



**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES**

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The Supplementary Appendices for the

# Improper Medicare Fee-for-Service Payments

Fiscal Year 2004

## *Appendix A – List of Acronyms*

<b>AC</b>	Affiliated Contractor
<b>AMA</b>	American Medical Association
<b>BBA</b>	Balanced Budget Act of 1997
<b>BETOS</b>	Berenson-Eggers Type of Service
<b>CDAC</b>	Clinical Data Abstraction Center
<b>CERT</b>	Comprehensive Error Rate Testing
<b>CLIA</b>	Clinical Laboratory Improvement Act
<b>CMN</b>	Certificate of Medical Necessity
<b>CMS</b>	Centers for Medicare & Medicaid Services
<b>CPT</b>	Current Procedural Terminology
<b>CTRDS</b>	CERT Tracking and Reporting Database and System
<b>CY</b>	Calendar Year
<b>DARN</b>	Dollars at Risk of Non-Response
<b>DHHS</b>	Department of Health and Human Services
<b>DRG</b>	Diagnosis Related Group
<b>DME</b>	Durable Medical Equipment
<b>DMERC</b>	Durable Medical Equipment Regional Carrier
<b>DOJ</b>	Department of Justice
<b>E&amp;M</b>	Evaluation and Management
<b>EMR</b>	Electronic Medical Records
<b>FFS</b>	Fee-for-Service
<b>FI</b>	Fiscal Intermediary
<b>FY</b>	Fiscal Year
<b>GPRA</b>	Government Performance & Results Act of 1993
<b>HCPCS</b>	The Healthcare Common Procedure Coding System
<b>HCPP</b>	Health Care Prepayment Plan
<b>HHA</b>	Home Health Agency
<b>HICN</b>	Health Insurance Claim Number
<b>HIPAA</b>	Health Insurance Portability and Accountability Act of 1996
<b>HI</b>	Hospital Insurance
<b>HPMP</b>	Hospital Payment Monitoring Program
<b>ICD-9-CM</b>	International Classification of Diseases (10 <sup>th</sup> Revision) Clinical Modification
<b>IPIA</b>	Improper Payment Information Act

<b>ISG</b>	Informative Services Group
<b>LI</b>	Line Item
<b>LMRP</b>	Local Medical Review Policy
<b>LPET</b>	Local Provider Education and Training
<b>MFS</b>	Medicare Fee Schedule
<b>MIP</b>	Medicare Integrity Program
<b>MSP</b>	Medicare Secondary Payer
<b>NCH</b>	National Claims History
<b>NDM</b>	Network Data Mover
<b>OIG</b>	Office of the Inspector General
<b>PCCM</b>	Primary Care Case Management
<b>PPS</b>	Prospective Payment System
<b>PSC</b>	Program Safeguard Contractor
<b>QIO</b>	Quality Improvement Organization
<b>RAC</b>	Recovery Audit Contractors
<b>RHC</b>	Rural Health Clinic
<b>RHHI</b>	Regional Home Health Intermediary
<b>RTP</b>	Return To Provider
<b>SMI</b>	Supplemental Medical Insurance
<b>SNF</b>	Skilled Nursing Facility

## Appendix B – Contractor Clusters

In order to be clustered, related contractors must:

1. Be in the same CAFM group (i.e., submit a single MR Strategy);
2. Perform all review geographically close and use the same LMRP;
3. Receive claims from providers in a geographically contiguous area; and
4. Not be too large when combined.

**Table B1: Part B Carrier Clusters**

CERT Report Contractor ID	CROWD CONT ID	Business Name	Jurisdiction	Nov 2003 Group (CUF dates 1/1/2002 to 12/31/2002)	Nov 2004 Group (CUF dates 1/1/2003 to 12/31/2003)
00510	00510	Cahaba GBA	AL	Cahaba GBA AL/GA/MS	Cahaba GBA AL/GA/MS
00511	00511	Cahaba GBA	GA	Cahaba GBA AL/GA/MS	Cahaba GBA AL/GA/MS
00512	00512	Cahaba GBA	MS	Cahaba GBA AL/GA/MS	Cahaba GBA AL/GA/MS
00520	00520	AR BCBS	AR	BCBS AR AR/MO	BCBS AR AR/MO
00522	00521	AR BCBS	NM	BCBS AR NM/OK/LA	BCBS AR NM/OK/LA
00522	00522	AR BCBS	OK	BCBS AR NM/OK/LA	BCBS AR NM/OK/LA
00523	00523	AR BCBS	MO	BCBS AR AR/MO	BCBS AR AR/MO
00524 <sup>1</sup>	00524	AR BCBS	RI	N/A	N/A
00528	00528	AR BCBS	LA	BCBS AR NM/OK/LA	BCBS AR NM/OK/LA
00590	00590	First Coast Service Options	FL	First Coast Service Options FL	First Coast Service Options FL
00591	00591	First Coast Service Options	CT	First Coast Service Options CT	First Coast Service Options CT
00630	00630	AdminaStar	IN	AdminaStar IN/KY	AdminaStar IN/KY
00650	00650	KS BCBS	KS	BCBS KS KS/NE/Kansas City	BCBS KS KS/NE/Kansas City
00651	00651	KS BCBS	W MO	BCBS KS KS/NE/Kansas City	BCBS KS KS/NE/Kansas City
00655	00655	KS BCBS	NE	BCBS KS KS/NE/Kansas City	BCBS KS KS/NE/Kansas City
00660	00660	AdminaStar	KY	AdminaStar IN/KY	AdminaStar IN/KY
00751	00751	MT BCBS	MT	BCBS MT	BCBS MT
00801	00801	HealthNow	W NY	HealthNow NY	HealthNow NY
00803	00803	Empire	NY	Empire NY/NJ	Empire NY/NJ
00805	00805	Empire	NJ	Empire NY/NJ	Empire NY/NJ
00824	00820	Noridian	ND/SD	Noridian CO/ND/SD/WY/IA	Noridian CO/ND/SD/WY/IA
00824	00824	Noridian	CO	Noridian CO/ND/SD/WY/IA	Noridian CO/ND/SD/WY/IA
00824	00825	Noridian	WY	Noridian CO/ND/SD/WY/IA	Noridian CO/ND/SD/WY/IA

<sup>1</sup> Rhode Island transitioned from BCBS RI (00870) to BCBS AR RI (00524) on 2/1/2004.

CERT Report Contractor ID	CROWD CONT ID	Business Name	Jurisdiction	Nov 2003 Group (CUF dates 1/1/2002 to 12/31/2002)	Nov 2004 Group (CUF dates 1/1/2003 to 12/31/2003)
00826	00826	Noridian	IA	Noridian CO/ND/SD/WY/IA	Noridian CO/ND/SD/WY/IA
00836	00831	Noridian	AK	Noridian AZ/HI/NV/AK/OR/WA	Noridian AZ/HI/NV/AK/OR/WA
00832	00832	Noridian	AZ	Noridian AZ/HI/NV/AK/OR/WA	Noridian AZ/HI/NV/AK/OR/WA
00832	00833	Noridian	HA/GU	Noridian AZ/HI/NV/AK/OR/WA	Noridian AZ/HI/NV/AK/OR/WA
00832	00834	Noridian	NV	Noridian AZ/HI/NV/AK/OR/WA	Noridian AZ/HI/NV/AK/OR/WA
00836	00835	Noridian	OR	Noridian AZ/HI/NV/AK/OR/WA	Noridian AZ/HI/NV/AK/OR/WA
00836	00836	Noridian	WA	Noridian AZ/HI/NV/AK/OR/WA	Noridian AZ/HI/NV/AK/OR/WA
00865	00865	HGSA	PA	HGSA PA	HGSA PA
00870 <sup>2</sup>	00870	RI BCBS	RI	BCBS RI	BCBS RI
00880	00880	Palmetto GBA	SC	Palmetto GBA SC	Palmetto GBA SC
00883 <sup>3</sup>	00883	Palmetto GBA	OH	N/A	Palmetto GBA OH/WV
00883	00884	Palmetto GBA	WV	N/A	Palmetto GBA OH/WV
16360 <sup>4</sup>	16360	Nationwide	OH	Nationwide OH/WV	N/A
00824	00889	Noridian	SD	Noridian CO/ND/SD/WY/IA	Noridian CO/ND/SD/WY/IA
00900	00900	TrailBlazer	TX	TrailBlazer TX	TrailBlazer TX
00901	00901	TrailBlazer	MD	TrailBlazer MD/DC/DE/VA	TrailBlazer MD/DC/DE/VA
00902	00902	TrailBlazer	DE	TrailBlazer MD/DC/DE/VA	TrailBlazer MD/DC/DE/VA
00902	00903	TrailBlazer	DC	TrailBlazer MD/DC/DE/VA	TrailBlazer MD/DC/DE/VA
00904	00904	TrailBlazer	VA	TrailBlazer MD/DC/DE/VA	TrailBlazer MD/DC/DE/VA
00910	00910	UT BCBS	UT	BCBS UT	BCBS UT
00951	00951	WPS	WI	WPS WI/IL/MI/MN	WPS WI/IL/MI/MN
00952	00952	WPS	IL	WPS WI/IL/MI/MN	WPS WI/IL/MI/MN
00953	00953	WPS	MI	WPS WI/IL/MI/MN	WPS WI/IL/MI/MN
00954	00954	WPS	MN	WPS WI/IL/MI/MN	WPS WI/IL/MI/MN
00973	00973	Triple S, Inc.	PR	Triple S, Inc. PR/VI	Triple S, Inc. PR/VI
00974	00974	Triple S, Inc.	VI	Triple S, Inc. PR/VI	Triple S, Inc. PR/VI
05130	05130	CIGNA	ID	CIGNA ID/TN/NC	CIGNA ID/TN/NC
05440	05440	CIGNA	TN	CIGNA ID/TN/NC	CIGNA ID/TN/NC
05535	05535	CIGNA	NC	CIGNA ID/TN/NC	CIGNA ID/TN/NC
14330	14330	GHI	GHI	GHI NY	GHI NY
31140	31140	NHIC	N CA	NHIC CA	NHIC CA
31143	31142	NHIC	ME	NHIC MA/ME/NH/VT	NHIC MA/ME/NH/VT
31143	31143	NHIC	MA	NHIC MA/ME/NH/VT	NHIC MA/ME/NH/VT
31143	31144	NHIC	NH	NHIC MA/ME/NH/VT	NHIC MA/ME/NH/VT
31143	31145	NHIC	VT	NHIC MA/ME/NH/VT	NHIC MA/ME/NH/VT
31146	31146	NHIC	S CA	NHIC CA	NHIC CA

