0% - 0.0%
Echography - heart	25	74	\$0	\$3,264	\$0	\$23,972,140	0.0%	0.0%	0.0% - 0.0%
Specialist - pathology	34	43	\$0	\$2,610	\$0	\$19,736,178	0.0%	0.0%	0.0% - 0.0%
Specialist - psychiatry	43	63	\$0	\$2,712	\$0	\$19,875,876	0.0%	0.0%	0.0% - 0.0%
Standard imaging - nuclear medicine	15	30	\$0	\$1,858	\$0	\$14,224,356	0.0%	0.0%	0.0% - 0.0%

**Nordian AZ/HI/NV/AK/OR/WA 00831/00832/00833/00834/00835//00836**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	1,976	3,561	\$12,164	\$225,341	\$180,887,807	\$3,326,508,715	5.4%	1.2%	3.0% - 7.9%
All Codes With Less Than 30 Lines	363	481	\$2,433	\$72,397	\$35,854,011	\$1,066,320,813	3.4%	2.1%	( 0.7%) - 7.4%
Hospital visit - subsequent	107	195	\$1,924	\$10,633	\$28,703,090	\$157,590,562	18.2%	6.8%	5.0% - 31.5%
Office visits - established	556	570	\$1,704	\$30,314	\$25,383,891	\$446,807,376	5.7%	1.6%	2.5% - 8.8%
Consultations	79	80	\$1,548	\$10,120	\$22,888,409	\$150,284,762	15.2%	6.1%	3.3% - 27.2%
Minor procedures - other (Medicare fee schedule)	132	229	\$1,443	\$9,745	\$21,541,866	\$144,351,544	14.9%	7.4%	0.4% - 29.5%
Oncology - radiation therapy	13	32	\$465	\$4,781	\$7,053,363	\$72,131,853	9.8%	11.3%	( 12.3%) - 31.9%
Office visits - new	36	36	\$398	\$3,626	\$5,875,616	\$53,701,411	10.9%	8.1%	( 4.9%) - 26.8%
Ambulance	28	70	\$348	\$16,190	\$5,277,767	\$239,239,409	2.2%	4.1%	( 5.8%) - 10.2%
Lab tests - other (non-Medicare fee schedule)	237	433	\$349	\$4,698	\$5,249,538	\$69,575,674	7.5%	6.2%	( 4.7%) - 19.8%
Emergency room visit	51	51	\$301	\$5,160	\$4,440,177	\$76,169,618	5.8%	7.0%	( 7.9%) - 19.5%
Chiropractic	65	98	\$223	\$2,300	\$3,269,688	\$33,731,233	9.7%	7.6%	( 5.2%) - 24.6%
Nursing home visit	30	37	\$191	\$1,896	\$2,837,541	\$28,043,498	10.1%	9.1%	( 7.7%) - 27.9%
Standard imaging - nuclear medicine	17	44	\$141	\$4,344	\$2,134,844	\$63,763,070	3.3%	8.7%	( 13.7%) - 20.4%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Specialist - ophthalmology	56	82	\$140	\$4,080	\$2,120,881	\$60,307,283	3.5%	4.7%	( 5.7%) - 12.8%
Minor procedures - skin	38	41	\$75	\$3,539	\$1,133,292	\$52,173,877	2.2%	4.8%	( 7.2%) - 11.5%
Echography - heart	18	48	\$73	\$3,691	\$1,112,651	\$54,336,024	2.0%	4.6%	( 6.9%) - 11.0%
Ambulatory procedures - skin	39	57	\$53	\$4,544	\$811,836	\$67,937,416	1.2%	1.3%	( 1.4%) - 3.8%
Specialist - pathology	36	43	\$49	\$3,421	\$747,180	\$50,339,520	1.5%	3.2%	( 4.9%) - 7.8%
Standard imaging - breast	35	35	\$47	\$1,871	\$670,203	\$27,493,368	2.4%	4.3%	( 6.0%) - 10.9%
Standard imaging - musculoskeletal	70	88	\$41	\$2,561	\$590,146	\$37,828,444	1.6%	3.0%	( 4.2%) - 7.4%
Other drugs	53	75	\$39	\$10,163	\$577,496	\$147,327,575	0.4%	0.8%	( 1.3%) - 2.0%
Other tests - other	35	42	\$34	\$2,262	\$484,227	\$33,231,515	1.5%	2.6%	( 3.7%) - 6.6%
No Service Code	38	42	\$33	\$7,555	\$477,057	\$112,853,812	0.4%	1.3%	( 2.1%) - 2.9%
Standard imaging - chest	85	91	\$27	\$1,033	\$382,277	\$15,310,449	2.5%	5.9%	( 9.0%) - 14.0%
Lab tests - automated general profiles	88	90	\$27	\$874	\$381,416	\$12,956,520	2.9%	4.8%	( 6.5%) - 12.4%
Lab tests - routine venipuncture (non Medicare fee schedule)	173	177	\$24	\$462	\$351,681	\$6,810,720	5.2%	3.5%	( 1.8%) - 12.1%
Lab tests - blood counts	78	86	\$20	\$733	\$292,924	\$10,816,936	2.7%	3.8%	( 4.8%) - 10.2%
Other tests - electrocardiograms	55	57	\$8	\$653	\$127,034	\$9,648,753	1.3%	2.4%	( 3.4%) - 6.1%
Lab tests - urinalysis	47	47	\$8	\$152	\$117,705	\$2,256,525	5.2%	6.6%	( 7.7%) - 18.2%
Immunizations/Vaccinations	36	63	\$0	\$483	\$0	\$7,186,431	0.0%	0.0%	0.0% - 0.0%
Standard imaging - other	32	41	\$0	\$1,060	\$0	\$15,982,722	0.0%	0.0%	0.0% - 0.0%

**HGSA PA 00865**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,040	3,403	\$10,025	\$189,313	\$159,110,610	\$3,004,618,068	5.3%	0.7%	4.0% - 6.6%
Hospital visit - subsequent	148	277	\$2,702	\$16,449	\$42,879,189	\$261,063,887	16.4%	4.0%	8.6% - 24.2%
Consultations	85	85	\$1,855	\$9,704	\$29,448,722	\$154,007,407	19.1%	3.2%	12.8% - 25.5%
Office visits - established	505	514	\$1,415	\$25,986	\$22,460,981	\$412,420,339	5.4%	1.0%	3.6% - 7.3%
Hospital visit - initial	37	37	\$780	\$4,793	\$12,380,274	\$76,071,909	16.3%	5.4%	5.8% - 26.8%
All Codes With Less Than 30 Lines	349	455	\$669	\$55,729	\$10,618,420	\$884,488,508	1.2%	0.7%	( 0.2%) - 2.6%
Minor procedures - other (Medicare fee schedule)	66	115	\$527	\$4,087	\$8,363,768	\$64,867,368	12.9%	5.5%	2.1% - 23.7%
Office visits - new	32	32	\$376	\$2,367	\$5,967,068	\$37,567,915	15.9%	6.4%	3.4% - 28.4%
Nursing home visit	87	95	\$290	\$4,411	\$4,601,516	\$70,013,265	6.6%	3.0%	0.7% - 12.4%
Anesthesia	35	38	\$264	\$4,329	\$4,191,883	\$68,698,183	6.1%	5.9%	( 5.5%) - 17.7%
Emergency room visit	51	52	\$263	\$4,642	\$4,176,488	\$73,674,099	5.7%	2.5%	0.8% - 10.5%
Ambulance	41	103	\$243	\$11,885	\$3,863,509	\$188,632,180	2.0%	2.0%	( 1.9%) - 6.0%
Chiropractic	36	51	\$212	\$1,406	\$3,358,648	\$22,307,507	15.1%	13.1%	( 10.6%) - 40.7%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Specialist - pathology	33	36	\$71	\$1,871	\$1,132,088	\$29,694,089	3.8%	2.7%	( 1.5%) - 9.2%
Lab tests - other (non-Medicare fee schedule)	204	359	\$57	\$4,180	\$896,719	\$66,347,986	1.4%	0.9%	( 0.4%) - 3.1%
Minor procedures - skin	80	83	\$51	\$4,960	\$816,411	\$78,716,992	1.0%	0.8%	( 0.6%) - 2.7%
Echography - heart	21	62	\$48	\$2,517	\$755,942	\$39,942,077	1.9%	1.9%	( 1.9%) - 5.7%
Ambulatory procedures - skin	44	58	\$46	\$3,617	\$727,056	\$57,407,461	1.3%	1.3%	( 1.3%) - 3.8%
Standard imaging - musculoskeletal	57	80	\$44	\$1,666	\$696,266	\$26,438,286	2.6%	2.5%	( 2.3%) - 7.6%
Standard imaging - nuclear medicine	15	30	\$34	\$2,520	\$541,206	\$39,997,309	1.4%	1.5%	( 1.6%) - 4.3%
Other tests - electrocardiograms	89	92	\$26	\$1,326	\$415,189	\$21,044,959	2.0%	1.1%	( 0.3%) - 4.2%
Other tests - other	47	75	\$25	\$3,780	\$393,287	\$59,989,377	0.7%	0.5%	( 0.4%) - 1.7%
Lab tests - urinalysis	38	38	\$13	\$139	\$210,927	\$2,206,246	9.6%	5.0%	( 0.1%) - 19.3%
Other drugs	28	30	\$8	\$3,856	\$119,827	\$61,197,646	0.2%	0.2%	( 0.2%) - 0.6%
Lab tests - routine venipuncture (non Medicare fee schedule)	126	126	\$6	\$339	\$95,227	\$5,380,313	1.8%	1.2%	( 0.7%) - 4.2%
Advanced imaging - CAT: other	36	57	\$0	\$3,344	\$0	\$53,075,913	0.0%	0.0%	0.0% - 0.0%
Immunizations/Vaccinations	31	59	\$0	\$551	\$0	\$8,751,658	0.0%	0.0%	0.0% - 0.0%
Lab tests - automated general profiles	81	81	\$0	\$735	\$0	\$11,672,898	0.0%	0.0%	0.0% - 0.0%
Lab tests - blood counts	64	67	\$0	\$578	\$0	\$9,168,434	0.0%	0.0%	0.0% - 0.0%
Specialist - ophthalmology	62	75	\$0	\$4,575	\$0	\$72,612,638	0.0%	0.0%	0.0% - 0.0%
Specialist - psychiatry	39	50	\$0	\$1,954	\$0	\$31,005,362	0.0%	0.0%	0.0% - 0.0%
Standard imaging - chest	88	91	\$0	\$1,018	\$0	\$16,155,857	0.0%	0.0%	0.0% - 0.0%

**BCBS AR RI 00524**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,248	4,028	\$17,943	\$214,714	\$16,455,197	\$196,905,774	8.4%	1.0%	6.3% - 10.4%
All Codes With Less Than 30 Lines	308	395	\$2,929	\$54,672	\$2,685,860	\$50,137,463	5.4%	3.1%	( 0.7%) - 11.4%
Hospital visit - subsequent	119	218	\$2,424	\$11,432	\$2,222,588	\$10,484,123	21.2%	3.9%	13.5% - 28.9%
Hospital visit - initial	41	41	\$2,218	\$4,668	\$2,034,463	\$4,280,693	47.5%	7.1%	33.7% - 61.4%
Office visits - established	643	660	\$2,000	\$33,660	\$1,834,204	\$30,867,944	5.9%	0.9%	4.2% - 7.7%
Consultations	88	90	\$1,614	\$10,785	\$1,480,099	\$9,890,638	15.0%	3.3%	8.6% - 21.3%
Ambulance	68	172	\$1,459	\$16,480	\$1,337,762	\$15,113,198	8.9%	3.4%	2.2% - 15.5%
Minor procedures - other (Medicare fee schedule)	98	190	\$1,444	\$5,959	\$1,324,327	\$5,465,077	24.2%	5.7%	13.1% - 35.4%
Nursing home visit	88	95	\$575	\$4,758	\$527,356	\$4,363,302	12.1%	3.3%	5.5% - 18.6%
Specialist - ophthalmology	91	116	\$530	\$7,611	\$485,978	\$6,979,337	7.0%	3.6%	( 0.1%) - 14.0%
Other drugs	39	52	\$470	\$12,951	\$431,019	\$11,876,936	3.6%	3.8%	( 3.9%) - 11.1%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Office visits - new	35	35	\$465	\$3,113	\$426,497	\$2,854,370	14.9%	3.8%	7.4% - 22.5%
Ambulatory procedures - skin	96	155	\$323	\$5,557	\$295,871	\$5,096,318	5.8%	2.4%	1.0% - 10.6%
Specialist - psychiatry	58	70	\$314	\$3,311	\$287,820	\$3,036,489	9.5%	5.1%	( 0.4%) - 19.4%
Emergency room visit	52	52	\$219	\$4,359	\$200,680	\$3,997,890	5.0%	3.5%	( 1.9%) - 11.9%
Other tests - electrocardiograms	117	125	\$183	\$1,912	\$168,271	\$1,753,549	9.6%	3.3%	3.2% - 16.0%
Other tests - other	53	84	\$169	\$3,071	\$155,359	\$2,815,927	5.5%	3.1%	( 0.6%) - 11.6%
Chiropractic	27	44	\$161	\$1,105	\$147,528	\$1,013,004	14.6%	9.2%	( 3.4%) - 32.5%
Advanced imaging - CAT: other	30	45	\$135	\$3,094	\$123,409	\$2,837,285	4.3%	4.3%	( 4.2%) - 12.9%
Oncology - radiation therapy	18	33	\$97	\$4,755	\$89,322	\$4,360,954	2.0%	2.2%	( 2.2%) - 6.3%
Lab tests - other (non-Medicare fee schedule)	223	421	\$66	\$3,379	\$60,159	\$3,098,849	1.9%	1.3%	( 0.7%) - 4.6%
Standard imaging - musculoskeletal	60	69	\$43	\$1,592	\$39,709	\$1,459,942	2.7%	2.6%	( 2.4%) - 7.9%
Immunizations/Vaccinations	28	46	\$41	\$392	\$38,040	\$359,057	10.6%	7.4%	( 3.9%) - 25.0%
Echography - heart	20	55	\$21	\$3,803	\$19,011	\$3,487,857	0.5%	0.6%	( 0.6%) - 1.7%
Lab tests - blood counts	80	94	\$13	\$676	\$11,628	\$620,263	1.9%	1.6%	( 1.3%) - 5.0%
Lab tests - routine venipuncture (non Medicare fee schedule)	192	194	\$12	\$494	\$11,005	\$452,900	2.4%	1.2%	0.1% - 4.8%
Standard imaging - other	31	43	\$8	\$2,022	\$7,153	\$1,854,086	0.4%	0.4%	( 0.4%) - 1.2%
Lab tests - urinalysis	63	63	\$6	\$233	\$5,677	\$213,785	2.7%	2.0%	( 1.3%) - 6.6%
Lab tests - automated general profiles	68	72	\$3	\$606	\$2,889	\$556,106	0.5%	0.5%	( 0.5%) - 1.5%
Other - non-Medicare fee schedule	85	86	\$2	\$431	\$1,513	\$395,171	0.4%	0.4%	( 0.4%) - 1.1%
Lab tests - bacterial cultures	30	41	\$0	\$316	\$0	\$289,709	0.0%	0.0%	0.0% - 0.0%
Specialist - pathology	31	38	\$0	\$2,176	\$0	\$1,995,139	0.0%	0.0%	0.0% - 0.0%
Standard imaging - chest	96	101	\$0	\$1,239	\$0	\$1,136,587	0.0%	0.0%	0.0% - 0.0%
Standard imaging - nuclear medicine	13	33	\$0	\$4,102	\$0	\$3,761,829	0.0%	0.0%	0.0% - 0.0%