<sup>2</sup> Rhode Island transitioned from BCBS RI (00870) to BCBS AR RI (00524) on 2/1/2004.

<sup>3</sup> Ohio/West Virginia transitioned from Nationwide (16360/16510) to Palmetto (00883/00884) on 7/1/2002.

<sup>4</sup> Ohio/West Virginia transitioned from Nationwide (16360/16510) to Palmetto (00883/00884) on 7/1/2002.

**Table B2: Durable Medical Equipment Regional Carrier (DMERC) Clusters**

CERT Report Contractor ID	CROWD CONT ID	Business Name	Jurisdiction	Nov 2003 Group (CUF dates 1/1/2002 to 12/31/2002)	Nov 2004 Group (CUF dates 1/1/2003 to 12/31/2003)
00635	00635	AdminaStar	DC, IL, IN, MD, MI, MN, OH, VA, WV, WI	AdminaStar –Region B	AdminaStar –Region B
00885	00885	Palmetto GBA	AL, AR, CO, FL, GA, KY, LA, MS, NM, NC, OK, PR, SC, TN, TX, VI	Palmetto GBA – Region C	Palmetto GBA – Region C
05655	05655	CIGNA	AK, AZ, CA, GU, HA, ID, IA, KS, MO, MT, NE, NV, ND, OR, SD, YT, WA, WY, AS, NMI	CIGNA -Region D	CIGNA -Region D
77011 <sup>5</sup>	00811	TriCenturion	CT, DE, ME, MA, NH, NJ, NY, PA, RI, VT	TriCenturion - Region A	TriCenturion - Region A

<sup>5</sup> As a “Full PSC,” TriCenturion (77011) is tasked with all MR and anti-fraud work in Region A. As such, it is TriCenturion (the PSC(77011)) not HealthNow ((00811) the Affiliated Contractor) that is responsible for lowering the error rates in this region.

**Table B3: Part A Fiscal Intermediary (FI) and Rural Home Health Intermediary (RHHI) Clusters**

CERT Report Contractor ID	CROWD Contractor ID	Business Name	Jurisdiction	Type of Contract	Nov 2003 Group (CUF dates 1/1/2002 to 12/31/2002)	Nov 2004 Group (CUF dates 1/1/2003 to 12/31/2003)
00010	00010	Cahaba GBA	AL	Part A	N/A	Cahaba GBA AL
00011	00011	Cahaba GBA	IA/SD	RHHI	N/A	Cahaba GBA IA/SD
00020	00020	AR BCBS	AR	Part A	N/A	BCBS AR
00021 <sup>6</sup>	00021	AR BCBS	RI	Part A	N/A	N/A
00030	00030	AZ BCBS	AZ	Part A	N/A	BCBS AZ
00090	00090	First Coast Service Options	FL	Part A	N/A	First Coast Service Options FL
00101	00101	GA BCBS	GA	Part A	N/A	BCBS GA
00130	00130	AdminaStar	IN	Part A	N/A	AdminaStar IN/IL/KY/OH
00131	00131	AdminaStar	IL	Part A	N/A	AdminaStar IN/IL/KY/OH
00150	00150	KS BCBS	KS	Part A	N/A	BCBS KS
00160	00160	AdminaStar	KY	Part A	N/A	AdminaStar IN/IL/KY/OH
00180	00180	Anthem	ME	RHHI	N/A	Anthem MA/ME
00181	00181	Anthem	MA	Part A	N/A	Anthem MA/ME
00190	00190	Carefirst	MD	Part A	N/A	CareFirst MD/DC
00230	00230	Trispan	MS/LA/MO	Part A	N/A	Trispan MS/LA/MO
00250	00250	MT BCBS	MT	Part A	N/A	BCBS MT
00260	00260	NE BCBS	NE	Part A	N/A	BCBS NE
00270	00270	Anthem	NH/VT	Part A	N/A	Anthem NH/VT
00308	00308	Empire	NY/CT/DE	Part A	N/A	Empire NY/CT/DE
00320	00320	Noridian	MN	Part A	N/A	Noridian MN/ND
00321	00320	Noridian	ND	Part A	N/A	Noridian MN/ND
00322 <sup>7</sup>	00322	Noridian	WA/AK	Part A	N/A	N/A
00332	00332	AdminaStar	OH	Part A	N/A	AdminaStar IN/IL/KY/OH
00340	00340	Chisholm	OK	Part A	N/A	Chisholm OK
00350	00350	Medicare Northwest	ID/OR/UT	Part A	N/A	Medicare Northwest OR/ID/UT
00363	00363	Veritus	PA	Part A	N/A	Veritus PA
00370 <sup>8</sup>	00370	RI BCBS	RI	Part A	N/A	BCBS RI
00380	00380	Palmetto GBA	SC	RHHI	N/A	Palmetto GBA SC
00382	00382	Palmetto GBA	NC	Part A	N/A	Palmetto GBA NC
00390	00390	Riverbend	TN/NJ	Part A	N/A	Riverbend TN/NJ
00400	00400	TrailBlazer	TX/CO/NM	Part A	N/A	TrailBlazer TX/CO/NM
00430 <sup>9</sup>	00430	Premera	WA/AK	Part A	N/A	Premera WA/AK
00450	00450	UGS	MI	RHHI	N/A	UGS MI/WI
00452	00452	UGS	WI	Part A	N/A	UGS MI/WI
00453	00453	UGS	VA/WV	Part A	N/A	UGS VA/WV
00454	00454	UGS	CA/HI/AS/GU/NMI	RHHI	N/A	UGS CA/HI/AS/GU/NMI
00460	00460	WY BCBS	WY	Part A	N/A	BCBS WY
52280	52280	Mutual of Omaha	(All states)	Part A	N/A	Mutual of Omaha
57400	57400	COSVI	PR/VI	Part A	N/A	COSVI PR/VI

<sup>6</sup> Rhode Island transitioned from BCBS RI (00370) to BCBS AR RI (00021) on 2/1/2004.

<sup>7</sup> Washington/Alaska transitioned from Premera (00430) to Noridian (00322) on 10/1/2004

<sup>8</sup> Rhode Island transitioned from BCBS RI (00370) to BCBS AR RI (00021) on 2/1/2004.

<sup>9</sup> Washington/Alaska transitioned from Premera (00430) to Noridian (00322) on 10/1/2004.

# Appendix C – Error Rates by Type of Error and Provider Type

Tables C1 through C3 display error rates for each type of provider by type of error. CMS did not include provider types with less than 30 lines of service in the sample in the table.

Table C1a: Paid/Allowed Claims Error Rates for Each Type of Provider by Type of Error: Carriers/DMERCs/FIs

Provider Types Billed to Carriers/DMERCs/FIs	Type of Error					
	Paid Claims Error Rate Including Non-Response	Non-Response	Insufficient Documentation	Medically Unnecessary Services	Incorrect Coding	Other
All Types	13.2%	4.5%	6.9%	0.6%	1.1%	0.1%

Table C1b: Paid/Allowed Claims Error Rates for Each Type of Provider by Type of Error: Carriers

Provider Types Billed to Carriers	Type of Error					
	Paid Claims Error Rate Including Non-Response	Non-Response	Insufficient Documentation	Medically Unnecessary Services	Incorrect Coding	Other
Physical Medicine and Rehabilitation	24.2%	5.9%	11.0%	0.1%	7.3%	0.0%
Infectious Disease	23.7%	4.3%	12.2%	0.0%	7.0%	0.3%
Nephrology	23.2%	8.3%	12.9%	0.0%	2.0%	0.0%
Cardiac Surgery	22.3%	0.7%	19.3%	0.0%	2.3%	0.0%
Pulmonary Disease	20.2%	10.0%	6.1%	0.0%	4.0%	0.1%
Pain Management	19.0%	15.4%	3.5%	0.0%	0.1%	0.0%
Radiation Oncology	18.2%	6.3%	11.3%	0.0%	0.6%	0.0%
Endocrinology	17.8%	1.5%	11.9%	0.1%	3.4%	0.9%
Pediatric Medicine	17.7%	0.0%	0.5%	0.0%	17.2%	0.0%
Physical Therapist in Private Practice	17.5%	1.4%	13.5%	2.3%	0.3%	0.0%
Interventional Radiology	17.3%	3.2%	14.1%	0.0%	-0.1%	0.0%
Plastic and Reconstructive Surgery	16.8%	0.0%	0.0%	0.0%	16.8%	0.0%
Internal Medicine	16.2%	5.0%	8.3%	0.1%	2.7%	0.1%
Audiologist (Billing Independently)	15.8%	0.0%	0.0%	9.2%	0.0%	6.7%
Psychiatry	15.7%	6.2%	6.9%	0.0%	2.5%	0.1%
General Practice	15.6%	6.5%	6.0%	0.3%	2.7%	0.1%
Occupational Therapist in Private Practice	15.0%	0.0%	13.3%	1.7%	0.0%	0.0%
Neurology	14.8%	6.2%	4.4%	0.2%	3.9%	0.0%
Allergy/Immunology	14.6%	0.7%	7.0%	0.0%	7.0%	0.0%
Cardiology	13.9%	3.6%	7.5%	0.0%	2.7%	0.0%
Clinical Psychologist	13.0%	1.0%	10.2%	0.0%	1.3%	0.6%
Emergency Medicine	12.9%	6.8%	3.5%	0.0%	2.6%	0.0%
Family Practice	12.7%	4.0%	6.0%	0.9%	1.7%	0.0%
Neurosurgery	12.5%	0.0%	8.3%	0.0%	4.3%	0.0%



Provider Types Billed to Carriers	Type of Error					
	Paid Claims Error Rate Including Non-Response	Non-Response	Insufficient Documentation	Medically Unnecessary Services	Incorrect Coding	Other
Otolaryngology	12.4%	4.2%	4.6%	0.0%	3.5%	0.1%
Vascular Surgery	11.9%	0.9%	9.2%	0.0%	1.7%	0.0%
Chiropractic	11.6%	1.8%	6.2%	3.1%	0.5%	0.0%
Gynecological/Oncology	11.5%	2.1%	9.4%	0.0%	0.0%	0.0%
Pathology	10.9%	6.4%	4.5%	0.0%	-0.1%	0.0%
Hematology/Oncology	10.9%	2.5%	7.1%	0.4%	0.8%	0.0%
Critical Care (Intensivists)	10.8%	5.0%	4.1%	0.0%	1.8%	0.0%
Anesthesiology	10.3%	3.9%	5.9%	0.0%	0.4%	0.0%
Urology	10.3%	1.7%	2.2%	0.0%	6.4%	0.0%
Certified Registered Nurse Anesthetist (CRNA)	10.3%	3.9%	6.3%	0.0%	0.1%	0.0%
Gastroenterology	9.9%	1.6%	5.8%	0.0%	2.4%	0.1%
Obstetrics/Gynecology	9.5%	3.1%	2.9%	0.3%	3.2%	0.0%
Physician Assistant	9.1%	3.3%	4.7%	0.0%	1.1%	0.1%
Other Provider Types	9.1%	0.5%	7.9%	0.0%	0.7%	0.0%
Geriatric Medicine	8.8%	4.5%	1.9%	0.0%	2.4%	0.0%
Nurse Practitioner	8.6%	4.8%	4.0%	0.1%	-0.4%	0.1%
Multispecialty Clinic or Group Practice	8.0%	0.9%	1.8%	3.9%	0.8%	0.6%
General Surgery	7.9%	2.0%	4.0%	0.1%	1.9%	0.0%
Podiatry	7.9%	3.4%	2.9%	0.5%	1.1%	0.1%
Orthopedic Surgery	7.4%	3.0%	2.5%	0.1%	1.8%	0.0%
Independent Diagnostic Testing Facility (IDTF)	6.7%	2.0%	3.4%	0.0%	1.4%	0.0%
Clinical Laboratory (Billing Independently)	6.5%	3.1%	2.2%	0.8%	0.3%	0.1%
Rheumatology	5.5%	2.6%	2.3%	0.0%	0.6%	0.0%
Diagnostic Radiology	5.5%	3.2%	2.0%	0.0%	0.2%	0.0%
Medical Oncology	5.3%	1.2%	3.6%	0.0%	0.5%	0.0%
Clinical Nurse Specialist	5.1%	0.3%	0.9%	0.0%	2.6%	1.2%
Ophthalmology	4.4%	1.9%	1.6%	0.1%	0.8%	0.0%
Public Health or Welfare Agencies (Federal, State, and local)	4.1%	4.1%	0.0%	0.0%	0.0%	0.0%
Clinical Social Worker	3.8%	1.2%	0.8%	0.0%	0.0%	1.8%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	3.7%	1.0%	1.0%	1.3%	0.3%	0.0%
Optometry	3.6%	1.3%	1.3%	0.0%	1.1%	0.0%
Portable X-Ray Supplier (Billing Independently)	3.4%	1.6%	0.8%	0.0%	-0.1%	1.2%
Ambulatory Surgical Center	3.1%	2.2%	0.8%	0.0%	0.0%	0.0%
Dermatology	2.9%	1.1%	0.8%	0.1%	1.0%	0.0%
Thoracic Surgery	2.8%	0.0%	0.9%	0.0%	1.9%	0.0%
Nuclear Medicine	2.7%	2.7%	0.0%	0.0%	0.0%	0.0%
Osteopathic Manipulative Therapy	2.0%	0.0%	4.9%	0.0%	0.0%	-2.9%
Hematology	1.5%	0.0%	1.6%	0.0%	-0.1%	0.0%

Table C1c: Paid/Allowed Claims Error Rates for Each Type of Provider by Type of Error: DMERCs

Provider Types Billed to DMERCs	Type of Error					
	Paid Claims Error Rate Including Non-Response	Non-Response	Insufficient Documentation	Medically Unnecessary Services	Incorrect Coding	Other
Individual orthotic personnel certified by an accrediting organization	44.0%	44.0%	0.0%	0.0%	0.0%	0.0%
Unknown Supplier/Provider	41.2%	39.3%	1.3%	0.7%	0.0%	0.0%
Other Provider Types	23.9%	8.3%	7.5%	8.0%	0.0%	0.0%
Podiatry	22.2%	2.6%	14.0%	0.0%	5.5%	0.0%
Nursing Facility, Other	18.1%	0.0%	3.0%	15.2%	0.0%	0.0%
Pharmacy	11.0%	2.5%	2.7%	5.4%	0.3%	0.0%
Medical supply company with prosthetic/orthotic personnel certified by an accrediting organization	9.2%	6.0%	0.9%	2.2%	0.0%	0.0%
Medical supply company not included in 51, 52, or 53	8.3%	4.7%	1.1%	2.4%	0.1%	0.1%
Orthopedic Surgery	6.9%	0.0%	6.9%	0.0%	0.0%	0.0%
Optician	6.7%	0.0%	4.3%	0.0%	2.4%	0.0%
Medical supply company with orthotic personnel certified by an accrediting organization	5.6%	0.0%	0.0%	5.6%	0.0%	0.0%
Medical Supply Company with registered pharmacist	3.5%	1.7%	0.0%	1.8%	0.0%	0.0%
Medical Supply Company with Respiratory Therapist	3.5%	1.0%	0.9%	1.4%	0.2%	0.0%
Optometry	3.4%	3.4%	0.0%	0.0%	0.0%	0.0%
Individual prosthetic personnel certified by an accrediting organization	3.1%	0.0%	0.0%	3.1%	0.0%	0.0%
Ophthalmology	1.7%	0.0%	1.7%	0.0%	0.0%	0.0%
Medical supply company with prosthetic personnel certified by an accrediting organization	1.5%	1.5%	0.0%	0.0%	0.0%	0.0%

Table C1d: Paid/Allowed Claims Error Rates for Each Type of Provider by Type of Error: FIs

Provider Type Billed to FIs	Type of Error					
	Paid Claims Error Rate Including Non-Response	Non-Response	Insufficient Documentation	Medically Unnecessary Services	Incorrect Coding	Other
SNF	25.5%	2.6%	20.7%	1.1%	1.0%	0.1%
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	14.1%	8.2%	5.4%	0.2%	0.3%	0.1%
Non-PPS Hospital In-patient	13.1%	7.6%	5.1%	0.0%	0.5%	0.0%
ESRD	10.7%	3.1%	6.3%	0.0%	1.3%	0.0%
Other FI Service Types	10.3%	4.3%	5.1%	0.4%	0.3%	0.1%
HHA	9.8%	5.1%	3.8%	0.5%	0.3%	0.1%
FOHC	9.0%	6.5%	2.5%	0.0%	0.0%	0.0%
Hospice	8.4%	2.4%	4.2%	1.8%	0.0%	0.0%
RHCs	5.0%	3.4%	1.5%	0.0%	0.0%	0.1%
Free Standing Ambulatory Surgery	3.8%	0.8%	3.1%	0.0%	0.0%	0.0%

Table C2a: Services Processed Error Rates for Each Type of Provider by Type of Error: Carriers/DMERCs

Provider Types Billed to Carriers/DMERCs	Type of Error					
	Services Processed Error Rate Including Non-response	Non-Response	Insufficient Documentation	Medically Unnecessary Services	Incorrect Coding	Other
All Types	12.7%	3.4%	4.7%	0.6%	3.2%	0.1%