**Palmetto GBA SC 00880**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,051	3,596	\$11,045	\$209,582	\$53,133,892	\$1,008,263,447	5.3%	0.8%	3.8% - 6.8%
All Codes With Less Than 30 Lines	328	466	\$2,006	\$66,002	\$9,648,506	\$317,524,969	3.0%	1.4%	0.3% - 5.8%
Hospital visit - subsequent	133	237	\$1,475	\$12,444	\$7,098,236	\$59,866,986	11.9%	2.9%	6.3% - 17.5%
Other drugs	77	126	\$1,013	\$20,939	\$4,872,024	\$100,734,174	4.8%	3.9%	( 2.8%) - 12.5%
Office visits - established	662	677	\$980	\$31,551	\$4,712,834	\$151,784,543	3.1%	0.6%	2.0% - 4.2%
Minor procedures - other (Medicare fee schedule)	89	154	\$928	\$8,363	\$4,465,605	\$40,231,677	11.1%	4.2%	3.0% - 19.2%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Consultations	75	79	\$821	\$8,025	\$3,950,029	\$38,607,204	10.2%	2.8%	4.8% - 15.7%
Advanced imaging - CAT: other	27	37	\$624	\$2,334	\$3,002,006	\$11,227,083	26.7%	13.4%	0.5% - 52.9%
Hospital visit - initial	31	31	\$607	\$3,482	\$2,921,569	\$16,753,333	17.4%	4.6%	8.4% - 26.5%
Minor procedures - musculoskeletal	27	31	\$492	\$2,869	\$2,368,468	\$13,800,204	17.2%	11.1%	( 4.6%) - 39.0%
Nursing home visit	46	53	\$343	\$1,782	\$1,651,991	\$8,572,900	19.3%	8.3%	3.0% - 35.5%
Office visits - new	44	44	\$258	\$2,796	\$1,241,868	\$13,451,179	9.2%	3.1%	3.1% - 15.4%
Anesthesia	38	40	\$241	\$3,716	\$1,160,950	\$17,876,277	6.5%	4.2%	( 1.7%) - 14.7%
Lab tests - other (non-Medicare fee schedule)	155	252	\$167	\$2,572	\$802,447	\$12,371,676	6.5%	2.5%	1.6% - 11.4%
Emergency room visit	49	49	\$138	\$4,055	\$662,355	\$19,507,533	3.4%	2.6%	( 1.8%) - 8.6%
Specialist - ophthalmology	64	85	\$136	\$4,421	\$655,043	\$21,268,057	3.1%	2.2%	( 1.2%) - 7.4%
Standard imaging - musculoskeletal	69	85	\$106	\$1,720	\$510,622	\$8,275,062	6.2%	4.0%	( 1.7%) - 14.1%
Other tests - other	52	72	\$98	\$2,790	\$469,200	\$13,421,448	3.5%	3.5%	( 3.4%) - 10.4%
Ambulance	47	107	\$70	\$9,468	\$335,459	\$45,547,982	0.7%	0.5%	( 0.2%) - 1.7%
Echography - heart	25	68	\$68	\$2,788	\$328,916	\$13,412,307	2.5%	1.9%	( 1.3%) - 6.2%
Ambulatory procedures - skin	25	38	\$65	\$2,871	\$314,725	\$13,813,819	2.3%	2.3%	( 2.3%) - 6.9%
Standard imaging - chest	100	112	\$64	\$1,164	\$308,711	\$5,597,546	5.5%	3.4%	( 1.1%) - 12.1%
Specialist - pathology	32	44	\$60	\$2,793	\$288,650	\$13,437,468	2.1%	2.0%	( 1.9%) - 6.2%
Other tests - electrocardiograms	77	83	\$57	\$1,099	\$272,582	\$5,288,642	5.2%	2.6%	0.1% - 10.2%
Chiropractic	25	52	\$43	\$860	\$206,288	\$4,137,362	5.0%	5.0%	( 4.8%) - 14.7%
Lab tests - blood counts	76	77	\$39	\$671	\$189,595	\$3,228,789	5.9%	2.9%	0.3% - 11.5%
Minor procedures - skin	45	50	\$35	\$3,307	\$169,822	\$15,911,582	1.1%	1.1%	( 1.1%) - 3.3%
Lab tests - routine venipuncture (non Medicare fee schedule)	167	170	\$33	\$459	\$158,757	\$2,208,171	7.2%	2.1%	3.1% - 11.3%
Lab tests - automated general profiles	59	69	\$28	\$537	\$132,538	\$2,584,571	5.1%	3.0%	( 0.8%) - 11.1%
Standard imaging - other	29	32	\$19	\$872	\$90,828	\$4,197,305	2.2%	2.3%	( 2.4%) - 6.7%
Immunizations/Vaccinations	38	67	\$18	\$543	\$85,729	\$2,613,820	3.3%	3.2%	( 3.0%) - 9.6%
Lab tests - urinalysis	74	74	\$12	\$260	\$57,538	\$1,250,335	4.6%	2.5%	( 0.2%) - 9.4%
Specialist - psychiatry	27	35	\$0	\$2,029	\$0	\$9,759,443	0.0%	0.0%	0.0% - 0.0%

**Palmetto GBA OH/WV 00883/00884**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,007	3,554	\$13,596	\$203,527	\$205,505,628	\$3,076,321,209	6.7%	0.7%	5.3% - 8.0%
Hospital visit - subsequent	116	241	\$2,786	\$13,560	\$42,113,167	\$204,961,034	20.5%	4.4%	11.9% - 29.2%
All Codes With Less Than 30 Lines	367	485	\$2,351	\$65,890	\$35,538,284	\$995,930,644	3.6%	1.0%	1.6% - 5.5%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Office visits - established	536	539	\$2,097	\$27,337	\$31,700,581	\$413,197,039	7.7%	1.0%	5.6% - 9.7%
Consultations	82	82	\$1,754	\$9,781	\$26,514,315	\$147,839,710	17.9%	3.0%	12.0% - 23.9%
Nursing home visit	79	88	\$921	\$4,709	\$13,915,039	\$71,176,932	19.5%	4.1%	11.6% - 27.5%
Minor procedures - other (Medicare fee schedule)	78	122	\$774	\$4,647	\$11,700,084	\$70,235,418	16.7%	6.4%	4.1% - 29.2%
Ambulance	49	99	\$432	\$13,575	\$6,532,107	\$205,184,434	3.2%	3.1%	( 2.9%) - 9.3%
Anesthesia	35	40	\$405	\$4,341	\$6,126,269	\$65,614,151	9.3%	5.3%	( 1.1%) - 19.7%
Emergency room visit	53	53	\$360	\$5,520	\$5,435,815	\$83,427,807	6.5%	3.7%	( 0.7%) - 13.7%
Advanced imaging - CAT: other	39	60	\$308	\$5,402	\$4,652,403	\$81,650,432	5.7%	3.3%	( 0.7%) - 12.1%
Other tests - other	37	47	\$226	\$3,744	\$3,411,007	\$56,596,682	6.0%	5.1%	( 3.9%) - 16.0%
Standard imaging - nuclear medicine	15	35	\$139	\$4,497	\$2,100,534	\$67,975,118	3.1%	3.2%	( 3.2%) - 9.4%
Specialist - ophthalmology	59	85	\$137	\$5,819	\$2,077,257	\$87,959,290	2.4%	1.8%	( 1.1%) - 5.8%
Minor procedures - skin	59	63	\$121	\$2,212	\$1,832,847	\$33,438,808	5.5%	4.8%	( 3.8%) - 14.8%
Standard imaging - other	30	43	\$120	\$1,436	\$1,815,314	\$21,700,634	8.4%	7.4%	( 6.1%) - 22.8%
Other tests - electrocardiograms	87	95	\$120	\$1,178	\$1,809,570	\$17,803,831	10.2%	3.5%	3.3% - 17.1%
Standard imaging - musculoskeletal	78	105	\$105	\$2,074	\$1,583,298	\$31,351,273	5.1%	3.2%	( 1.2%) - 11.3%
Lab tests - other (non-Medicare fee schedule)	192	393	\$100	\$3,564	\$1,518,757	\$53,875,827	2.8%	1.2%	0.4% - 5.2%
Standard imaging - chest	109	122	\$87	\$1,289	\$1,311,379	\$19,486,586	6.7%	2.7%	1.4% - 12.0%
Echography - heart	21	62	\$72	\$2,912	\$1,081,631	\$44,008,137	2.5%	2.5%	( 2.5%) - 7.4%
Specialist - pathology	35	49	\$52	\$2,530	\$785,830	\$38,244,175	2.1%	1.7%	( 1.3%) - 5.4%
Lab tests - blood counts	75	81	\$36	\$705	\$537,641	\$10,651,555	5.0%	2.5%	0.2% - 9.9%
Lab tests - routine venipuncture (non Medicare fee schedule)	174	176	\$24	\$492	\$362,760	\$7,436,590	4.9%	1.7%	1.6% - 8.2%
Other drugs	38	57	\$24	\$7,534	\$360,796	\$113,871,725	0.3%	0.2%	( 0.1%) - 0.8%
Lab tests - automated general profiles	90	96	\$24	\$922	\$356,714	\$13,929,549	2.6%	1.8%	( 1.1%) - 6.2%
Chiropractic	33	48	\$10	\$1,219	\$150,394	\$18,424,000	0.8%	0.8%	( 0.8%) - 2.4%
Immunizations/Vaccinations	48	83	\$8	\$790	\$117,293	\$11,934,820	1.0%	1.0%	( 0.9%) - 2.9%
Lab tests - urinalysis	38	38	\$4	\$141	\$64,541	\$2,126,381	3.0%	2.3%	( 1.5%) - 7.6%
Ambulatory procedures - skin	23	31	\$0	\$3,380	\$0	\$51,090,431	0.0%	0.0%	0.0% - 0.0%
Specialist - psychiatry	30	36	\$0	\$2,329	\$0	\$35,198,196	0.0%	0.0%	0.0% - 0.0%