Table C2b: Services Processed Error Rates for Each Type of Provider by Type of Error: Carriers

Provider Types Billed to Carriers	Type of Error					
	Services Processed Error Rate Including Non-response	Non-Response	Insufficient Documentation	Medically Unnecessary Services	Incorrect Coding	Other
Other Provider Types Billing Carriers	33.9%	0.9%	2.8%	0.0%	2.2%	0.0%
Physical Medicine and Rehabilitation	27.7%	4.7%	13.1%	0.1%	9.8%	0.0%
Nephrology	23.5%	6.9%	11.3%	0.0%	5.0%	0.0%
Infectious Disease	23.2%	3.6%	9.6%	0.0%	9.1%	0.4%
Neurosurgery	20.5%	0.0%	8.6%	0.0%	11.6%	0.0%
Pulmonary Disease	20.2%	6.9%	5.9%	0.1%	6.7%	0.2%
Physical Therapist in Private Practice	19.2%	1.6%	13.6%	2.5%	0.3%	0.5%
Neurology	19.0%	4.1%	6.2%	0.2%	8.2%	0.0%
Gastroenterology	18.5%	1.8%	9.2%	0.0%	7.1%	0.0%
General Practice	18.3%	4.6%	6.6%	0.8%	5.8%	0.1%
Radiation Oncology	18.2%	7.6%	9.1%	0.0%	1.5%	0.0%
Vascular Surgery	17.9%	2.3%	7.9%	0.0%	7.6%	0.0%
Plastic and Reconstructive Surgery	17.8%	0.0%	0.0%	0.0%	17.8%	0.0%
Critical Care (Intensivists)	17.2%	6.2%	4.8%	0.0%	5.8%	0.0%
Cardiology	16.8%	4.9%	7.7%	0.1%	3.8%	0.1%
Internal Medicine	16.7%	4.2%	6.8%	0.2%	5.2%	0.1%
Endocrinology	16.7%	1.8%	8.6%	0.1%	5.8%	0.2%
Orthopedic Surgery	16.6%	3.1%	7.1%	0.3%	5.8%	0.0%
General Surgery	16.6%	3.0%	4.7%	0.4%	7.9%	0.0%
Otolaryngology	16.5%	4.0%	4.4%	0.1%	7.9%	0.1%
Nurse Practitioner	16.5%	4.9%	4.2%	0.2%	6.8%	0.1%
Psychiatry	16.0%	5.6%	6.1%	0.0%	3.6%	0.4%
Emergency Medicine	15.5%	6.0%	3.0%	0.0%	6.0%	0.0%
Obstetrics/Gynecology	15.5%	2.7%	5.6%	1.0%	6.0%	0.0%
Cardiac Surgery	15.3%	2.7%	5.3%	0.0%	7.4%	0.0%
Allergy/Immunology	14.6%	0.8%	8.0%	0.0%	5.8%	0.0%
Physician Assistant	14.5%	3.1%	5.4%	0.0%	5.8%	0.2%
Pediatric Medicine	14.4%	0.0%	2.0%	0.0%	12.2%	0.0%
Nuclear Medicine	14.0%	11.2%	0.0%	0.0%	2.6%	0.0%
Family Practice	13.9%	3.2%	4.9%	0.5%	4.6%	0.1%
Geriatric Medicine	13.8%	6.4%	1.0%	0.0%	6.2%	0.0%
Interventional Radiology	12.4%	6.2%	5.5%	0.0%	0.8%	0.0%
Urology	12.0%	1.4%	4.1%	0.0%	6.3%	0.1%
Thoracic Surgery	11.8%	0.1%	5.9%	0.0%	5.8%	0.0%

Table C2b: Services Processed Error Rates for Each Type of Provider by Type of Error: Carriers

Provider Types Billed to Carriers	Type of Error					
	Services Processed Error Rate Including Non-response	Non-Response	Insufficient Documentation	Medically Unnecessary Services	Incorrect Coding	Other
Pain Management	11.8%	8.4%	3.3%	0.0%	0.1%	0.0%
Medical Oncology	11.8%	2.7%	6.8%	0.0%	2.2%	0.0%
Hematology/Oncology	11.7%	3.5%	4.6%	0.3%	3.0%	0.1%
Pathology	11.5%	6.8%	4.2%	0.0%	0.3%	0.0%
Anesthesiology	11.4%	3.6%	5.4%	0.0%	1.5%	0.0%
Audiologist (Billing Independently)	11.1%	0.0%	0.0%	6.6%	0.0%	4.0%
Certified Registered Nurse Anesthetist (CRNA)	10.8%	3.8%	6.3%	0.0%	0.5%	0.0%
Chiropractic	10.7%	1.4%	5.0%	2.0%	2.2%	0.0%
Podiatry	10.3%	2.8%	3.1%	0.5%	3.6%	0.2%
Rheumatology	10.2%	2.1%	5.1%	0.0%	2.9%	0.0%
Clinical Psychologist	9.8%	0.6%	7.8%	0.0%	0.4%	0.3%
Osteopathic Manipulative Therapy	9.8%	0.0%	7.7%	0.0%	0.0%	2.1%
Gynecological/Oncology	8.8%	0.8%	6.7%	0.0%	1.4%	0.0%
Diagnostic Radiology	8.3%	5.1%	2.5%	0.1%	0.5%	0.0%
Multispecialty Clinic or Group Practice	7.7%	0.6%	1.4%	3.0%	2.2%	0.4%
Clinical Nurse Specialist	7.7%	0.2%	2.4%	0.0%	3.4%	1.7%
Occupational Therapist in Private Practice	7.2%	0.0%	5.9%	1.0%	0.0%	0.0%
Dermatology	6.7%	1.7%	1.1%	0.1%	3.7%	0.0%
Portable X-Ray Supplier (Billing Independently)	6.0%	2.2%	1.7%	0.0%	1.0%	1.2%
Independent Diagnostic Testing Facility (IDTF)	6.0%	1.9%	2.7%	0.0%	1.2%	0.2%
Ophthalmology	5.8%	1.5%	1.7%	0.0%	2.3%	0.1%
Optometry	5.6%	1.6%	1.4%	0.0%	2.6%	0.0%
Clinical Laboratory (Billing Independently)	5.6%	2.7%	1.9%	0.5%	0.1%	0.1%
Ambulatory Surgical Center	5.2%	1.7%	0.7%	0.0%	0.6%	0.0%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	5.0%	0.8%	1.1%	1.3%	1.0%	0.0%
Hematology	4.4%	0.0%	3.5%	0.0%	0.8%	0.0%
Public Health or Welfare Agencies (Federal, State, and local)	3.6%	3.2%	0.0%	0.0%	0.0%	0.0%
Clinical Social Worker	2.9%	1.3%	0.6%	0.0%	0.0%	0.6%

Table C2c: Services Processed Error Rates for Each Type of Provider by Type of Error: DMERCs

Provider Types Billed to DMERCs	Type of Error					
	Services Processed Error Rate Including Non-response	Non-Response	Insufficient Documentation	Medically Unnecessary Services	Incorrect Coding	Other
Other Provider Types Billed to DMERCs	27.4%	5.1%	3.4%	4.9%	1.2%	0.0%
Unknown Supplier/Provider	27.0%	17.5%	4.2%	5.3%	0.0%	0.0%
Individual orthotic personnel certified by an accrediting organization	22.3%	19.5%	0.0%	1.8%	0.0%	0.0%
Individual prosthetic personnel certified by an accrediting organization	22.0%	0.0%	0.0%	4.7%	0.0%	0.0%

Table C2c: Services Processed Error Rates for Each Type of Provider by Type of Error: DMERCs

Provider Types Billed to DMERCs	Type of Error					
	Services Processed Error Rate Including Non-response	Non-Response	Insufficient Documentation	Medically Unnecessary Services	Incorrect Coding	Other
Nursing Facility, Other	20.5%	0.0%	5.2%	15.3%	0.0%	0.0%
Podiatry	18.8%	2.2%	14.9%	0.0%	1.7%	0.0%
Medical supply company with prosthetic/orthotic personnel certified by an accrediting organization	16.0%	7.9%	2.4%	1.3%	0.0%	0.0%
Pharmacy	14.5%	2.3%	2.6%	5.3%	0.2%	0.1%
Medical supply company with prosthetic personnel certified by an accrediting organization	13.7%	3.3%	0.0%	3.7%	0.0%	0.0%
Medical supply company with orthotic personnel certified by an accrediting organization	13.1%	0.0%	0.0%	7.2%	0.0%	0.0%
Medical supply company not included in 51, 52, or 53	10.7%	2.8%	1.4%	2.5%	0.2%	0.2%
Optician	10.1%	0.0%	2.3%	0.0%	0.6%	0.0%
Orthopedic Surgery	9.6%	0.0%	1.2%	0.0%	0.0%	0.0%
Medical Supply Company with registered pharmacist	7.0%	2.8%	0.0%	2.8%	0.0%	0.0%
Medical Supply Company with Respiratory Therapist	6.6%	1.0%	1.0%	1.6%	0.4%	0.2%
Optometry	5.3%	2.9%	0.0%	0.0%	0.0%	0.0%
Ophthalmology	2.7%	0.0%	1.7%	0.0%	0.0%	0.0%

Table C3a: Provider Compliance Error Rates for Each Type of Provider by Type of Error: Carriers/DMERCs