**Trailblazer TX 00900**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,017	3,885	\$10,006	\$225,142	\$212,745,519	\$4,786,714,119	4.4%	0.5%	3.4% - 5.4%
Hospital visit - subsequent	154	346	\$2,020	\$18,788	\$42,956,973	\$399,439,443	10.8%	2.0%	6.7% - 14.8%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
All Codes With Less Than 30 Lines	375	514	\$1,349	\$76,121	\$28,678,590	\$1,618,404,213	1.8%	0.8%	0.1% - 3.4%
Consultations	79	86	\$1,344	\$8,976	\$28,583,979	\$190,831,079	15.0%	3.1%	8.9% - 21.1%
Office visits - established	551	562	\$1,195	\$27,014	\$25,409,730	\$574,340,593	4.4%	0.7%	3.0% - 5.9%
Hospital visit - initial	33	33	\$954	\$3,788	\$20,272,888	\$80,535,367	25.2%	6.7%	12.1% - 38.3%
Ambulance	45	136	\$811	\$11,274	\$17,241,512	\$239,686,032	7.2%	3.7%	( 0.1%) - 14.5%
Office visits - new	44	44	\$330	\$2,981	\$7,015,878	\$63,375,285	11.1%	3.6%	4.1% - 18.1%
Chiropractic	24	40	\$286	\$1,027	\$6,085,715	\$21,827,696	27.9%	12.2%	3.9% - 51.8%
Minor procedures - other (Medicare fee schedule)	69	105	\$258	\$4,118	\$5,486,583	\$87,553,584	6.3%	4.1%	( 1.8%) - 14.4%
Other drugs	66	90	\$243	\$14,979	\$5,162,355	\$318,458,022	1.6%	1.2%	( 0.7%) - 3.9%
Emergency room visit	42	42	\$233	\$3,805	\$4,962,502	\$80,897,865	6.1%	3.1%	0.1% - 12.2%
Nursing home visit	44	51	\$212	\$2,214	\$4,513,472	\$47,080,733	9.6%	4.1%	1.5% - 17.7%
Other tests - other	31	51	\$167	\$2,527	\$3,559,709	\$53,730,074	6.6%	6.5%	( 6.2%) - 19.5%
Specialist - pathology	32	36	\$143	\$3,090	\$3,048,598	\$65,695,272	4.6%	4.7%	( 4.5%) - 13.8%
Standard imaging - other	25	30	\$140	\$733	\$2,967,381	\$15,579,549	19.0%	15.0%	( 10.3%) - 48.4%
Lab tests - other (non-Medicare fee schedule)	222	390	\$88	\$3,755	\$1,871,808	\$79,834,609	2.3%	1.3%	( 0.2%) - 4.9%
Minor procedures - musculoskeletal	29	38	\$78	\$3,085	\$1,663,451	\$65,580,251	2.5%	2.2%	( 1.8%) - 6.9%
Standard imaging - chest	88	95	\$48	\$1,194	\$1,013,931	\$25,378,476	4.0%	3.1%	( 2.1%) - 10.1%
Specialist - ophthalmology	57	88	\$31	\$4,718	\$656,961	\$100,302,884	0.7%	0.6%	( 0.6%) - 1.9%
Other tests - electrocardiograms	83	89	\$25	\$1,078	\$539,389	\$22,912,852	2.4%	1.4%	( 0.3%) - 5.0%
Ambulatory procedures - skin	26	41	\$18	\$5,092	\$382,696	\$108,267,423	0.4%	0.4%	( 0.4%) - 1.1%
Lab tests - routine venipuncture (non Medicare fee schedule)	186	186	\$15	\$495	\$318,913	\$10,524,136	3.0%	1.3%	0.4% - 5.6%
Lab tests - blood counts	109	118	\$11	\$1,043	\$230,893	\$22,165,106	1.0%	1.0%	( 1.0%) - 3.1%
Lab tests - urinalysis	53	54	\$6	\$200	\$121,612	\$4,244,310	2.9%	2.3%	( 1.6%) - 7.3%
Advanced imaging - CAT: other	24	32	\$0	\$2,377	\$0	\$50,544,768	0.0%	0.0%	0.0% - 0.0%
Echography - heart	22	61	\$0	\$4,607	\$0	\$97,950,155	0.0%	0.0%	0.0% - 0.0%
Immunizations/Vaccinations	81	157	\$0	\$1,215	\$0	\$25,821,978	0.0%	0.0%	0.0% - 0.0%
Lab tests - automated general profiles	118	121	\$0	\$1,327	\$0	\$28,203,409	0.0%	0.0%	0.0% - 0.0%
Minor procedures - skin	27	30	\$0	\$1,893	\$0	\$40,237,068	0.0%	0.0%	0.0% - 0.0%
Specialist - psychiatry	42	56	\$0	\$2,931	\$0	\$62,325,848	0.0%	0.0%	0.0% - 0.0%
Standard imaging - musculoskeletal	65	94	\$0	\$1,490	\$0	\$31,681,902	0.0%	0.0%	0.0% - 0.0%
Standard imaging - nuclear medicine	24	69	\$0	\$7,211	\$0	\$153,304,135	0.0%	0.0%	0.0% - 0.0%

**Trailblazer MD/DC/DE/VA 00901/00902/00903/00904**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,966	5,236	\$15,999	\$306,215	\$164,682,989	\$3,200,129,903	5.1%	1.4%	2.5% - 7.8%
Consultations	148	169	\$2,712	\$16,693	\$27,847,406	\$172,418,394	16.2%	7.4%	1.7% - 30.6%
Hospital visit - subsequent	186	359	\$2,583	\$20,320	\$27,068,312	\$219,378,253	12.3%	8.5%	( 4.3%) - 29.0%
Office visits - established	884	898	\$2,564	\$45,962	\$26,012,955	\$483,160,260	5.4%	1.9%	1.6% - 9.2%
Hospital visit - initial	44	44	\$1,321	\$4,994	\$13,804,278	\$55,597,493	24.8%	16.1%	( 6.8%) - 56.5%
Minor procedures - other (Medicare fee schedule)	142	266	\$1,370	\$9,362	\$13,229,087	\$100,147,553	13.2%	13.3%	( 12.9%) - 39.3%
No Service Code	47	54	\$902	\$7,867	\$8,872,499	\$86,277,976	10.3%	23.7%	( 36.2%) - 56.8%
All Codes With Less Than 30 Lines	380	496	\$910	\$82,070	\$8,682,161	\$847,737,793	1.0%	1.1%	( 1.2%) - 3.2%
Ambulance	39	76	\$719	\$7,563	\$7,520,963	\$85,083,590	8.8%	62.0%	( 112.7%) - 130.3%
Nursing home visit	75	87	\$619	\$4,154	\$7,317,315	\$43,613,111	16.8%	12.4%	( 7.5%) - 41.1%
Office visits - new	52	52	\$707	\$3,844	\$7,120,510	\$39,805,927	17.9%	13.0%	( 7.5%) - 43.3%
Emergency room visit	88	88	\$256	\$7,745	\$3,132,108	\$84,357,323	3.7%	3.9%	( 4.0%) - 11.5%
Chiropractic	34	39	\$117	\$1,038	\$1,254,803	\$11,689,840	10.7%	20.0%	( 28.5%) - 50.0%
Other tests - other	49	78	\$104	\$3,861	\$1,215,633	\$41,913,681	2.9%	4.5%	( 6.0%) - 11.8%
Anesthesia	58	60	\$123	\$7,572	\$1,136,461	\$77,932,877	1.5%	3.8%	( 6.0%) - 8.9%
Advanced imaging - CAT: other	48	74	\$120	\$8,268	\$1,112,482	\$81,967,461	1.4%	3.9%	( 6.2%) - 9.0%
Ambulatory procedures - skin	59	87	\$105	\$6,559	\$1,054,518	\$67,450,387	1.6%	5.1%	( 8.5%) - 11.7%
Other tests - electrocardiograms	147	154	\$98	\$2,075	\$1,041,383	\$21,300,433	4.9%	5.8%	( 6.4%) - 16.2%
Standard imaging - musculoskeletal	98	123	\$109	\$3,357	\$1,034,819	\$33,544,493	3.1%	5.1%	( 6.9%) - 13.1%
Lab tests - other (non-Medicare fee schedule)	294	517	\$91	\$5,427	\$899,556	\$55,180,639	1.6%	2.1%	( 2.4%) - 5.7%
Minor procedures - musculoskeletal	31	32	\$64	\$2,133	\$842,264	\$22,744,302	3.7%	8.6%	( 13.1%) - 20.5%
Specialist - pathology	49	55	\$60	\$4,453	\$782,392	\$46,567,525	1.7%	4.3%	( 6.8%) - 10.2%
Lab tests - automated general profiles	127	137	\$68	\$1,353	\$776,913	\$13,862,016	5.6%	7.8%	( 9.7%) - 20.9%
Lab tests - blood counts	117	125	\$63	\$1,087	\$622,921	\$11,338,579	5.5%	6.7%	( 7.7%) - 18.7%
Ambulatory procedures - other	28	31	\$65	\$2,409	\$597,163	\$23,033,459	2.6%	5.3%	( 7.8%) - 13.0%
Specialist - ophthalmology	86	147	\$41	\$9,615	\$533,229	\$100,910,238	0.5%	1.3%	( 2.1%) - 3.2%
Other drugs	61	87	\$33	\$9,082	\$375,857	\$95,376,390	0.4%	0.7%	( 1.0%) - 1.8%
Minor procedures - skin	53	60	\$26	\$5,868	\$242,290	\$62,610,080	0.4%	1.8%	( 3.2%) - 4.0%
Standard imaging - chest	119	126	\$18	\$1,557	\$235,829	\$16,352,513	1.4%	2.5%	( 3.5%) - 6.4%
Lab tests - urinalysis	75	76	\$13	\$273	\$142,085	\$3,021,405	4.7%	7.2%	( 9.5%) - 18.9%
Lab tests - routine venipuncture (non Medicare fee schedule)	223	223	\$12	\$573	\$111,379	\$6,129,990	1.8%	3.2%	( 4.4%) - 8.0%
Standard imaging - other	43	51	\$7	\$1,687	\$63,420	\$17,094,380	0.4%	1.3%	( 2.1%) - 2.8%
Echography - heart	31	94	\$0	\$5,160	\$0	\$51,309,238	0.0%	0.0%	0.0% - 0.0%
Immunizations/Vaccinations	51	97	\$0	\$861	\$0	\$9,341,533	0.0%	0.0%	0.0% - 0.0%
Specialist - psychiatry	63	99	\$0	\$4,380	\$0	\$43,700,029	0.0%	0.0%	0.0% - 0.0%
Standard imaging - breast	35	35	\$0	\$1,618	\$0	\$17,644,513	0.0%	0.0%	0.0% - 0.0%
Standard imaging - nuclear	18	40	\$0	\$5,374	\$0	\$50,536,231	0.0%	0.0%	0.0% - 0.0%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
medicine									

**BCBS UT 00910**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,049	3,599	\$13,989	\$197,127	\$22,307,606	\$314,340,235	7.1%	0.8%	5.5% - 8.7%
Minor procedures - other (Medicare fee schedule)	138	300	\$2,395	\$7,513	\$3,819,795	\$11,980,457	31.9%	6.6%	19.0% - 44.7%
All Codes With Less Than 30 Lines	364	487	\$2,297	\$66,119	\$3,662,056	\$105,433,396	3.5%	1.3%	0.9% - 6.0%
Hospital visit - subsequent	56	106	\$1,850	\$5,547	\$2,949,409	\$8,844,830	33.3%	8.0%	17.6% - 49.1%
Office visits - established	574	582	\$1,676	\$27,160	\$2,672,552	\$43,309,385	6.2%	1.1%	4.1% - 8.3%
Other drugs	67	72	\$1,357	\$7,577	\$2,163,696	\$12,082,959	17.9%	9.5%	( 0.8%) - 36.6%
Consultations	53	53	\$916	\$6,217	\$1,460,345	\$9,912,964	14.7%	3.9%	7.2% - 22.3%
Hospital visit - initial	30	31	\$497	\$2,737	\$792,490	\$4,364,578	18.2%	7.3%	3.8% - 32.5%
Office visits - new	51	51	\$493	\$3,605	\$785,537	\$5,749,131	13.7%	4.6%	4.6% - 22.8%
Anesthesia	27	33	\$346	\$5,748	\$552,341	\$9,166,224	6.0%	4.6%	( 3.1%) - 15.1%
Chiropractic	44	73	\$274	\$1,485	\$436,748	\$2,368,093	18.4%	7.3%	4.2% - 32.7%
Standard imaging - musculoskeletal	85	108	\$247	\$2,462	\$394,571	\$3,926,602	10.0%	3.9%	2.4% - 17.7%
Emergency room visit	66	66	\$239	\$5,675	\$381,718	\$9,049,690	4.2%	1.8%	0.7% - 7.7%
Ambulance	16	33	\$217	\$7,566	\$346,509	\$12,064,366	2.9%	2.9%	( 2.8%) - 8.5%
Advanced imaging - CAT: other	36	50	\$182	\$3,120	\$290,618	\$4,974,964	5.8%	4.5%	( 2.9%) - 14.6%
Standard imaging - other	29	32	\$168	\$1,042	\$268,612	\$1,661,872	16.2%	13.2%	( 9.8%) - 42.1%
Lab tests - other (non-Medicare fee schedule)	223	292	\$164	\$2,541	\$261,038	\$4,051,843	6.4%	2.0%	2.5% - 10.4%
Other tests - electrocardiograms	50	50	\$119	\$641	\$188,977	\$1,021,604	18.5%	6.1%	6.5% - 30.4%
Minor procedures - musculoskeletal	37	45	\$97	\$4,004	\$155,379	\$6,384,855	2.4%	1.8%	( 1.2%) - 6.0%
Lab tests - automated general profiles	86	88	\$94	\$936	\$150,149	\$1,493,034	10.1%	3.5%	3.2% - 17.0%
Ambulatory procedures - other	40	54	\$76	\$6,025	\$120,887	\$9,607,788	1.3%	0.6%	( 0.0%) - 2.5%
Minor procedures - skin	63	69	\$65	\$4,108	\$104,048	\$6,549,977	1.6%	1.0%	( 0.4%) - 3.6%
Other tests - other	28	40	\$50	\$2,006	\$79,507	\$3,198,136	2.5%	2.6%	( 2.6%) - 7.5%
Ambulatory procedures - skin	51	78	\$49	\$4,998	\$77,418	\$7,970,377	1.0%	0.7%	( 0.4%) - 2.4%
Standard imaging - chest	90	94	\$35	\$943	\$56,035	\$1,504,053	3.7%	2.9%	( 1.9%) - 9.3%
Lab tests - urinalysis	52	53	\$24	\$181	\$37,585	\$288,401	13.0%	5.9%	1.6% - 24.5%
Lab tests - blood counts	66	67	\$22	\$426	\$35,353	\$679,894	5.2%	2.9%	( 0.5%) - 10.9%
Lab tests - routine venipuncture (non Medicare fee schedule)	174	174	\$18	\$459	\$28,703	\$731,927	3.9%	1.6%	0.8% - 7.0%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Specialist - pathology	57	92	\$12	\$5,153	\$19,087	\$8,216,776	0.2%	0.2%	( 0.2%) - 0.7%
Immunizations/Vaccinations	65	131	\$10	\$864	\$16,440	\$1,377,680	1.2%	1.2%	( 1.1%) - 3.5%
Echography - heart	12	36	\$0	\$2,386	\$0	\$3,804,822	0.0%	0.0%	0.0% - 0.0%
Specialist - ophthalmology	70	103	\$0	\$5,847	\$0	\$9,322,894	0.0%	0.0%	0.0% - 0.0%
Specialist - psychiatry	32	56	\$0	\$2,036	\$0	\$3,246,660	0.0%	0.0%	0.0% - 0.0%

**Triple S, INC. PRVI 00973/00974**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,994	5,815	\$51,453	\$278,316	\$96,273,363	\$612,969,614	15.7%	3.7%	8.5% - 22.9%
Office visits - established	1,090	1,121	\$9,605	\$51,618	\$18,224,061	\$126,342,317	14.4%	2.4%	9.8% - 19.1%
Ambulance	62	181	\$4,201	\$17,486	\$10,467,283	\$44,186,381	23.7%	11.4%	1.4% - 46.0%
Hospital visit - subsequent	83	187	\$5,972	\$15,032	\$9,824,184	\$30,743,575	32.0%	12.4%	7.6% - 56.3%
Consultations	117	138	\$4,855	\$13,079	\$8,929,124	\$24,317,789	36.7%	6.7%	23.6% - 49.8%
All Codes With Less Than 30 Lines	411	515	\$6,153	\$74,882	\$7,501,723	\$144,990,552	5.2%	6.2%	( 7.0%) - 17.4%
Office visits - new	137	137	\$4,145	\$12,298	\$7,002,257	\$23,074,643	30.3%	5.6%	19.3% - 41.3%
Minor procedures - other (Medicare fee schedule)	167	506	\$2,280	\$12,346	\$6,341,338	\$21,362,260	29.7%	7.4%	15.1% - 44.3%
Emergency room visit	92	92	\$2,044	\$5,368	\$5,417,623	\$15,259,762	35.5%	12.9%	10.2% - 60.8%
Specialist - psychiatry	53	82	\$5,447	\$8,879	\$4,867,051	\$12,503,528	38.9%	23.5%	( 7.2%) - 85.0%
Hospital visit - initial	34	34	\$1,613	\$3,613	\$3,900,405	\$7,351,129	53.1%	13.6%	26.4% - 79.7%
Echography - heart	29	80	\$584	\$4,288	\$1,909,534	\$10,247,918	18.6%	11.7%	( 4.4%) - 41.6%
Lab tests - automated general profiles	211	217	\$529	\$1,875	\$1,863,716	\$4,941,102	37.7%	11.3%	15.7% - 59.8%
Lab tests - other (non-Medicare fee schedule)	364	729	\$486	\$7,692	\$1,712,738	\$21,813,089	7.9%	2.1%	3.8% - 11.9%
Minor procedures - musculoskeletal	38	50	\$509	\$2,070	\$1,648,961	\$6,954,310	23.7%	28.0%	( 31.1%) - 78.5%
Other drugs	70	111	\$345	\$5,959	\$1,260,444	\$22,040,986	5.7%	19.2%	( 31.9%) - 43.3%
Home visit	34	34	\$303	\$2,251	\$1,126,567	\$8,365,637	13.5%	5.6%	2.6% - 24.4%
Other tests - other	40	76	\$239	\$3,894	\$889,017	\$8,257,716	10.8%	5.3%	0.3% - 21.2%
Oncology - other	29	40	\$159	\$2,722	\$589,506	\$9,455,522	6.2%	3.5%	( 0.6%) - 13.1%
Other tests - electrocardiograms	120	120	\$182	\$1,706	\$452,534	\$4,187,251	10.8%	7.4%	( 3.6%) - 25.2%
No Service Code	29	33	\$145	\$4,356	\$335,806	\$6,487,234	5.2%	5.2%	( 5.0%) - 15.4%
Echography - other	26	30	\$146	\$2,515	\$280,458	\$7,515,246	3.7%	14.8%	( 25.3%) - 32.7%
Lab tests - blood counts	202	216	\$85	\$1,830	\$275,663	\$4,643,206	5.9%	2.9%	0.3% - 11.5%
Standard imaging - chest	101	106	\$266	\$1,142	\$230,599	\$2,494,388	9.2%	12.0%	( 14.3%) - 32.8%
Lab tests - bacterial cultures	35	41	\$80	\$363	\$210,918	\$970,921	21.7%	17.7%	( 13.0%) - 56.4%
Advanced imaging - CAT: other	21	32	\$194	\$4,388	\$210,292	\$8,725,212	2.4%	7.0%	( 11.3%) - 16.1%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Specialist - ophthalmology	104	134	\$411	\$7,418	\$208,817	\$13,334,987	1.6%	3.2%	( 4.6%) - 7.8%
Lab tests - routine venipuncture (non Medicare fee schedule)	334	338	\$60	\$873	\$200,969	\$2,340,963	8.6%	2.8%	3.1% - 14.0%
Specialist - pathology	37	44	\$92	\$2,735	\$163,659	\$8,404,670	1.9%	8.4%	( 14.4%) - 18.3%
Lab tests - urinalysis	168	169	\$44	\$628	\$130,729	\$1,762,726	7.4%	4.7%	( 1.7%) - 16.6%
Lab tests - glucose	75	76	\$18	\$336	\$58,424	\$1,028,334	5.7%	5.3%	( 4.7%) - 16.1%
Standard imaging - musculoskeletal	86	113	\$202	\$2,777	\$36,497	\$4,533,655	0.8%	4.9%	( 8.8%) - 10.4%
Minor procedures - skin	29	33	\$58	\$1,899	\$2,465	\$4,332,608	0.1%	7.8%	( 15.1%) - 15.3%

### GHI NY 14330

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,005	3,643	\$20,106	\$189,076	\$35,950,914	\$338,084,959	10.6%	1.0%	8.8% - 12.5%
Minor procedures - other (Medicare fee schedule)	201	626	\$4,943	\$17,044	\$8,839,147	\$30,477,021	29.0%	5.0%	19.2% - 38.8%
Consultations	84	103	\$3,723	\$11,327	\$6,657,179	\$20,253,893	32.9%	5.6%	21.9% - 43.9%
All Codes With Less Than 30 Lines	359	477	\$2,625	\$55,912	\$4,693,661	\$99,975,854	4.7%	1.6%	1.5% - 7.9%
Office visits - established	486	495	\$2,503	\$26,780	\$4,475,782	\$47,885,278	9.3%	1.2%	7.0% - 11.6%
Hospital visit - subsequent	109	183	\$1,543	\$10,523	\$2,759,199	\$18,816,520	14.7%	3.2%	8.4% - 20.9%
Nursing home visit	128	138	\$841	\$7,181	\$1,504,033	\$12,841,086	11.7%	2.4%	7.0% - 16.4%
Office visits - new	37	37	\$749	\$3,969	\$1,338,903	\$7,096,190	18.9%	4.5%	10.0% - 27.7%
Emergency room visit	32	32	\$408	\$3,066	\$730,291	\$5,482,118	13.3%	5.5%	2.4% - 24.2%
Hospital visit - initial	32	32	\$353	\$2,850	\$630,301	\$5,095,963	12.4%	5.5%	1.6% - 23.1%
Home visit	31	31	\$289	\$2,516	\$516,919	\$4,498,348	11.5%	5.1%	1.5% - 21.5%
Ambulatory procedures - other	54	65	\$273	\$1,619	\$488,667	\$2,894,200	16.9%	11.6%	( 5.9%) - 39.7%
Specialist - ophthalmology	87	154	\$273	\$10,090	\$487,540	\$18,041,026	2.7%	1.7%	( 0.7%) - 6.1%
Standard imaging - musculoskeletal	53	77	\$223	\$2,985	\$398,350	\$5,337,909	7.5%	5.6%	( 3.5%) - 18.4%
Minor procedures - skin	73	81	\$213	\$3,367	\$381,238	\$6,021,120	6.3%	4.9%	( 3.2%) - 15.9%
Specialist - psychiatry	88	123	\$167	\$5,994	\$298,110	\$10,717,659	2.8%	1.3%	0.2% - 5.4%
Echography - heart	17	48	\$166	\$2,554	\$296,429	\$4,566,778	6.5%	4.6%	( 2.6%) - 15.5%
Standard imaging - other	23	35	\$153	\$1,229	\$274,007	\$2,198,044	12.5%	10.9%	( 9.0%) - 33.9%
Other tests - electrocardiograms	111	119	\$144	\$1,470	\$257,628	\$2,628,276	9.8%	3.6%	2.8% - 16.8%
Lab tests - other (non-Medicare fee schedule)	58	135	\$122	\$1,112	\$218,254	\$1,988,408	11.0%	6.0%	( 0.9%) - 22.8%
Ambulatory procedures - skin	40	58	\$118	\$3,081	\$211,102	\$5,508,886	3.8%	2.5%	( 1.1%) - 8.8%
Standard imaging - chest	101	126	\$89	\$1,301	\$158,532	\$2,326,553	6.8%	2.6%	1.7% - 12.0%
Chiropractic	23	39	\$78	\$1,337	\$139,972	\$2,391,229	5.9%	3.9%	( 1.8%) - 13.5%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Other tests - other	135	171	\$64	\$6,457	\$114,742	\$11,545,455	1.0%	0.9%	( 0.7%) - 2.7%
Lab tests - blood counts	31	32	\$22	\$244	\$38,837	\$436,758	8.9%	6.0%	( 2.9%) - 20.7%
Lab tests - routine venipuncture (non Medicare fee schedule)	106	106	\$12	\$578	\$21,457	\$1,033,158	2.1%	1.5%	( 0.9%) - 5.0%
Lab tests - urinalysis	35	35	\$12	\$95	\$20,635	\$169,636	12.2%	6.6%	( 0.8%) - 25.1%
Advanced imaging - CAT: other	22	32	\$0	\$4,176	\$0	\$7,466,861	0.0%	0.0%	0.0% - 0.0%
Immunizations/Vaccinations	25	53	\$0	\$219	\$0	\$390,733	0.0%	0.0%	0.0% - 0.0%

**NHIC CA 31140/31146**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,067	4,185	\$14,144	\$264,781	\$339,261,900	\$6,229,942,045	5.4%	1.2%	3.1% - 7.8%
Minor procedures - other (Medicare fee schedule)	158	386	\$2,674	\$13,103	\$63,060,464	\$315,177,197	20.0%	10.4%	( 0.4%) - 40.4%
Office visits - established	584	603	\$2,461	\$34,316	\$58,152,857	\$803,634,226	7.2%	1.6%	4.1% - 10.4%
All Codes With Less Than 30 Lines	390	551	\$2,300	\$100,216	\$55,731,822	\$2,355,119,526	2.4%	1.6%	( 0.7%) - 5.4%
Hospital visit - subsequent	87	206	\$1,528	\$12,084	\$36,827,424	\$289,436,884	12.7%	5.6%	1.7% - 23.8%
Consultations	67	67	\$1,364	\$8,949	\$32,266,555	\$211,862,262	15.2%	6.9%	1.7% - 28.7%
Other tests - other	50	87	\$866	\$5,553	\$21,925,899	\$140,558,599	15.6%	16.6%	( 17.0%) - 48.2%
Office visits - new	52	53	\$683	\$4,350	\$16,500,628	\$104,640,532	15.8%	7.8%	0.5% - 31.1%
Lab tests - other (non-Medicare fee schedule)	297	652	\$465	\$7,475	\$11,823,913	\$178,021,324	6.6%	7.4%	( 7.9%) - 21.2%
Nursing home visit	55	63	\$416	\$3,101	\$10,230,343	\$73,867,020	13.8%	5.5%	3.2% - 24.5%
Ambulatory procedures - skin	30	41	\$245	\$4,740	\$5,895,958	\$110,992,259	5.3%	6.6%	( 7.6%) - 18.2%
Standard imaging - musculoskeletal	64	87	\$221	\$2,509	\$5,635,357	\$60,459,293	9.3%	8.2%	( 6.8%) - 25.4%
Ambulatory procedures - other	41	54	\$172	\$1,344	\$4,069,313	\$32,666,964	12.5%	17.5%	( 21.9%) - 46.8%
Other drugs	65	87	\$163	\$10,279	\$3,529,084	\$239,312,182	1.5%	2.4%	( 3.3%) - 6.2%
Ambulance	30	97	\$128	\$11,887	\$2,987,992	\$265,433,713	1.1%	1.6%	( 2.1%) - 4.3%
Emergency room visit	33	33	\$82	\$3,154	\$1,993,254	\$73,372,447	2.7%	4.0%	( 5.1%) - 10.5%
Minor procedures - musculoskeletal	28	32	\$77	\$2,570	\$1,635,340	\$60,146,607	2.7%	6.0%	( 9.0%) - 14.5%
Other tests - electrocardiograms	94	108	\$63	\$1,622	\$1,485,372	\$39,432,440	3.8%	4.5%	( 5.1%) - 12.7%
Specialist - pathology	43	50	\$66	\$2,852	\$1,415,087	\$66,851,555	2.1%	4.7%	( 7.2%) - 11.4%
Lab tests - automated general profiles	86	92	\$56	\$939	\$1,375,252	\$22,365,802	6.1%	6.3%	( 6.2%) - 18.5%
Lab tests - blood counts	92	98	\$43	\$858	\$1,062,546	\$20,134,368	5.3%	4.9%	( 4.2%) - 14.8%
Specialist - ophthalmology	64	92	\$30	\$6,565	\$773,440	\$152,986,168	0.5%	1.0%	( 1.4%) - 2.4%
Chiropractic	24	43	\$22	\$1,123	\$475,968	\$26,526,373	1.8%	3.8%	( 5.6%) - 9.2%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Standard imaging - chest	84	90	\$11	\$1,304	\$236,916	\$30,653,793	0.8%	1.8%	( 2.7%) - 4.2%
Lab tests - urinalysis	57	59	\$4	\$207	\$94,638	\$4,911,270	1.9%	4.9%	( 7.7%) - 11.6%
Lab tests - routine venipuncture (non Medicare fee schedule)	132	132	\$3	\$363	\$76,477	\$8,696,283	0.9%	1.3%	( 1.7%) - 3.4%
Advanced imaging - CAT: other	25	41	\$0	\$5,099	\$0	\$115,451,291	0.0%	0.0%	0.0% - 0.0%
Echography - heart	34	95	\$0	\$6,592	\$0	\$152,949,001	0.0%	0.0%	0.0% - 0.0%
Immunizations/Vaccinations	24	46	\$0	\$318	\$0	\$7,189,043	0.0%	0.0%	0.0% - 0.0%
Minor procedures - skin	45	67	\$0	\$5,113	\$0	\$120,395,788	0.0%	0.0%	0.0% - 0.0%
Specialist - psychiatry	35	42	\$0	\$2,309	\$0	\$54,324,509	0.0%	0.0%	0.0% - 0.0%
Standard imaging - nuclear medicine	13	31	\$0	\$3,889	\$0	\$92,373,328	0.0%	0.0%	0.0% - 0.0%