Provider Types Billed to Carriers/DMERCs	Type of Error					
	Provider Compliance Error Rate Including Non-response	Non-Response	Insufficient Documentation	Medically Unnecessary Services	Incorrect Coding	Other
All Types	24.0%	3.2%	4.1%	0.5%	1.4%	0.0%

Table C3b: Provider Compliance Error Rates for Each Type of Provider by Type of Error: Carriers

Provider Types Billed to Carriers	Type of Error					
	Provider Compliance Error Rate Including Non-response	Non-Response	Insufficient Documentation	Medically Unnecessary Services	Incorrect Coding	Other
Audiologist (Billing Independently)	78.9%	0.0%	0.0%	2.3%	0.0%	1.7%
Plastic and Reconstructive Surgery	53.2%	0.0%	0.0%	0.0%	9.4%	0.0%
Clinical Psychologist	50.2%	0.6%	9.2%	0.0%	0.8%	0.4%
Occupational Therapist in Private Practice	49.9%	0.0%	7.8%	1.0%	0.0%	0.0%
Pain Management	48.5%	9.8%	2.2%	0.0%	0.1%	0.0%
Clinical Social Worker	46.5%	1.0%	0.7%	0.0%	0.0%	1.0%
Infectious Disease	42.7%	3.2%	9.2%	0.0%	5.3%	0.2%
Clinical Nurse Specialist	38.5%	0.2%	1.0%	0.0%	1.7%	0.8%
Multispecialty Clinic or Group Practice	38.0%	0.6%	1.2%	2.6%	0.5%	0.4%

**Table C3b: Provider Compliance Error Rates for Each Type of Provider by Type of Error: Carriers**

Provider Types Billed to Carriers	Type of Error					
	Provider Compliance Error Rate Including Non-response	Non-Response	Insufficient Documentation	Medically Unnecessary Services	Incorrect Coding	Other
Vascular Surgery	37.8%	0.6%	8.4%	0.0%	1.2%	0.0%
Allergy/Immunology	37.5%	0.5%	5.1%	0.0%	5.1%	0.0%
Other Provider Types	36.6%	0.3%	5.5%	0.0%	0.5%	0.0%
Psychiatry	36.3%	5.1%	5.2%	0.0%	2.0%	0.2%
Chiropractic	35.4%	1.3%	4.6%	2.3%	0.4%	0.0%
Physical Medicine and Rehabilitation	35.3%	5.0%	9.4%	0.1%	6.2%	0.0%
Neurology	33.9%	4.8%	3.4%	0.2%	3.0%	0.0%
Nephrology	31.6%	7.4%	11.5%	0.0%	1.8%	0.0%
Physical Therapist in Private Practice	31.3%	1.2%	11.4%	1.9%	0.3%	0.4%
Radiation Oncology	30.7%	5.4%	9.6%	0.0%	0.5%	0.0%
Neurosurgery	29.7%	0.0%	6.7%	0.0%	3.4%	0.0%
Otolaryngology	29.3%	3.4%	3.7%	0.0%	2.8%	0.1%
Gastroenterology	29.3%	1.3%	4.6%	0.0%	1.9%	0.1%
Pulmonary Disease	28.9%	8.9%	5.5%	0.0%	3.5%	0.1%
General Practice	28.7%	5.7%	5.1%	0.3%	2.3%	0.1%
Ambulatory Surgical Center	28.6%	1.7%	0.6%	0.0%	0.0%	0.0%
Anesthesiology	28.4%	3.2%	4.7%	0.0%	0.3%	0.0%
General Surgery	26.8%	1.7%	3.2%	0.1%	1.5%	0.0%
Pediatric Medicine	26.6%	0.0%	0.5%	0.0%	15.3%	0.0%
Internal Medicine	26.3%	4.4%	7.3%	0.1%	2.4%	0.1%
Family Practice	25.1%	3.5%	5.1%	0.8%	1.5%	0.0%
Interventional Radiology	24.4%	2.9%	12.9%	0.0%	0.0%	0.0%
Obstetrics/Gynecology	24.2%	2.6%	2.5%	0.3%	2.7%	0.0%
Cardiology	24.0%	3.2%	6.7%	0.0%	2.4%	0.0%
Endocrinology	24.0%	1.4%	11.0%	0.1%	3.1%	0.9%
Physician Assistant	23.9%	2.8%	3.9%	0.0%	0.9%	0.1%
Cardiac Surgery	23.7%	0.7%	18.9%	0.0%	2.3%	0.0%
Clinical Laboratory (Billing Independently)	23.5%	2.7%	1.8%	0.6%	0.3%	0.1%
Emergency Medicine	23.4%	5.9%	3.1%	0.0%	2.3%	0.0%
Pathology	23.1%	5.6%	3.9%	0.0%	-0.1%	0.0%
Certified Registered Nurse Anesthetist (CRNA)	22.5%	3.4%	5.4%	0.0%	0.1%	0.0%
Hematology/Oncology	22.3%	2.2%	6.2%	0.4%	0.7%	0.0%
Podiatry	21.9%	2.9%	2.4%	0.4%	0.9%	0.1%
Orthopedic Surgery	21.8%	2.8%	2.2%	0.1%	1.6%	0.0%
Urology	21.6%	1.5%	1.9%	0.0%	5.6%	0.0%
Independent Diagnostic Testing Facility (IDTF)	21.6%	1.7%	2.8%	0.0%	1.1%	0.0%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	20.6%	0.9%	0.8%	1.1%	0.3%	0.0%
Nurse Practitioner	20.1%	4.5%	3.7%	0.1%	-0.3%	0.1%
Geriatric Medicine	18.1%	4.9%	1.7%	0.0%	2.2%	0.0%
Diagnostic Radiology	17.7%	2.9%	1.7%	0.0%	0.2%	0.0%
Medical Oncology	17.4%	1.0%	3.8%	0.0%	0.4%	0.0%

**Table C3b: Provider Compliance Error Rates for Each Type of Provider by Type of Error: Carriers**

Provider Types Billed to Carriers	Type of Error					
	Provider Compliance Error Rate Including Non-response	Non-Response	Insufficient Documentation	Medically Unnecessary Services	Incorrect Coding	Other
Thoracic Surgery	16.8%	0.0%	0.8%	0.0%	1.6%	0.0%
Ophthalmology	16.5%	1.6%	1.4%	0.1%	0.7%	0.0%
Optometry	15.9%	1.1%	1.1%	0.0%	0.9%	0.0%
Portable X-Ray Supplier (Billing Independently)	15.5%	1.4%	0.7%	0.0%	-0.1%	1.0%
Gynecological/Oncology	14.7%	2.0%	9.1%	0.0%	0.0%	0.0%
Dermatology	14.3%	1.0%	0.7%	0.1%	0.9%	0.0%
Critical Care (Intensivists)	14.1%	4.8%	3.9%	0.0%	1.7%	0.0%
Rheumatology	11.5%	2.4%	2.1%	0.0%	0.6%	0.0%
Public Health or Welfare Agencies (Federal, State, and local)	11.0%	3.8%	0.0%	0.0%	0.0%	0.0%
Osteopathic Manipulative Therapy	10.2%	0.0%	4.5%	0.0%	0.0%	-2.6%
Mass Immunization Roster Billers (Mass Immunizers have to roster bill assigned claims and can only bill for immunizations)	7.9%	0.0%	0.0%	0.0%	0.0%	0.0%
Nuclear Medicine	6.6%	3.1%	0.0%	0.0%	0.0%	0.0%
Hematology	4.4%	0.0%	1.6%	0.0%	-0.1%	0.0%

**Table C3c: Provider Compliance Error Rates for Each Type of Provider by Type of Error: DMERC**

Provider Type Billed to DMERCs	Type of Error					
	Provider Compliance Error Rate Including Non-response	Non-Response	Insufficient Documentation	Medically Unnecessary Services	Incorrect Coding	Other
Unknown Supplier/Provider	47.0%	35.4%	1.1%	0.7%	0.0%	0.0%
Individual orthotic personnel certified by an accrediting organization	44.7%	43.5%	0.0%	0.0%	0.0%	0.0%
Other Provider Types	33.7%	7.3%	6.8%	7.0%	0.0%	0.0%
Podiatry	31.1%	2.3%	12.4%	0.0%	4.9%	0.0%
Individual prosthetic personnel certified by an accrediting organization	24.0%	0.0%	0.0%	2.5%	0.0%	0.0%
Nursing Facility, Other	24.0%	0.0%	2.8%	14.1%	0.0%	0.0%
Medical supply company not included in 51, 52, or 53	18.6%	4.2%	0.9%	2.1%	0.1%	0.0%
Pharmacy	18.3%	2.4%	2.5%	5.0%	0.3%	0.0%
Optometry	17.2%	2.9%	0.0%	0.0%	0.0%	0.0%
Optician	15.8%	0.0%	3.9%	0.0%	2.2%	0.0%
Ophthalmology	14.9%	0.0%	1.4%	0.0%	0.0%	0.0%
Medical supply company with prosthetic/orthotic personnel certified by an accrediting organization	14.9%	5.6%	0.9%	2.1%	0.0%	0.0%
Medical Supply Company with Respiratory Therapist	13.9%	0.9%	0.8%	1.2%	0.2%	0.0%
Orthopedic Surgery	12.0%	0.0%	6.5%	0.0%	0.0%	0.0%
Medical supply company with orthotic personnel certified by an accrediting organization	5.6%	0.0%	0.0%	5.6%	0.0%	0.0%
Medical Supply Company with registered	5.4%	1.6%	0.0%	1.8%	0.0%	0.0%

Table C3c: Provider Compliance Error Rates for Each Type of Provider by Type of Error: DMERC

Provider Type Billed to DMERCs	Type of Error					
	Provider Compliance Error Rate Including Non-response	Non-Response	Insufficient Documentation	Medically Unnecessary Services	Incorrect Coding	Other
pharmacist						
Medical supply company with prosthetic personnel certified by an accrediting organization	1.8%	1.5%	0.0%	0.0%	0.0%	0.0%



## Appendix D – Error Rates by Provider Type and Cluster

The tables in this appendix provide data by cluster. Each table in the appendix includes three error rates for each provider type that billed contractors in the cluster. The three error rates are:

1. Paid/Allowed Claims Error Rate
2. Provider Compliance Error Rate, and
3. Services Processed Error Rate.

Information on dollars in error is also included in the tables.

### Carrier

#### AdminaStar IN/KY

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
Internal Medicine	18.1%	\$51,368,634	3.3%	11.6% - 24.7%	15.0%	29.3%	27.0%	15.3%	13.5%
Pulmonary Disease	54.4%	\$34,297,999	20.3%	14.6% - 94.1%	8.3%	59.0%	25.3%	24.6%	8.8%
Family Practice	14.1%	\$32,430,849	3.4%	7.4% - 20.8%	12.1%	19.4%	17.7%	17.1%	14.1%
Emergency Medicine	32.6%	\$28,672,817	18.6%	(3.9%) - 69.0%	31.9%	39.7%	39.2%	14.1%	12.7%
Hematology/Oncology	22.4%	\$19,889,794	14.8%	(6.5%) - 51.4%	6.2%	23.9%	8.3%	12.2%	5.8%
Cardiology	5.7%	\$13,234,090	2.2%	1.4% - 10.0%	3.7%	11.9%	10.2%	7.5%	5.5%
Urology	7.5%	\$9,707,119	5.3%	(2.9%) - 17.8%	7.4%	7.9%	7.8%	16.9%	15.8%
Pain Management	58.3%	\$8,611,219	38.0%	(16.2%) - 132.9%	0.0%	58.3%	0.0%	44.4%	0.0%
Ophthalmology	6.2%	\$7,965,501	4.0%	(1.5%) - 14.0%	5.7%	9.0%	8.6%	11.4%	10.1%
Anesthesiology	14.0%	\$6,777,355	8.5%	(2.6%) - 30.6%	5.9%	36.5%	32.2%	14.9%	7.0%
Independent Diagnostic Testing Facility (IDTF)	15.8%	\$6,607,044	20.2%	(23.9%) - 55.4%	0.0%	28.5%	17.5%	10.0%	0.0%
Nephrology	11.3%	\$6,052,974	6.4%	(1.3%) - 23.8%	11.3%	11.3%	11.3%	11.4%	11.4%
Clinical Psychologist	31.2%	\$5,143,655	18.6%	(5.2%) - 67.5%	31.2%	42.7%	42.7%	20.0%	20.0%
General Surgery	4.3%	\$4,544,209	2.2%	0.1% - 8.6%	3.0%	11.2%	10.1%	10.2%	7.0%
Neurology	11.1%	\$4,044,173	5.0%	1.2% - 20.9%	7.5%	15.8%	12.6%	16.2%	11.4%
Otolaryngology	14.1%	\$4,033,276	7.4%	(0.4%) - 28.7%	6.5%	19.3%	12.6%	21.4%	15.4%
Psychiatry	18.3%	\$3,343,674	9.4%	(0.1%) - 36.8%	7.4%	45.8%	40.6%	22.9%	15.6%

**AdminaStar IN/KY**

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Clinical Laboratory (Billing Independently)	4.6%	\$3,066,192	2.7%	(0.8%) - 9.9%	2.2%	12.6%	10.7%	2.7%	1.8%
General Practice	6.9%	\$2,294,345	5.2%	(3.4%) - 17.1%	4.5%	7.2%	4.8%	12.8%	10.9%
Diagnostic Radiology	1.1%	\$2,031,341	0.6%	0.1% - 2.2%	0.2%	10.9%	10.1%	2.7%	0.6%
Chiropractic	7.1%	\$1,788,935	3.1%	1.0% - 13.2%	5.8%	10.4%	9.3%	7.8%	6.7%
Gastroenterology	6.4%	\$1,722,662	6.2%	(5.7%) - 18.4%	6.4%	9.1%	9.1%	20.0%	20.0%
Critical Care (Intensivists)	69.1%	\$1,602,802	36.3%	(2.2%) -140.3%	7.7%	69.1%	7.7%	80.0%	66.7%
Podiatry	4.3%	\$1,325,618	2.5%	(0.6%) - 9.2%	2.7%	22.2%	21.2%	6.9%	5.3%
Infectious Disease	9.5%	\$1,072,465	9.3%	(8.7%) - 27.6%	9.5%	9.5%	9.5%	9.1%	9.1%
Plastic and Reconstructive Surgery	14.7%	\$1,066,346	5.0%	4.9% - 24.6%	14.7%	14.7%	14.7%	25.0%	25.0%
Interventional Radiology	18.4%	\$1,058,435	18.5%	(17.8%) - 54.7%	0.0%	20.2%	2.7%	8.3%	0.0%
Obstetrics/Gynecology	5.5%	\$937,829	4.5%	(3.2%) - 14.3%	5.5%	8.2%	8.2%	12.5%	12.5%
Physical Therapist in Private Practice	7.9%	\$909,021	7.0%	(5.8%) - 21.7%	7.9%	18.4%	18.4%	11.1%	11.1%
Optometry	2.3%	\$888,273	3.0%	(3.6%) - 8.2%	1.7%	4.4%	3.8%	6.1%	4.2%
Nurse Practitioner	4.0%	\$864,391	4.8%	(5.5%) - 13.4%	0.0%	9.5%	6.0%	13.9%	11.4%
Endocrinology	23.6%	\$817,522	14.4%	(4.6%) - 51.8%	13.3%	50.9%	46.8%	22.2%	12.5%
Allergy/Immunology	17.3%	\$775,131	19.1%	(20.1%) - 54.8%	18.0%	17.3%	18.0%	40.0%	33.3%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	0.7%	\$682,139	0.7%	(0.7%) - 2.1%	0.7%	5.9%	5.9%	1.6%	1.6%
Clinical Social Worker	11.9%	\$642,285	12.2%	(11.9%) - 35.8%	0.0%	40.3%	31.4%	8.3%	0.0%
Physician Assistant	11.2%	\$578,699	17.3%	(22.8%) - 45.1%	5.3%	11.2%	5.3%	33.3%	25.0%
Medical Oncology	2.2%	\$459,884	2.6%	(2.9%) - 7.2%	2.2%	2.4%	2.4%	4.5%	4.5%
Orthopedic Surgery	0.4%	\$290,767	1.2%	(2.0%) - 2.8%	0.4%	1.7%	1.7%	4.1%	4.1%
Other Provider Types	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Dermatology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	10.9%	10.9%	0.0%	0.0%
Neurosurgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pathology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	6.4%	6.4%	0.0%	0.0%
Physical Medicine and Rehabilitation	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Thoracic Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pediatric Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	2.4%	2.4%	0.0%	0.0%
Geriatric Medicine	0.0%	\$0		0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Certified Registered Nurse Anesthetist (CRNA)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	6.1%	6.1%	0.0%	0.0%
Ambulatory Surgical Center	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Public Health or Welfare Agencies (Federal, State,	0.0%	\$0		0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Portable X-Ray Supplier (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Rheumatology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.1%	0.1%	0.0%	0.0%

## AdminaStar IN/KY

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Occupational Therapist in Private Practice	0.0%	\$0		0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Multispecialty Clinic or Group Practice		\$0		0.0% - 0.0%				0.0%	0.0%
Mass Immunization Roster Billers (Mass Immunizers)	0.0%	\$0		0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Cardiac Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Hematology	0.0%	\$0		0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Clinical Nurse Specialist	0.0%	\$0		0.0% - 0.0%	0.0%	37.5%	37.5%	0.0%	0.0%
Radiation Oncology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	46.8%	46.8%	0.0%	0.0%
Gynecological/Oncology	0.0%	\$0		0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Vascular Surgery	-3.0%	-\$766,324	4.2%	(11.4%) - 5.3%	-3.0%	-3.0%	-3.0%	14.3%	14.3%
All Types	10.0%	\$270,833,138	1.5%	7.0% - 13.0%	6.4%	16.9%	13.7%	10.2%	7.7%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## BCBS AR AR/MO