**NHIC MA/ME/NH/VT 31142/31143/31144/31145**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,057	3,374	\$8,195	\$186,319	\$91,842,130	\$2,088,030,925	4.4%	0.4%	3.5% - 5.3%
Consultations	81	84	\$1,909	\$10,043	\$21,394,387	\$112,555,034	19.0%	3.4%	12.3% - 25.7%
Minor procedures - other (Medicare fee schedule)	72	151	\$1,113	\$6,828	\$12,471,897	\$76,520,353	16.3%	5.5%	5.6% - 27.0%
Office visits - established	542	551	\$1,104	\$28,602	\$12,368,010	\$320,537,914	3.9%	0.7%	2.5% - 5.2%
Hospital visit - subsequent	102	172	\$950	\$10,865	\$10,641,496	\$121,758,814	8.7%	1.9%	5.0% - 12.5%
All Codes With Less Than 30 Lines	311	393	\$928	\$49,303	\$10,396,964	\$552,527,815	1.9%	0.5%	0.8% - 2.9%
Nursing home visit	69	76	\$496	\$3,869	\$5,553,176	\$43,357,293	12.8%	4.3%	4.3% - 21.3%
Hospital visit - initial	29	30	\$438	\$3,461	\$4,909,684	\$38,789,304	12.7%	4.3%	4.1% - 21.2%
Emergency room visit	63	63	\$304	\$5,093	\$3,412,236	\$57,080,314	6.0%	3.5%	( 0.9%) - 12.9%
Advanced imaging - CAT: other	26	41	\$171	\$2,951	\$1,911,874	\$33,066,345	5.8%	4.2%	( 2.5%) - 14.0%
Standard imaging - musculoskeletal	63	82	\$105	\$2,157	\$1,181,193	\$24,169,518	4.9%	2.4%	0.1% - 9.6%
Echography - heart	18	47	\$104	\$3,234	\$1,167,969	\$36,247,497	3.2%	3.3%	( 3.2%) - 9.7%
Ambulance	45	124	\$98	\$17,255	\$1,094,453	\$193,372,957	0.6%	0.4%	( 0.3%) - 1.4%
Chiropractic	33	48	\$84	\$1,539	\$938,791	\$17,245,306	5.4%	3.0%	( 0.5%) - 11.4%
Ambulatory procedures - skin	41	58	\$77	\$3,735	\$862,361	\$41,862,087	2.1%	1.7%	( 1.3%) - 5.4%
Other tests - electrocardiograms	108	125	\$73	\$1,565	\$812,603	\$17,533,320	4.6%	1.7%	1.4% - 7.9%
Standard imaging - nuclear medicine	19	40	\$55	\$3,418	\$613,234	\$38,306,628	1.6%	1.7%	( 1.7%) - 4.9%
Lab tests - other (non-Medicare fee schedule)	204	353	\$40	\$3,387	\$452,193	\$37,957,650	1.2%	0.7%	( 0.2%) - 2.6%
Other tests - cardiovascular stress tests	18	32	\$34	\$1,159	\$379,349	\$12,988,529	2.9%	3.0%	( 3.0%) - 8.8%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Specialist - ophthalmology	67	94	\$34	\$5,782	\$377,220	\$64,795,275	0.6%	0.6%	( 0.5%) - 1.7%
Standard imaging - chest	71	72	\$24	\$936	\$272,885	\$10,483,929	2.6%	1.6%	( 0.6%) - 5.8%
Lab tests - urinalysis	42	42	\$13	\$158	\$148,938	\$1,765,066	8.4%	4.4%	( 0.2%) - 17.1%
Lab tests - routine venipuncture (non Medicare fee schedule)	151	151	\$12	\$429	\$134,481	\$4,807,702	2.8%	1.4%	0.1% - 5.5%
Lab tests - automated general profiles	68	72	\$12	\$624	\$132,576	\$6,997,728	1.9%	1.9%	( 1.8%) - 5.6%
Lab tests - blood counts	62	73	\$11	\$536	\$121,705	\$6,002,792	2.0%	2.0%	( 1.9%) - 6.0%
Other - non-Medicare fee schedule	31	31	\$8	\$153	\$92,456	\$1,717,213	5.4%	5.2%	( 4.9%) - 15.7%
Anesthesia	25	32	\$0	\$3,912	\$0	\$43,842,658	0.0%	0.0%	0.0% - 0.0%
Immunizations/Vaccinations	23	41	\$0	\$393	\$0	\$4,405,379	0.0%	0.0%	0.0% - 0.0%
Minor procedures - skin	45	49	\$0	\$3,015	\$0	\$33,788,061	0.0%	0.0%	0.0% - 0.0%
Other tests - other	31	47	\$0	\$2,600	\$0	\$29,136,805	0.0%	0.0%	0.0% - 0.0%
Specialist - pathology	27	42	\$0	\$2,821	\$0	\$31,611,707	0.0%	0.0%	0.0% - 0.0%
Specialist - psychiatry	97	125	\$0	\$5,220	\$0	\$58,502,676	0.0%	0.0%	0.0% - 0.0%
Standard imaging - breast	33	33	\$0	\$1,276	\$0	\$14,297,255	0.0%	0.0%	0.0% - 0.0%

**WPS WI/IL/MI/MN 00951/00952/00953/00954**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	4,053	7,119	\$16,631	\$396,427	\$369,199,174	\$7,196,982,192	5.1%	1.5%	2.1% - 8.1%
Hospital visit - subsequent	196	411	\$2,769	\$23,646	\$59,890,729	\$477,743,705	12.5%	8.2%	( 3.5%) - 28.6%
Office visits - established	1,022	1,035	\$2,327	\$53,200	\$57,531,502	\$996,891,864	5.8%	2.2%	1.5% - 10.0%
Consultations	169	177	\$1,958	\$19,888	\$47,744,443	\$386,912,031	12.3%	7.1%	( 1.6%) - 26.3%
Ambulance	52	142	\$1,139	\$15,662	\$30,303,686	\$317,185,544	9.6%	10.5%	( 11.0%) - 30.1%
Minor procedures - other (Medicare fee schedule)	184	300	\$1,077	\$10,283	\$21,834,252	\$206,490,864	10.6%	14.2%	( 17.2%) - 38.3%
Hospital visit - initial	57	57	\$1,020	\$6,915	\$18,433,502	\$125,653,311	14.7%	15.6%	( 15.9%) - 45.2%
All Codes With Less Than 30 Lines	426	549	\$948	\$96,050	\$16,281,475	\$1,534,955,241	1.1%	1.7%	( 2.3%) - 4.4%
Nursing home visit	101	113	\$637	\$5,940	\$15,691,412	\$119,706,556	13.1%	9.1%	( 4.8%) - 31.0%
Office visits - new	63	64	\$513	\$3,674	\$11,589,669	\$74,577,962	15.5%	20.5%	( 24.6%) - 55.7%
Other tests - other	92	122	\$457	\$7,183	\$10,509,081	\$147,366,550	7.1%	13.8%	( 19.9%) - 34.2%
No Service Code	61	65	\$362	\$9,199	\$9,897,493	\$191,267,645	5.2%	10.7%	( 15.9%) - 26.2%
Minor procedures - skin	94	108	\$321	\$8,979	\$8,155,567	\$198,203,284	4.1%	10.1%	( 15.8%) - 24.0%
Emergency room visit	87	88	\$332	\$8,333	\$8,145,486	\$165,597,708	4.9%	6.2%	( 7.2%) - 17.0%
Minor procedures - musculoskeletal	46	51	\$295	\$4,373	\$7,875,020	\$83,490,658	9.4%	17.7%	( 25.3%) - 44.2%
Chiropractic	139	184	\$409	\$4,743	\$6,336,594	\$81,265,410	7.8%	9.1%	( 10.1%) - 25.7%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Specialist - ophthalmology	134	213	\$260	\$11,922	\$6,070,705	\$223,226,980	2.7%	5.1%	( 7.3%) - 12.7%
Specialist - psychiatry	85	125	\$239	\$6,123	\$4,406,581	\$121,109,787	3.6%	8.5%	( 13.0%) - 20.3%
Other tests - electrocardiograms	131	143	\$180	\$1,878	\$4,327,278	\$38,732,396	11.2%	10.4%	( 9.3%) - 31.6%
Advanced imaging - CAT: other	47	65	\$377	\$7,439	\$3,997,304	\$101,972,567	3.9%	11.5%	( 18.6%) - 26.5%
Anesthesia	64	67	\$175	\$7,809	\$3,990,590	\$149,712,228	2.7%	4.2%	( 5.6%) - 11.0%
Standard imaging - breast	53	53	\$107	\$2,725	\$2,940,301	\$47,165,339	6.2%	12.3%	( 17.8%) - 30.3%
Other drugs	115	165	\$134	\$16,642	\$2,461,673	\$283,402,291	0.9%	1.8%	( 2.7%) - 4.4%
Lab tests - other (non-Medicare fee schedule)	422	800	\$119	\$7,536	\$2,321,749	\$133,921,134	1.7%	2.7%	( 3.5%) - 7.0%
Standard imaging - musculoskeletal	150	205	\$82	\$4,552	\$1,917,733	\$82,050,554	2.3%	4.9%	( 7.2%) - 11.9%
Ambulatory procedures - skin	57	90	\$98	\$4,775	\$1,141,689	\$103,686,023	1.1%	5.1%	( 8.8%) - 11.0%
Specialist - pathology	69	105	\$29	\$5,180	\$789,477	\$85,573,024	0.9%	2.2%	( 3.3%) - 5.2%
Lab tests - blood counts	156	169	\$40	\$1,425	\$767,558	\$23,272,113	3.3%	5.8%	( 8.0%) - 14.6%
Lab tests - urinalysis	98	98	\$25	\$353	\$600,162	\$6,304,341	9.5%	11.6%	( 13.2%) - 32.2%
Standard imaging - chest	178	195	\$20	\$2,324	\$535,872	\$41,387,958	1.3%	2.6%	( 3.8%) - 6.4%
Standard imaging - other	37	49	\$20	\$1,850	\$527,332	\$29,473,779	1.8%	6.4%	( 10.7%) - 14.3%
Lab tests - glucose	35	38	\$25	\$116	\$524,767	\$1,940,807	27.0%	40.2%	( 51.7%) -105.8%
Lab tests - routine venipuncture (non Medicare fee schedule)	394	395	\$30	\$1,122	\$491,570	\$17,729,698	2.8%	3.2%	( 3.5%) - 9.1%
Other tests - cardiovascular stress tests	35	54	\$61	\$2,236	\$453,753	\$39,549,665	1.1%	8.9%	( 16.3%) - 18.6%
Lab tests - automated general profiles	128	132	\$15	\$1,274	\$394,165	\$23,472,864	1.7%	4.0%	( 6.2%) - 9.6%
Other - non-Medicare fee schedule	36	37	\$17	\$212	\$203,777	\$5,079,578	4.0%	73.6%	( 140.2%) -148.2%
Immunizations/Vaccinations	103	200	\$16	\$1,697	\$115,229	\$28,138,022	0.4%	2.3%	( 4.0%) - 4.9%
Echography - heart	32	85	\$0	\$4,898	\$0	\$104,289,725	0.0%	0.0%	0.0% - 0.0%
Lab tests - other (Medicare fee schedule)	25	33	\$0	\$1,236	\$0	\$13,417,644	0.0%	0.0%	0.0% - 0.0%
Oncology - radiation therapy	15	51	\$0	\$13,932	\$0	\$199,486,424	0.0%	0.0%	0.0% - 0.0%
Standard imaging - nuclear medicine	34	86	\$0	\$9,106	\$0	\$185,578,921	0.0%	0.0%	0.0% - 0.0%

# DMERC

## AdminaStar - Region B 00635

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,100	3,706	\$18,470	\$329,255	\$110,259,808	\$1,965,552,597	5.6%	0.7%	4.3% - 6.9%
Glucose Monitor	449	724	\$6,628	\$44,353	\$39,564,404	\$264,774,657	14.9%	2.0%	11.1% - 18.8%
Oxygen Supplies/Equipment	409	677	\$2,620	\$80,579	\$15,638,958	\$481,031,546	3.3%	1.1%	1.2% - 5.3%
Nebulizers & Related Drugs	390	791	\$1,713	\$43,066	\$10,224,315	\$257,092,601	4.0%	1.3%	1.5% - 6.5%
Diabetic Shoes	21	42	\$1,395	\$4,856	\$8,327,740	\$28,990,324	28.7%	11.9%	5.4% - 52.1%
CPAP	86	151	\$1,368	\$10,444	\$8,166,975	\$62,349,457	13.1%	6.6%	0.1% - 26.1%
All Codes With Less Than 30 Lines	207	250	\$1,278	\$58,742	\$7,631,970	\$350,672,156	2.2%	1.1%	0.1% - 4.3%
Immunosuppressive Drugs	29	39	\$1,208	\$12,255	\$7,212,778	\$73,160,475	9.9%	5.7%	( 1.4%) - 21.1%
Ostomy Supplies	65	115	\$734	\$5,354	\$4,381,704	\$31,959,417	13.7%	5.6%	2.7% - 24.8%
Enteral Nutrition	51	105	\$472	\$18,381	\$2,818,955	\$109,726,594	2.6%	2.1%	( 1.6%) - 6.8%
Lenses	49	153	\$324	\$3,399	\$1,933,468	\$20,292,283	9.5%	4.9%	( 0.2%) - 19.2%
Urological Supplies	39	63	\$298	\$1,144	\$1,777,957	\$6,826,836	26.0%	12.4%	1.7% - 50.3%
Surgical Dressings	34	60	\$187	\$2,909	\$1,116,693	\$17,367,605	6.4%	4.6%	( 2.5%) - 15.4%
Wheelchairs Manual	163	175	\$151	\$9,292	\$899,575	\$55,470,565	1.6%	1.0%	( 0.3%) - 3.5%
Walkers	39	44	\$74	\$2,705	\$442,892	\$16,147,994	2.7%	2.7%	( 2.6%) - 8.1%
Wheelchairs Options/Accessories	58	113	\$20	\$6,603	\$121,424	\$39,419,042	0.3%	0.3%	( 0.3%) - 0.9%
Hospital Beds/Accessories	85	93	\$0	\$8,933	\$0	\$53,325,411	0.0%	0.0%	0.0% - 0.0%
Infusion Pumps & Related Drugs	13	31	\$0	\$11,257	\$0	\$67,199,425	0.0%	0.0%	0.0% - 0.0%
Lower Limb Orthoses	23	39	\$0	\$4,983	\$0	\$29,746,208	0.0%	0.0%	0.0% - 0.0%
_Routinely Denied Items_	28	41	\$0	\$0	\$0	\$0			