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Internal Medicine	13.3%	\$42,712,540	3.9%	5.6% - 20.9%	10.4%	21.3%	18.9%	14.9%	11.5%
Hematology/Oncology	10.4%	\$21,467,762	6.1%	(1.6%) - 22.5%	9.9%	11.1%	10.6%	17.6%	14.9%
Other Provider Types	43.5%	\$21,205,435	29.0%	(13.3%) -100.4%	43.5%	43.7%	43.7%	51.2%	51.2%
Orthopedic Surgery	14.8%	\$17,041,353	10.0%	(4.8%) - 34.5%	14.8%	17.5%	17.5%	17.7%	17.7%
Family Practice	8.9%	\$12,349,815	2.7%	3.6% - 14.3%	3.5%	20.6%	16.5%	9.3%	6.5%
Radiation Oncology	21.5%	\$11,769,239	14.7%	(7.2%) - 50.3%	21.5%	31.4%	31.4%	9.1%	9.1%
Diagnostic Radiology	11.2%	\$11,185,044	3.5%	4.4% - 17.9%	5.2%	21.9%	17.4%	10.2%	4.9%
Cardiology	5.9%	\$10,831,189	2.2%	1.6% - 10.2%	5.1%	18.2%	17.7%	11.2%	8.6%
Gastroenterology	14.7%	\$7,490,047	10.4%	(5.6%) - 35.1%	14.7%	32.0%	32.0%	15.8%	15.8%
Emergency Medicine	18.9%	\$6,714,039	7.1%	5.0% - 32.9%	8.0%	23.6%	13.9%	17.0%	12.0%
Pathology	17.0%	\$6,443,773	10.7%	(4.0%) - 38.0%	1.4%	21.0%	7.0%	13.6%	2.6%
Psychiatry	33.5%	\$6,253,361	13.7%	6.7% - 60.3%	5.9%	47.5%	31.6%	29.7%	3.7%
Neurology	27.9%	\$6,248,808	9.9%	8.5% - 47.3%	27.9%	45.8%	45.8%	30.0%	30.0%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	6.5%	\$5,468,830	4.7%	(2.7%) - 15.6%	6.5%	12.9%	12.9%	10.5%	10.5%
Anesthesiology	13.9%	\$5,408,473	9.4%	(4.4%) - 32.3%	1.3%	21.7%	11.4%	12.5%	6.7%
General Surgery	5.6%	\$4,613,669	2.8%	0.2% - 11.0%	3.1%	21.9%	20.2%	20.0%	17.0%

**BCBS AR AR/MO**

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Podiatry	24.4%	\$3,950,554	8.2%	8.4% - 40.4%	13.9%	48.6%	43.9%	18.9%	14.0%
General Practice	12.3%	\$3,547,315	4.6%	3.2% - 21.4%	10.7%	18.8%	17.4%	10.3%	9.1%
Dermatology	5.8%	\$3,411,540	3.0%	(0.0%) - 11.6%	1.9%	15.1%	11.9%	10.7%	3.8%
Nurse Practitioner	23.8%	\$3,245,411	11.3%	1.7% - 45.9%	15.1%	45.6%	41.3%	18.4%	13.9%
Otolaryngology	11.9%	\$3,059,318	8.0%	(3.8%) - 27.6%	4.4%	25.2%	19.9%	12.0%	8.3%
Chiropractic	14.9%	\$2,713,634	6.4%	2.3% - 27.5%	5.5%	27.7%	21.0%	14.8%	8.8%
Pulmonary Disease	9.2%	\$2,674,408	7.7%	(5.9%) - 24.3%	7.3%	20.7%	19.3%	13.2%	10.8%
Certified Registered Nurse Anesthetist (CRNA)	14.1%	\$2,470,103	8.9%	(3.3%) - 31.5%	0.0%	43.2%	37.3%	17.6%	0.0%
Obstetrics/Gynecology	27.7%	\$2,394,452	16.7%	(5.1%) - 60.4%	18.2%	34.0%	26.3%	38.9%	31.3%
Nephrology	7.6%	\$2,346,236	4.9%	(2.0%) - 17.2%	2.9%	13.2%	9.0%	12.9%	6.9%
Endocrinology	63.1%	\$2,284,361	25.3%	13.5% -112.6%	58.4%	75.2%	73.1%	41.7%	36.4%
Infectious Disease	11.5%	\$2,192,832	10.1%	(8.3%) - 31.3%	7.2%	30.2%	27.6%	25.0%	21.1%
Portable X-Ray Supplier (Billing Independently)	42.9%	\$1,820,531	27.8%	(11.7%) - 97.5%	0.0%	59.5%	41.8%	40.0%	0.0%
Physical Medicine and Rehabilitation	12.8%	\$1,375,497	8.0%	(2.8%) - 28.5%	12.8%	12.8%	12.8%	21.4%	21.4%
Optometry	6.2%	\$1,276,846	6.0%	(5.7%) - 18.0%	0.0%	19.4%	14.9%	2.5%	0.0%
Urology	1.2%	\$1,127,062	0.8%	(0.3%) - 2.7%	1.2%	30.8%	30.8%	8.6%	8.6%
Neurosurgery	7.0%	\$1,113,753	9.1%	(10.7%) - 24.8%	7.0%	20.6%	20.6%	12.5%	12.5%
Rheumatology	14.6%	\$975,993	7.7%	(0.4%) - 29.7%	14.6%	33.1%	33.1%	16.2%	16.2%
Physical Therapist in Private Practice	7.9%	\$931,163	6.2%	(4.3%) - 20.0%	7.9%	41.8%	41.8%	7.0%	7.0%
Geriatric Medicine	17.4%	\$616,417	18.1%	(18.1%) - 52.8%	0.0%	17.4%	0.0%	14.3%	0.0%
Medical Oncology	12.1%	\$602,757	11.7%	(10.9%) - 35.0%	4.5%	13.8%	6.6%	14.3%	7.7%
Multispecialty Clinic or Group Practice	12.9%	\$441,532	3.1%	6.9% - 18.9%	12.9%	48.2%	48.2%	12.5%	12.5%
Allergy/Immunology	5.4%	\$424,954	4.6%	(3.5%) - 14.4%	5.4%	14.5%	14.5%	19.0%	19.0%
Ophthalmology	0.4%	\$377,789	0.4%	(0.4%) - 1.2%	0.4%	19.7%	19.7%	1.1%	1.1%
Vascular Surgery	1.1%	\$324,202	1.5%	(1.8%) - 4.1%	1.1%	55.1%	55.1%	12.5%	12.5%
Clinical Laboratory (Billing Independently)	0.3%	\$133,323	0.3%	(0.3%) - 0.9%	0.3%	16.3%	14.8%	2.2%	0.3%
Plastic and Reconstructive Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	29.6%	29.6%	0.0%	0.0%
Thoracic Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Nuclear Medicine	0.0%	\$0		0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pediatric Medicine	0.0%	\$0		0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Independent Diagnostic Testing Facility (IDTF)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	10.8%	10.8%	0.0%	0.0%
Ambulatory Surgical Center	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	41.1%	41.1%	0.0%	0.0%
Public Health or Welfare Agencies (Federal, State,	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Occupational Therapist in Private Practice	0.0%	\$0		0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

## BCBS AR AR/MO

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Clinical Psychologist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	67.2%	67.2%	0.0%	0.0%
Pain Management	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	34.5%	34.5%	0.0%	0.0%
Cardiac Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Clinical Social Worker	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	49.4%	49.4%	0.0%	0.0%
Critical Care (Intensivists)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Hematology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.6%	0.6%	0.0%	0.0%
Clinical Nurse Specialist	0.0%	\$0		0.0% - 0.0%	0.0%	37.5%	37.5%	0.0%	0.0%
Interventional Radiology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	39.9%	39.9%	0.0%	0.0%
Physician Assistant	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
All Types	10.6%	\$243,035,358	1.4%	7.8% - 13.4%	7.8%	23.7%	21.6%	12.2%	8.8%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## BCBS AR NM/OK/LA

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Internal Medicine	22.2%	\$58,883,413	3.9%	14.5% - 30.0%	14.6%	27.5%	20.9%	20.3%	13.1%
Cardiology	11.7%	\$26,599,270	3.3%	5.3% - 18.2%	9.1%	26.4%	24.6%	14.8%	12.5%
Family Practice	15.8%	\$24,317,128	3.8%	8.2% - 23.3%	9.9%	26.1%	21.6%	14.6%	9.6%
Diagnostic Radiology	15.7%	\$15,923,670	5.7%	4.5% - 27.0%	7.6%	24.5%	18.0%	14.7%	7.4%
Medical Oncology	34.9%	\$14,913,592	16.0%	3.5% - 66.2%	20.2%	35.7%	21.5%	31.9%	8.6%
Independent Diagnostic Testing Facility (IDTF)	29.4%	\$13,034,314	23.1%	(15.8%) - 74.6%	29.4%	45.5%	45.5%	8.7%	8.7%
Nephrology	20.1%	\$12,209,413	8.8%	2.8% - 37.3%	16.5%	29.4%	26.7%	18.2%	15.6%
Gastroenterology	16.3%	\$10,893,168	7.5%	1.5% - 31.0%	3.9%	34.6%	27.3%	18.9%	10.4%
Pulmonary Disease	24.2%	\$10,387,296	8.3%	7.9% - 40.6%	16.5%	33.6%	27.8%	26.2%	19.6%
Certified Registered Nurse Anesthetist (CRNA)	25.7%	\$8,724,514	10.9%	4.4% - 47.0%	3.2%	28.6%	8.1%	26.1%	5.6%
Emergency Medicine	15.3%	\$8,408,463	6.7%	2.2% - 28.4%	6.4%	26.9%	20.3%	17.1%	9.4%
Radiation Oncology	31.6%	\$7,852,098	26.4%	(20.1%) - 83.3%	31.6%	31.6%	31.6%	37.5%	37.5%
Hematology/Oncology	15.6%	\$7,510,444	10.5%	(5.0%) - 36.2%	15.2%	20.0%	18.2%	23.5%	11.9%
Anesthesiology	16.3%	\$6,950,745	9.0%	(1.3%) - 33.9%	2.1%	32.7%	23.8%	20.0%	5.3%
Psychiatry	19.0%	\$6,278,749	9.4%	0.6% - 37.4%	17.7%	41.7%	41.0%	15.3%	13.8%
Orthopedic Surgery	8.0%	\$6,015,452	3.4%	1.3% - 14.8%	7.5%	36.4%	31.6%	20.9%	16.0%
Physical Medicine and Rehabilitation	19.7%	\$4,872,119	9.5%	1.0% - 38.3%	13.7%	30.8%	26.4%	15.0%	12.8%