## TriCenturion – Region A 77011

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,042	3,418	\$21,961	\$302,276	\$95,733,277	\$1,317,704,670	7.3%	1.1%	5.1% - 9.5%
Glucose Monitor	368	605	\$6,556	\$38,900	\$28,580,673	\$169,577,073	16.9%	2.2%	12.5% - 21.2%
All Codes With Less Than 30 Lines	198	280	\$4,131	\$67,825	\$18,010,330	\$295,667,692	6.1%	4.0%	( 1.7%) - 13.9%
Ostomy Supplies	67	116	\$2,619	\$7,635	\$11,416,349	\$33,284,121	34.3%	8.4%	17.8% - 50.8%
Oxygen Supplies/Equipment	366	588	\$2,082	\$73,785	\$9,076,679	\$321,649,274	2.8%	1.0%	0.9% - 4.7%
Nebulizers & Related Drugs	347	650	\$1,516	\$28,723	\$6,609,979	\$125,212,790	5.3%	2.2%	1.1% - 9.5%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Support Surfaces	34	35	\$1,076	\$3,976	\$4,691,546	\$17,330,544	27.1%	16.2%	( 4.6%) - 58.8%
CPAP	75	100	\$895	\$6,680	\$3,900,250	\$29,118,783	13.4%	4.2%	5.2% - 21.6%
Lower Limb Orthoses	24	49	\$868	\$7,549	\$3,784,511	\$32,907,871	11.5%	9.5%	( 7.0%) - 30.0%
Enteral Nutrition	68	130	\$510	\$18,950	\$2,223,059	\$82,609,658	2.7%	1.9%	( 1.1%) - 6.5%
Diabetic Shoes	25	43	\$330	\$5,595	\$1,438,563	\$24,390,532	5.9%	5.7%	( 5.3%) - 17.1%
Infusion Pumps & Related Drugs	17	40	\$312	\$3,009	\$1,358,527	\$13,119,085	10.4%	10.9%	( 11.1%) - 31.8%
Walkers	41	43	\$240	\$4,106	\$1,048,233	\$17,899,168	5.9%	4.0%	( 2.0%) - 13.7%
Lenses	39	108	\$231	\$4,016	\$1,005,468	\$17,509,013	5.7%	4.0%	( 2.1%) - 13.5%
Wheelchairs Manual	182	190	\$213	\$10,128	\$929,748	\$44,150,590	2.1%	1.4%	( 0.7%) - 4.9%
Surgical Dressings	28	41	\$160	\$1,685	\$697,921	\$7,347,003	9.5%	8.4%	( 7.0%) - 26.0%
Hospital Beds/Accessories	106	111	\$155	\$10,639	\$676,517	\$46,379,186	1.5%	1.4%	( 1.4%) - 4.3%
Wheelchairs Options/Accessories	105	143	\$41	\$3,531	\$179,864	\$15,392,494	1.2%	1.0%	( 0.7%) - 3.0%
Urological Supplies	44	66	\$24	\$3,039	\$105,059	\$13,246,332	0.8%	0.7%	( 0.6%) - 2.2%
Commodos/Bed Pans/Urinals	34	34	\$0	\$2,504	\$0	\$10,913,462	0.0%	0.0%	0.0% - 0.0%
_Routinely Denied Items_	29	46	\$0	\$0	\$0	\$0			

**Palmetto GBA– Region C 00885**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,137	4,060	\$43,653	\$378,727	\$474,929,530	\$4,120,399,461	11.5%	1.9%	7.8% - 15.2%
Lower Limb Prostheses	9	35	\$8,096	\$36,902	\$88,076,584	\$401,478,487	21.9%	14.2%	( 6.0%) - 49.9%
Surgical Dressings	32	89	\$7,713	\$9,161	\$83,908,831	\$99,666,175	84.2%	8.4%	67.8% -100.6%
Glucose Monitor	362	682	\$5,322	\$41,296	\$57,900,194	\$449,284,381	12.9%	2.5%	8.0% - 17.8%
All Codes With Less Than 30 Lines	160	205	\$4,871	\$40,417	\$52,997,960	\$439,724,921	12.1%	7.9%	( 3.5%) - 27.6%
Ostomy Supplies	35	83	\$3,903	\$4,998	\$42,466,844	\$54,377,165	78.1%	11.2%	56.2% -100.0%
Nebulizers & Related Drugs	506	1,155	\$3,593	\$57,958	\$39,086,120	\$630,559,115	6.2%	1.8%	2.6% - 9.7%
Enteral Nutrition	54	115	\$2,534	\$22,714	\$27,563,657	\$247,124,317	11.2%	5.2%	1.0% - 21.3%
Support Surfaces	36	40	\$2,421	\$8,448	\$26,341,226	\$91,912,292	28.7%	15.5%	( 1.7%) - 59.0%
Oxygen Supplies/Equipment	424	690	\$2,345	\$84,516	\$25,517,206	\$919,500,982	2.8%	0.9%	1.1% - 4.5%
Immunosuppressive Drugs	28	38	\$882	\$11,291	\$9,597,973	\$122,843,072	7.8%	5.7%	( 3.4%) - 19.0%
Lower Limb Orthoses	28	40	\$471	\$2,181	\$5,124,504	\$23,727,405	21.6%	14.1%	( 6.1%) - 49.3%
CPAP	88	148	\$438	\$10,284	\$4,768,959	\$111,888,196	4.3%	2.1%	0.2% - 8.3%
Wheelchairs Manual	176	205	\$436	\$9,835	\$4,744,589	\$107,005,872	4.4%	2.9%	( 1.2%) - 10.1%
Hospital Beds/Accessories	117	141	\$354	\$16,161	\$3,855,182	\$175,829,717	2.2%	1.7%	( 1.1%) - 5.4%
Walkers	43	51	\$167	\$3,671	\$1,817,435	\$39,941,365	4.6%	3.1%	( 1.6%) - 10.7%
Lenses	26	83	\$54	\$3,259	\$587,389	\$35,452,011	1.7%	1.7%	( 1.6%) - 4.9%

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Urological Supplies	27	53	\$32	\$1,808	\$345,645	\$19,670,950	1.8%	1.7%	( 1.6%) - 5.1%
Wheelchairs Options/Accessories	59	94	\$21	\$4,260	\$229,233	\$46,346,288	0.5%	0.5%	( 0.5%) - 1.5%
Diabetic Shoes	39	78	\$0	\$9,565	\$0	\$104,066,751	0.0%	0.0%	0.0% - 0.0%
_Routinely Denied Items_	22	35	\$0	\$0	\$0	\$0			

**CIGNA – Region D 05655**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	1,993	3,394	\$18,654	\$319,481	\$98,896,933	\$1,693,783,694	5.8%	1.0%	3.9% - 7.7%
Glucose Monitor	296	479	\$3,667	\$25,335	\$19,440,992	\$134,316,028	14.5%	2.5%	9.6% - 19.3%
Immunosuppressive Drugs	21	33	\$2,642	\$9,780	\$14,006,468	\$51,851,128	27.0%	15.6%	( 3.5%) - 57.5%
Enteral Nutrition	62	150	\$2,335	\$20,570	\$12,380,553	\$109,054,604	11.4%	5.2%	1.2% - 21.5%
Oxygen Supplies/Equipment	466	710	\$1,809	\$89,249	\$9,590,234	\$473,170,699	2.0%	0.7%	0.7% - 3.4%
Lower Limb Orthoses	25	39	\$1,588	\$8,199	\$8,417,771	\$43,468,825	19.4%	14.4%	( 8.9%) - 47.6%
All Codes With Less Than 30 Lines	220	293	\$1,512	\$71,326	\$8,017,230	\$378,149,018	2.1%	1.1%	0.1% - 4.2%
Ostomy Supplies	45	89	\$1,475	\$4,610	\$7,820,750	\$24,440,037	32.0%	10.5%	11.3% - 52.7%
Nebulizers & Related Drugs	375	692	\$1,370	\$35,812	\$7,264,182	\$189,864,696	3.8%	1.6%	0.7% - 7.0%
CPAP	100	149	\$1,156	\$9,316	\$6,129,997	\$49,388,664	12.4%	4.8%	3.1% - 21.7%
Lenses	33	99	\$366	\$2,738	\$1,938,501	\$14,513,307	13.4%	7.8%	( 2.0%) - 28.7%
Urological Supplies	43	76	\$351	\$1,363	\$1,859,082	\$7,227,388	25.7%	13.6%	( 0.9%) - 52.3%
Wheelchairs Manual	184	198	\$192	\$11,002	\$1,019,775	\$58,328,065	1.7%	1.2%	( 0.6%) - 4.1%
Hospital Beds/Accessories	88	105	\$126	\$10,525	\$667,745	\$55,797,793	1.2%	1.2%	( 1.1%) - 3.5%
Infusion Pumps & Related Drugs	14	36	\$54	\$7,121	\$287,880	\$37,754,850	0.8%	1.0%	( 1.2%) - 2.7%
Wheelchairs Options/Accessories	59	121	\$11	\$7,297	\$55,774	\$38,684,815	0.1%	0.1%	( 0.1%) - 0.4%
Diabetic Shoes	16	37	\$0	\$2,948	\$0	\$15,629,519	0.0%	0.0%	0.0% - 0.0%
Walkers	30	35	\$0	\$2,291	\$0	\$12,144,258	0.0%	0.0%	0.0% - 0.0%
_Routinely Denied Items_	28	53	\$0	\$0	\$0	\$0			

## AdminaStar IN/IL/KY/OH 00130/00131/00160/00332

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	4,133	4,133	\$59,689	\$1,900,340	\$187,012,576	\$5,919,052,000	3.2%	3.2%	( 3.0%) - 9.4%
SNF	270	270	\$31,976	\$697,009	\$98,776,587	\$2,383,802,115	4.1%	8.7%	( 12.8%) - 21.1%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	3,345	3,345	\$21,165	\$766,339	\$70,451,935	\$2,446,176,341	2.9%	3.0%	( 3.0%) - 8.7%
ESRD	103	103	\$4,107	\$195,380	\$11,366,115	\$474,764,236	2.4%	7.8%	( 12.9%) - 17.7%
Other FI Service Types	302	302	\$2,308	\$86,070	\$6,204,478	\$248,676,363	2.5%	3.8%	( 5.0%) - 10.0%
RHCs	52	52	\$128	\$4,224	\$193,879	\$10,112,345	1.9%	4.4%	( 6.8%) - 10.6%
Non-PPS Hospital In-patient	61	61	\$5	\$151,318	\$19,582	\$355,520,599	0.0%	0.0%	( 0.0%) - 0.0%

## Anthem MA/ME 00180/00181

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,419	2,419	\$22,386	\$1,001,701	\$41,479,224	\$1,874,563,623	2.2%	1.1%	0.1% - 4.3%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,978	1,978	\$13,609	\$378,610	\$24,882,710	\$693,908,704	3.6%	1.8%	0.1% - 7.0%
HHA	194	194	\$4,292	\$234,084	\$8,285,892	\$451,935,489	1.8%	1.4%	( 1.0%) - 4.7%
SNF	48	48	\$2,828	\$98,121	\$5,241,036	\$181,709,853	2.9%	3.0%	( 3.0%) - 8.8%
Other FI Service Types	64	64	\$873	\$11,022	\$1,577,231	\$20,720,989	7.6%	15.1%	( 22.0%) - 37.2%
All Codes With Less Than 30 Lines	12	12	\$596	\$71,376	\$1,150,784	\$132,045,990	0.9%	3.3%	( 5.5%) - 7.3%
ESRD	32	32	\$181	\$76,852	\$326,396	\$140,099,066	0.2%	0.2%	( 0.2%) - 0.6%
RHCs	48	48	\$8	\$3,394	\$15,175	\$6,553,229	0.2%	0.2%	( 0.2%) - 0.7%
Hospice	43	43	\$0	\$128,242	\$0	\$247,590,304	0.0%	0.0%	0.0% - 0.0%

**Anthem NH/VT 00270**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,136	2,136	\$9,037	\$744,517	\$3,717,028	\$306,233,906	1.2%	0.3%	0.5% - 1.9%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,681	1,681	\$4,193	\$352,464	\$1,724,632	\$144,975,239	1.2%	0.4%	0.5% - 1.9%
SNF	53	53	\$2,777	\$149,997	\$1,142,146	\$61,696,550	1.9%	0.9%	0.1% - 3.6%
All Codes With Less Than 30 Lines	20	20	\$1,746	\$34,803	\$718,249	\$14,315,041	5.0%	4.8%	( 4.3%) - 14.4%
RHCs	147	147	\$175	\$12,217	\$71,812	\$5,025,027	1.4%	0.9%	( 0.4%) - 3.3%
Other FI Service Types	194	194	\$146	\$81,005	\$60,188	\$33,318,735	0.2%	0.1%	( 0.1%) - 0.5%
Non-PPS Hospital In-patient	41	41	\$0	\$114,031	\$0	\$46,903,314	0.0%	0.0%	0.0% - 0.0%

**Cahaba GBA AL 00010**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,040	2,040	\$31,761	\$664,129	\$59,671,288	\$1,247,728,270	4.8%	2.4%	0.1% - 9.4%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,781	1,781	\$27,720	\$440,591	\$52,078,181	\$827,756,516	6.3%	3.5%	( 0.6%) - 13.2%
SNF	53	53	\$2,130	\$112,795	\$4,002,210	\$211,913,279	1.9%	0.7%	0.5% - 3.3%
Other FI Service Types	160	160	\$1,820	\$60,154	\$3,418,879	\$113,012,980	3.0%	1.4%	0.3% - 5.7%
All Codes With Less Than 30 Lines	13	13	\$60	\$48,607	\$112,837	\$91,320,924	0.1%	0.1%	( 0.1%) - 0.4%
RHCs	33	33	\$32	\$1,982	\$59,180	\$3,724,570	1.6%	1.6%	( 1.5%) - 4.7%

**BCBS AR AR 00020**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,046	2,046	\$40,019	\$832,187	\$17,607,810	\$366,152,221	4.8%	1.3%	2.2% - 7.4%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,652	1,652	\$28,685	\$444,557	\$12,621,068	\$195,599,917	6.5%	2.1%	2.3% - 10.6%
SNF	59	59	\$9,608	\$138,766	\$4,227,476	\$61,055,563	6.9%	3.1%	0.9% - 13.0%
Other FI Service Types	178	178	\$1,650	\$37,696	\$726,090	\$16,585,858	4.4%	1.3%	1.8% - 7.0%
RHCs	115	115	\$75	\$7,941	\$33,175	\$3,493,985	0.9%	0.9%	( 0.9%) - 2.8%
Non-PPS Hospital In-patient	42	42	\$0	\$203,226	\$0	\$89,416,898	0.0%	0.0%	0.0% - 0.0%

**BCBS AZ 00030**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,031	2,031	\$29,796	\$922,853	\$9,449,337	\$292,667,227	3.2%	1.1%	1.1% - 5.3%
SNF	57	57	\$16,163	\$166,547	\$5,125,856	\$52,817,619	9.7%	5.3%	( 0.7%) - 20.1%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,810	1,810	\$13,200	\$513,646	\$4,186,172	\$162,893,995	2.6%	0.6%	1.5% - 3.7%
Other FI Service Types	84	84	\$433	\$26,934	\$137,309	\$8,541,661	1.6%	1.1%	( 0.6%) - 3.8%
All Codes With Less Than 30 Lines	28	28	\$0	\$109,375	\$0	\$34,686,289	0.0%	0.0%	0.0% - 0.0%
ESRD	52	52	\$0	\$106,352	\$0	\$33,727,663	0.0%	0.0%	0.0% - 0.0%

**First Coast Service Options FL 00090**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,053	2,053	\$52,368	\$977,256	\$108,046,203	\$2,016,276,052	5.4%	1.0%	3.4% - 7.3%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,659	1,659	\$25,237	\$443,734	\$52,069,147	\$915,512,662	5.7%	1.2%	3.4% - 8.0%
SNF	126	126	\$13,295	\$352,189	\$27,430,319	\$726,636,579	3.8%	1.4%	0.9% - 6.6%
All Codes With Less Than 30 Lines	34	34	\$8,138	\$52,743	\$16,790,453	\$108,820,357	15.4%	10.1%	( 4.4%) - 35.3%
Other FI Service Types	234	234	\$5,698	\$128,590	\$11,756,284	\$265,306,454	4.4%	1.9%	0.7% - 8.1%

**BCBS GA 00101**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,024	2,024	\$38,492	\$1,387,457	\$46,641,372	\$1,681,215,149	2.8%	0.6%	1.6% - 4.0%
ESRD	447	447	\$21,756	\$890,523	\$26,362,126	\$1,079,068,330	2.4%	0.8%	0.8% - 4.1%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,379	1,379	\$12,417	\$386,699	\$15,045,822	\$468,572,005	3.2%	0.8%	1.7% - 4.7%
Other FI Service Types	116	116	\$2,261	\$28,296	\$2,739,830	\$34,286,414	8.0%	5.8%	( 3.5%) - 19.4%
All Codes With Less Than 30 Lines	39	39	\$1,988	\$78,642	\$2,409,356	\$95,291,843	2.5%	2.6%	( 2.6%) - 7.6%
RHCs	43	43	\$70	\$3,298	\$84,239	\$3,996,557	2.1%	2.1%	( 2.0%) - 6.2%

**Cahaba GBA IA/SD 00011**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,062	2,062	\$44,863	\$2,028,691	\$54,394,603	\$2,459,702,940	2.2%	0.6%	1.0% - 3.4%
HHA	508	508	\$14,573	\$972,832	\$17,669,374	\$1,179,518,159	1.5%	0.6%	0.4% - 2.6%
SNF	96	96	\$14,214	\$111,705	\$17,233,907	\$135,437,986	12.7%	8.2%	( 3.4%) - 28.8%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	839	839	\$7,014	\$223,212	\$8,504,146	\$270,635,153	3.1%	1.2%	0.9% - 5.4%
Hospice	215	215	\$5,265	\$474,084	\$6,384,127	\$574,807,025	1.1%	0.8%	( 0.5%) - 2.7%
Other FI Service Types	251	251	\$2,633	\$65,839	\$3,191,881	\$79,827,117	4.0%	3.1%	( 2.2%) - 10.2%
All Codes With Less Than 30 Lines	16	16	\$1,126	\$45,951	\$1,364,646	\$55,713,455	2.4%	2.0%	( 1.5%) - 6.4%
Non-PPS Hospital In-patient	69	69	\$38	\$129,050	\$46,522	\$156,467,615	0.0%	0.0%	( 0.0%) - 0.1%
RHCs	68	68	\$0	\$6,018	\$0	\$7,296,429	0.0%	0.0%	0.0% - 0.0%

**BCBS KS 00150**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,026	2,026	\$47,895	\$815,425	\$23,624,838	\$402,220,518	5.9%	2.3%	1.4% - 10.3%
Non-PPS Hospital In-patient	115	115	\$16,839	\$131,703	\$8,305,975	\$64,964,444	12.8%	11.8%	( 10.4%) - 36.0%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,131	1,131	\$16,011	\$366,049	\$7,897,843	\$180,559,138	4.4%	2.2%	0.0% - 8.7%
SNF	69	69	\$10,937	\$152,104	\$5,395,073	\$75,027,477	7.2%	3.0%	1.4% - 13.0%
All Codes With Less Than 30 Lines	16	16	\$2,968	\$34,271	\$1,463,945	\$16,904,896	8.7%	6.0%	( 3.2%) - 20.5%
Other FI Service Types	423	423	\$728	\$109,522	\$358,929	\$54,023,571	0.7%	0.3%	0.1% - 1.2%
RHCs	272	272	\$412	\$21,775	\$203,072	\$10,740,991	1.9%	0.9%	0.2% - 3.6%

**Trispan MS/LA/MO 00230**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,032	2,032	\$19,710	\$860,254	\$31,219,088	\$1,362,566,991	2.3%	0.6%	1.0% - 3.5%
SNF	164	164	\$12,264	\$311,283	\$19,425,434	\$493,044,923	3.9%	1.7%	0.7% - 7.2%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,455	1,455	\$6,090	\$340,636	\$9,646,074	\$539,537,757	1.8%	0.4%	1.0% - 2.6%
Other FI Service Types	172	172	\$985	\$57,927	\$1,560,011	\$91,752,038	1.7%	0.8%	0.0% - 3.4%
RHCs	182	182	\$269	\$14,768	\$425,993	\$23,390,553	1.8%	1.0%	( 0.1%) - 3.7%
ESRD	31	31	\$88	\$81,359	\$140,097	\$128,864,753	0.1%	0.1%	( 0.1%) - 0.3%
All Codes With Less Than 30 Lines	28	28	\$14	\$54,281	\$21,478	\$85,976,967	0.0%	0.0%	( 0.0%) - 0.1%

**BCBS MT 00250**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,057	2,057	\$8,506	\$650,841	\$2,181,055	\$166,888,668	1.3%	0.5%	0.3% - 2.3%
Other FI Service Types	390	390	\$4,213	\$99,437	\$1,080,293	\$25,497,763	4.2%	2.9%	( 1.5%) - 10.0%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,320	1,320	\$2,949	\$267,021	\$756,073	\$68,469,446	1.1%	0.4%	0.3% - 1.9%
SNF	56	56	\$679	\$90,829	\$174,217	\$23,290,276	0.7%	0.4%	( 0.0%) - 1.5%
Non-PPS Hospital In-patient	68	68	\$550	\$131,790	\$141,011	\$33,793,685	0.4%	0.4%	( 0.3%) - 1.2%
RHCs	203	203	\$83	\$18,223	\$21,291	\$4,672,745	0.5%	0.5%	( 0.4%) - 1.3%
All Codes With Less Than 30 Lines	20	20	\$32	\$43,541	\$8,172	\$11,164,753	0.1%	0.1%	( 0.1%) - 0.2%

**Palmetto GBA NC 00382**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,027	2,027	\$51,669	\$910,550	\$66,782,386	\$1,176,892,163	5.7%	1.5%	2.7% - 8.6%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,753	1,753	\$19,748	\$445,371	\$25,524,931	\$575,645,584	4.4%	1.1%	2.4% - 6.5%
SNF	76	76	\$16,419	\$221,093	\$21,221,413	\$285,764,533	7.4%	3.4%	0.8% - 14.0%
All Codes With Less Than 30 Lines	38	38	\$10,421	\$108,481	\$13,469,215	\$140,212,962	9.6%	9.8%	( 9.7%) - 28.9%
Other FI Service Types	112	112	\$5,044	\$24,092	\$6,518,810	\$31,139,168	20.9%	9.5%	2.3% - 39.5%
ESRD	48	48	\$37	\$111,512	\$48,017	\$144,129,917	0.0%	0.0%	( 0.0%) - 0.1%

**BCBS NE 00260**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,078	2,078	\$9,174	\$961,248	\$1,986,218	\$208,109,133	1.0%	0.6%	( 0.2%) - 2.1%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	909	909	\$8,227	\$289,557	\$1,781,085	\$62,688,901	2.8%	1.9%	( 0.8%) - 6.5%
All Codes With Less Than 30 Lines	27	27	\$628	\$51,501	\$135,961	\$11,149,992	1.2%	1.2%	( 1.2%) - 3.6%
Other FI Service Types	688	688	\$289	\$209,196	\$62,510	\$45,290,631	0.1%	0.1%	( 0.0%) - 0.3%
Non-PPS Hospital In-patient	198	198	\$31	\$390,829	\$6,662	\$84,614,049	0.0%	0.0%	( 0.0%) - 0.0%
RHCs	256	256	\$0	\$20,164	\$0	\$4,365,561	0.0%	0.0%	0.0% - 0.0%

**BCBS AR RI 00021**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,168	2,168	\$31,956	\$887,120	\$4,648,265	\$129,040,111	3.6%	0.9%	1.8% - 5.4%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	2,034	2,034	\$16,208	\$428,723	\$2,357,640	\$62,361,938	3.8%	0.7%	2.4% - 5.2%
SNF	130	130	\$15,748	\$354,938	\$2,290,625	\$51,629,091	4.4%	1.9%	0.8% - 8.1%
All Codes With Less Than 30 Lines	4	4	\$0	\$103,459	\$0	\$15,049,082	0.0%	0.0%	0.0% - 0.0%

**Palmetto GBA SC 00380**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,083	2,083	\$92,383	\$3,416,991	\$222,063,876	\$8,213,559,288	2.7%	0.5%	1.7% - 3.7%
HHA	1,033	1,033	\$44,067	\$1,891,013	\$105,925,228	\$4,545,504,521	2.3%	0.5%	1.3% - 3.4%
Hospice	505	505	\$36,892	\$1,290,795	\$88,678,754	\$3,102,734,554	2.9%	1.1%	0.7% - 5.0%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	484	484	\$6,485	\$123,253	\$15,587,942	\$296,267,499	5.3%	2.5%	0.4% - 10.1%
All Codes With Less Than 30 Lines	61	61	\$4,939	\$111,931	\$11,871,952	\$269,052,715	4.4%	3.2%	( 1.9%) - 10.8%

**BCBS WY 00460**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	1,949	1,949	\$60,719	\$820,865	\$3,931,533	\$53,150,730	7.4%	2.2%	3.1% - 11.7%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,208	1,208	\$33,732	\$344,492	\$2,184,113	\$22,305,771	9.8%	2.3%	5.2% - 14.4%
SNF	44	44	\$21,118	\$111,988	\$1,367,363	\$7,251,164	18.9%	12.5%	( 5.6%) - 43.3%
ESRD	30	30	\$4,165	\$43,525	\$269,663	\$2,818,217	9.6%	5.6%	( 1.4%) - 20.6%
Other FI Service Types	540	540	\$1,567	\$151,568	\$101,483	\$9,813,989	1.0%	0.3%	0.4% - 1.7%
RHCs	91	91	\$138	\$5,834	\$8,910	\$377,745	2.4%	1.7%	( 1.0%) - 5.7%
Non-PPS Hospital In-patient	36	36	\$0	\$163,458	\$0	\$10,583,843	0.0%	0.0%	0.0% - 0.0%

**CareFirst MD/DC 00190**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	1,970	1,970	\$69,559	\$1,904,784	\$116,393,936	\$3,187,315,114	3.7%	0.7%	2.2% - 5.1%
SNF	329	329	\$42,487	\$978,036	\$71,094,950	\$1,636,567,669	4.3%	1.2%	2.1% - 6.6%
Non-PPS Hospital In-patient	1,157	1,157	\$16,008	\$645,587	\$26,787,272	\$1,080,274,794	2.5%	0.9%	0.6% - 4.3%
Other FI Service Types	59	59	\$4,419	\$17,600	\$7,394,840	\$29,449,777	25.1%	7.8%	9.8% - 40.4%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	324	324	\$2,845	\$70,687	\$4,760,096	\$118,282,379	4.0%	1.4%	1.2% - 6.8%
All Codes With Less Than 30 Lines	29	29	\$2,151	\$67,672	\$3,599,162	\$113,237,501	3.2%	2.2%	( 1.2%) - 7.5%
Free Standing Ambulatory Surgery	72	72	\$1,648	\$125,202	\$2,757,616	\$209,502,994	1.3%	0.9%	( 0.5%) - 3.2%

**COSVI PR/VI 57400**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,076	2,076	\$43,700	\$506,075	\$8,269,584	\$95,767,456	8.6%	1.6%	5.5% - 11.8%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,976	1,976	\$30,213	\$338,632	\$5,717,467	\$64,081,296	8.9%	1.9%	5.2% - 12.6%
All Codes With Less Than 30 Lines	26	26	\$7,551	\$37,354	\$1,428,984	\$7,068,790	20.2%	9.6%	1.3% - 39.1%
ESRD	37	37	\$4,764	\$61,741	\$901,559	\$11,683,673	7.7%	3.9%	0.1% - 15.4%
Non-PPS Hospital In-patient	37	37	\$1,171	\$68,347	\$221,574	\$12,933,697	1.7%	1.3%	( 0.9%) - 4.3%

**Empire NY/CT/DE 00308**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	1,998	1,998	\$17,918	\$907,360	\$78,650,521	\$3,982,741,095	2.0%	0.4%	1.1% - 2.8%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,791	1,791	\$13,234	\$430,427	\$58,087,443	\$1,889,304,427	3.1%	0.7%	1.6% - 4.5%
SNF	146	146	\$2,469	\$371,562	\$10,838,463	\$1,630,924,698	0.7%	0.3%	0.1% - 1.2%
ESRD	42	42	\$1,993	\$91,744	\$8,746,882	\$402,697,616	2.2%	1.6%	( 1.0%) - 5.4%
All Codes With Less Than 30 Lines	19	19	\$223	\$13,627	\$977,733	\$59,814,355	1.6%	1.7%	( 1.7%) - 5.0%

**Chisholm OK 00340**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	1,985	1,985	\$22,632	\$740,738	\$10,213,512	\$334,278,051	3.1%	1.3%	0.5% - 5.6%
All Codes With Less Than 30 Lines	19	19	\$10,967	\$62,219	\$4,948,994	\$28,077,981	17.6%	11.8%	( 5.4%) - 40.7%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,702	1,702	\$10,771	\$483,871	\$4,860,778	\$218,360,038	2.2%	0.7%	0.9% - 3.6%
Other FI Service Types	165	165	\$631	\$41,332	\$284,896	\$18,652,002	1.5%	0.8%	( 0.1%) - 3.1%
RHCs	62	62	\$179	\$4,337	\$80,896	\$1,957,374	4.1%	2.9%	( 1.6%) - 9.9%
Non-PPS Hospital In-patient	37	37	\$84	\$148,979	\$37,948	\$67,230,656	0.1%	0.1%	( 0.1%) - 0.2%

**Veritus PA 00363**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,040	2,040	\$30,258	\$830,779	\$64,111,963	\$1,760,278,456	3.6%	1.0%	1.6% - 5.7%
SNF	158	158	\$17,005	\$376,192	\$36,031,562	\$797,086,933	4.5%	1.9%	0.8% - 8.2%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,676	1,676	\$8,288	\$308,513	\$17,561,515	\$653,686,871	2.7%	0.9%	1.0% - 4.4%
All Codes With Less Than 30 Lines	17	17	\$2,739	\$113,062	\$5,802,647	\$239,558,747	2.4%	2.9%	( 3.2%) - 8.0%
Other FI Service Types	68	68	\$1,876	\$25,255	\$3,975,920	\$53,510,315	7.4%	4.3%	( 1.0%) - 15.9%
RHCs	121	121	\$349	\$7,757	\$740,319	\$16,435,590	4.5%	1.8%	0.9% - 8.1%

**Mutual of Omaha (all states) 52280**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,058	2,058	\$56,257	\$1,154,559	\$363,218,483	\$7,454,375,834	4.9%	1.0%	3.0% - 6.8%
SNF	242	242	\$29,074	\$619,880	\$187,713,479	\$4,002,235,874	4.7%	1.4%	2.0% - 7.4%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,695	1,695	\$26,105	\$458,921	\$168,545,962	\$2,963,006,619	5.7%	1.6%	2.6% - 8.7%
Other FI Service Types	63	63	\$957	\$17,814	\$6,178,907	\$115,012,333	5.4%	2.8%	( 0.1%) - 10.8%
RHCs	31	31	\$65	\$2,195	\$418,508	\$14,172,533	3.0%	2.9%	( 2.8%) - 8.7%
All Codes With Less Than 30 Lines	27	27	\$56	\$55,750	\$361,627	\$359,948,475	0.1%	0.1%	( 0.1%) - 0.3%

**Noridian MN/ND 00320/00321**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,722	2,722	\$17,970	\$1,097,078	\$11,534,979	\$893,360,742	1.3%	2.0%	( 2.5%) - 5.1%
All Codes With Less Than 30 Lines	19	19	\$9,161	\$43,636	\$5,123,811	\$26,983,649	19.0%	20.8%	( 21.7%) - 59.7%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,902	1,902	\$6,194	\$482,449	\$4,366,127	\$385,857,043	1.1%	1.2%	( 1.2%) - 3.5%
SNF	133	133	\$1,964	\$295,326	\$1,477,127	\$274,433,081	0.5%	2.6%	( 4.5%) - 5.6%
Other FI Service Types	391	391	\$503	\$96,772	\$488,686	\$75,007,726	0.7%	0.5%	( 0.4%) - 1.7%
RHCs	185	185	\$135	\$16,511	\$65,443	\$11,307,016	0.6%	0.9%	( 1.3%) - 2.4%
Non-PPS Hospital In-patient	92	92	\$14	\$162,385	\$13,785	\$119,772,226	0.0%	0.0%	( 0.0%) - 0.1%

**Noridian WA/AK 00322**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,068	2,068	\$25,822	\$783,424	\$16,773,352	\$508,896,375	3.3%	0.8%	1.7% - 4.9%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,573	1,573	\$19,330	\$351,428	\$12,556,093	\$228,280,522	5.5%	1.5%	2.6% - 8.4%
Other FI Service Types	202	202	\$3,872	\$78,720	\$2,514,912	\$51,134,986	4.9%	3.1%	( 1.1%) - 10.9%
SNF	32	32	\$2,079	\$77,825	\$1,350,768	\$50,553,599	2.7%	1.9%	( 1.1%) - 6.4%
RHCs	187	187	\$517	\$19,122	\$336,002	\$12,421,020	2.7%	1.1%	0.5% - 4.9%
Non-PPS Hospital In-patient	40	40	\$24	\$180,158	\$15,577	\$117,026,898	0.0%	0.0%	( 0.0%) - 0.0%
ESRD	34	34	\$0	\$76,171	\$0	\$49,479,350	0.0%	0.0%	0.0% - 0.0%

**Medicare Northwest ID/OR/UT 00350**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,072	2,072	\$43,128	\$827,923	\$40,289,151	\$773,417,461	5.2%	1.5%	2.3% - 8.2%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,574	1,574	\$21,937	\$380,727	\$20,492,337	\$355,662,375	5.8%	2.5%	0.8% - 10.7%
ESRD	33	33	\$10,778	\$65,813	\$10,068,093	\$61,480,552	16.4%	7.7%	1.3% - 31.5%
SNF	75	75	\$9,467	\$208,744	\$8,844,047	\$195,001,701	4.5%	2.4%	( 0.2%) - 9.3%
Other FI Service Types	297	297	\$936	\$88,004	\$874,818	\$82,210,149	1.1%	0.5%	0.2% - 2.0%
Non-PPS Hospital In-patient	42	42	\$11	\$79,235	\$9,855	\$74,019,047	0.0%	0.0%	( 0.0%) - 0.0%
RHCs	51	51	\$0	\$5,399	\$0	\$5,043,636	0.0%	0.0%	0.0% - 0.0%

**Riverbend NJ/TN 00390**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,020	2,020	\$46,911	\$823,561	\$147,423,720	\$2,588,167,239	5.7%	1.4%	3.0% - 8.4%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,074	1,074	\$24,537	\$316,438	\$77,112,777	\$994,456,360	7.8%	2.8%	2.4% - 13.2%
SNF	110	110	\$11,907	\$288,896	\$37,419,455	\$907,899,750	4.1%	1.5%	1.2% - 7.0%
ESRD	40	40	\$8,082	\$105,502	\$25,399,652	\$331,555,461	7.7%	4.7%	( 1.6%) - 17.0%
Other FI Service Types	52	52	\$1,683	\$15,366	\$5,288,175	\$48,288,638	11.0%	8.0%	( 4.8%) - 26.7%
RHCs	740	740	\$701	\$46,940	\$2,203,660	\$147,516,491	1.5%	0.5%	0.6% - 2.4%
All Codes With Less Than 30 Lines	4	4	\$0	\$50,419	\$0	\$158,450,539	0.0%	0.0%	0.0% - 0.0%

**Trailblazer TX/CO/NM 00400**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,025	2,025	\$29,535	\$980,030	\$98,261,460	\$3,260,511,152	3.0%	0.6%	1.8% - 4.3%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,355	1,355	\$16,303	\$344,518	\$54,240,891	\$1,146,195,157	4.7%	1.0%	2.8% - 6.6%
SNF	46	46	\$7,539	\$97,669	\$25,080,477	\$324,940,483	7.7%	4.6%	( 1.2%) - 16.7%
ESRD	204	204	\$4,827	\$470,029	\$16,057,889	\$1,563,763,010	1.0%	0.5%	( 0.0%) - 2.1%
Other FI Service Types	125	125	\$610	\$32,931	\$2,029,606	\$109,559,082	1.9%	0.9%	0.1% - 3.6%
RHCs	256	256	\$223	\$17,925	\$743,241	\$59,636,305	1.2%	0.7%	( 0.2%) - 2.7%
Non-PPS Hospital In-patient	31	31	\$33	\$15,409	\$109,357	\$51,263,903	0.2%	0.2%	( 0.3%) - 0.7%
All Codes With Less Than 30 Lines	8	8	\$0	\$1,549	\$0	\$5,153,212	0.0%	0.0%	0.0% - 0.0%

**UGS AS/CA/GU/HI/NV/NMI 00454**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,037	2,037	\$63,936	\$1,531,793	\$186,871,283	\$4,477,136,363	4.2%	1.1%	2.0% - 6.3%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,520	1,520	\$24,534	\$431,718	\$71,707,216	\$1,261,827,700	5.7%	1.4%	2.9% - 8.4%
SNF	116	116	\$24,297	\$246,184	\$71,016,848	\$719,549,322	9.9%	5.6%	( 1.0%) - 20.8%
ESRD	99	99	\$5,440	\$238,669	\$15,898,843	\$697,584,748	2.3%	1.4%	( 0.4%) - 5.0%
HHA	115	115	\$4,290	\$258,956	\$12,539,106	\$756,879,093	1.7%	1.1%	( 0.5%) - 3.8%
Hospice	101	101	\$4,221	\$238,495	\$12,335,941	\$697,076,091	1.8%	1.8%	( 1.7%) - 5.2%
Other FI Service Types	38	38	\$1,019	\$11,015	\$2,977,113	\$32,195,247	9.2%	5.1%	( 0.7%) - 19.2%
RHCs	39	39	\$125	\$3,962	\$364,474	\$11,579,548	3.1%	3.1%	( 2.9%) - 9.2%
All Codes With Less Than 30 Lines	9	9	\$11	\$102,793	\$31,742	\$300,444,613	0.0%	0.0%	( 0.0%) - 0.0%

**UGS MI/WI 00450/00452**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,364	2,364	\$23,578	\$1,004,445	\$124,815,832	\$5,351,352,769	2.3%	1.5%	( 0.6%) - 5.2%
SNF	54	54	\$10,372	\$137,059	\$56,614,718	\$748,091,433	7.6%	7.7%	( 7.5%) - 22.6%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,357	1,357	\$7,951	\$271,327	\$40,044,952	\$1,379,102,670	2.9%	1.6%	( 0.3%) - 6.1%
Other FI Service Types	114	114	\$1,706	\$41,771	\$8,902,702	\$219,095,797	4.1%	3.5%	( 2.9%) - 11.0%
FQHC	584	584	\$1,381	\$46,131	\$7,539,207	\$251,827,896	3.0%	0.8%	1.5% - 4.5%
Hospice	56	56	\$974	\$122,130	\$5,314,555	\$666,708,713	0.8%	0.7%	( 0.6%) - 2.2%
All Codes With Less Than 30 Lines	33	33	\$853	\$71,293	\$4,547,489	\$369,610,083	1.2%	1.6%	( 2.0%) - 4.4%
HHA	134	134	\$317	\$311,733	\$1,730,012	\$1,701,751,637	0.1%	0.1%	( 0.0%) - 0.2%
RHCs	32	32	\$25	\$3,002	\$122,196	\$15,164,540	0.8%	1.1%	( 1.3%) - 2.9%

**UGS VA/WV 00453**

Carrier Service Type	Number of Claims in Sample	Number of Line in Sample	Total Dollars Incorrectly Paid in Sample	Total Dollars Paid in Sample	Projected Dollars Incorrectly Paid	Projected Dollars Paid	Paid Claims Error Rate		
							Paid Claims Error Rate	Standard Error	Confidence Interval
Overall	2,034	2,034	\$20,290	\$806,304	\$28,945,475	\$1,150,284,211	2.5%	0.6%	1.3% - 3.8%
OPPS, Laboratory (an FI), Ambulatory (Billing an FI)	1,788	1,788	\$10,194	\$418,419	\$14,542,199	\$596,922,607	2.4%	0.7%	1.1% - 3.7%
SNF	94	94	\$7,693	\$283,680	\$10,975,023	\$404,701,541	2.7%	1.4%	( 0.0%) - 5.4%
All Codes With Less Than 30 Lines	34	34	\$1,826	\$80,993	\$2,604,925	\$115,546,295	2.3%	2.2%	( 2.0%) - 6.5%
RHCs	32	32	\$301	\$2,649	\$428,740	\$3,778,999	11.3%	5.6%	0.5% - 22.2%
Other FI Service Types	86	86	\$277	\$20,563	\$394,587	\$29,334,769	1.3%	1.3%	( 1.3%) - 4.0%