**BCBS AR NM/OK/LA**

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Urology	5.6%	\$4,692,301	5.1%	(4.5%) - 15.6%	5.6%	13.0%	13.0%	8.1%	8.1%
Clinical Laboratory (Billing Independently)	8.2%	\$4,349,932	2.9%	2.5% - 14.0%	2.9%	25.7%	22.2%	8.0%	1.2%
Allergy/Immunology	68.2%	\$3,961,953	16.5%	35.9% -100.4%	63.7%	68.2%	63.7%	50.0%	45.5%
Neurology	18.4%	\$3,691,273	8.8%	1.2% - 35.5%	16.0%	21.6%	19.5%	20.0%	15.8%
General Practice	12.5%	\$3,675,673	4.8%	3.1% - 21.8%	10.8%	26.3%	25.1%	16.2%	13.9%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	2.1%	\$3,478,350	2.2%	(2.1%) - 6.4%	2.1%	19.4%	19.4%	1.3%	1.3%
Podiatry	12.8%	\$3,444,649	7.3%	(1.5%) - 27.1%	12.8%	28.8%	28.8%	15.2%	15.2%
Obstetrics/Gynecology	38.3%	\$2,674,527	21.8%	(4.3%) - 80.9%	0.0%	46.2%	19.2%	15.8%	0.0%
Infectious Disease	22.1%	\$2,601,290	12.8%	(3.1%) - 47.3%	15.9%	40.3%	36.8%	22.7%	19.0%
Ophthalmology	2.0%	\$2,426,830	1.4%	(0.7%) - 4.7%	0.9%	13.6%	12.8%	5.3%	4.3%
Pathology	15.8%	\$1,876,420	10.8%	(5.4%) - 37.0%	2.3%	23.0%	11.8%	27.8%	7.1%
Chiropractic	26.4%	\$1,677,310	12.4%	2.0% - 50.8%	26.4%	65.4%	65.4%	11.1%	11.1%
Vascular Surgery	17.0%	\$1,401,986	21.6%	(25.4%) - 59.4%	17.0%	17.0%	17.0%	50.0%	50.0%
Otolaryngology	8.1%	\$1,230,861	8.1%	(7.7%) - 23.9%	8.1%	25.6%	25.6%	3.8%	3.8%
Physician Assistant	7.8%	\$1,202,995	5.8%	(3.6%) - 19.2%	4.9%	22.4%	20.4%	5.6%	2.9%
Interventional Radiology	19.7%	\$1,109,395	18.0%	(15.6%) - 55.0%	2.3%	19.7%	2.3%	33.3%	11.1%
Critical Care (Intensivists)	38.5%	\$838,238	19.3%	0.6% - 76.4%	38.5%	38.5%	38.5%	50.0%	50.0%
Optometry	5.1%	\$643,058	5.2%	(5.1%) - 15.4%	5.1%	13.7%	13.7%	5.0%	5.0%
Neurosurgery	8.5%	\$550,291	12.2%	(15.3%) - 32.4%	8.5%	8.5%	8.5%	50.0%	50.0%
Nurse Practitioner	5.9%	\$517,186	5.9%	(5.6%) - 17.3%	5.9%	33.7%	33.7%	3.6%	3.6%
Physical Therapist in Private Practice	1.6%	\$417,035	1.6%	(1.6%) - 4.7%	0.0%	37.2%	36.5%	8.3%	5.7%
General Surgery	1.6%	\$404,769	1.9%	(2.0%) - 5.3%	1.6%	17.0%	17.0%	3.8%	3.8%
Thoracic Surgery	5.5%	\$394,290	7.6%	(9.3%) - 20.3%	5.5%	5.5%	5.5%	16.7%	16.7%
Nuclear Medicine	100.0%	\$391,789		0.0% - 0.0%		100.0%		100.0%	
Endocrinology	4.0%	\$279,492	4.3%	(4.5%) - 12.5%	4.0%	16.1%	16.1%	4.3%	4.3%
Dermatology	0.2%	\$106,343	0.2%	(0.2%) - 0.7%	0.2%	10.2%	10.2%	1.5%	1.5%
Other Provider Types	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	6.0%	6.0%	37.1%	37.1%
Osteopathic Manipulative Therapy	0.0%	\$0		0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Plastic and Reconstructive Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Ambulatory Surgical Center	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	11.2%	11.2%	0.0%	0.0%
Public Health or Welfare Agencies (Federal, State,	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Rheumatology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	34.3%	34.3%	0.0%	0.0%
Occupational Therapist in Private Practice	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	59.0%	59.0%	0.0%	0.0%
Clinical Psychologist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	44.2%	44.2%	0.0%	0.0%



**BCBS AR NM/OK/LA**

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Multispecialty Clinic or Group Practice	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	23.3%	23.3%	0.0%	0.0%
Pain Management	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	55.0%	55.0%	0.0%	0.0%
Mass Immunization Roster Billers (Mass Immunizers)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Cardiac Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	100.0%	100.0%
Clinical Social Worker	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	69.3%	69.3%	0.0%	0.0%
Hematology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Gynecological/Oncology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	16.7%	16.7%
Portable X-Ray Supplier (Billing Independently)	-0.7%	-\$79,072	0.7%	(2.1%) - 0.7%	-0.7%	14.0%	14.0%	4.5%	4.5%
Geriatric Medicine	-11.7%	-\$511,469	12.8%	(36.8%) - 13.4%	-11.7%	-11.7%	-11.7%	16.7%	16.7%
All Types	12.7%	\$291,221,542	1.2%	10.3% - 15.0%	8.4%	25.5%	22.1%	14.2%	9.3%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

**BCBS KS KS/NE/Kansas City**

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Internal Medicine	13.5%	\$20,996,788	2.9%	7.9% - 19.2%	9.9%	22.1%	19.1%	16.4%	12.6%
General Surgery	28.7%	\$14,526,036	17.6%	(5.8%) - 63.2%	22.8%	35.6%	30.8%	12.2%	5.3%
Family Practice	9.5%	\$11,657,247	3.2%	3.2% - 15.8%	5.4%	17.7%	14.3%	11.7%	10.5%
Cardiology	6.2%	\$9,767,466	2.0%	2.2% - 10.2%	2.7%	7.6%	4.2%	15.3%	9.7%
Ophthalmology	7.2%	\$8,925,086	4.5%	(1.7%) - 16.1%	3.1%	14.1%	10.6%	5.6%	4.8%
Diagnostic Radiology	7.8%	\$6,920,325	4.5%	(1.1%) - 16.7%	6.1%	13.7%	12.2%	9.5%	7.0%
Anesthesiology	21.2%	\$5,604,558	9.6%	2.3% - 40.0%	3.5%	28.2%	13.8%	25.6%	9.4%
Urology	10.7%	\$4,472,646	8.0%	(5.0%) - 26.3%	8.8%	14.6%	12.9%	11.8%	8.2%
Medical Oncology	3.5%	\$3,264,241	2.6%	(1.5%) - 8.5%	2.5%	5.1%	4.2%	13.5%	4.9%
Otolaryngology	9.4%	\$2,765,757	7.0%	(4.4%) - 23.2%	9.4%	11.3%	11.3%	10.8%	10.8%
Pulmonary Disease	19.2%	\$2,634,020	9.8%	0.1% - 38.4%	9.3%	21.2%	11.7%	24.3%	15.2%
Physical Medicine and Rehabilitation	9.8%	\$1,542,759	6.5%	(3.0%) - 22.6%	9.8%	15.2%	15.2%	9.8%	9.8%
Podiatry	5.3%	\$1,487,755	3.5%	(1.6%) - 12.2%	4.7%	5.3%	4.7%	9.2%	7.8%
Certified Registered Nurse Anesthetist (CRNA)	8.5%	\$1,360,829	6.3%	(3.8%) - 20.9%	4.6%	8.5%	4.6%	15.4%	8.3%
Nurse Practitioner	12.1%	\$1,141,695	6.8%	(1.3%) - 25.4%	12.1%	16.0%	16.0%	16.2%	16.2%
Emergency Medicine	4.3%	\$1,068,409	2.5%	(0.6%) - 9.3%	2.5%	19.2%	17.9%	11.8%	10.0%

**BCBS KS KS/NE/Kansas City**

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Chiropractic	5.8%	\$1,025,352	2.8%	0.3% - 11.2%	2.5%	17.8%	15.2%	11.7%	9.9%
Nephrology	6.0%	\$904,440	4.8%	(3.5%) - 15.4%	1.5%	14.5%	10.8%	22.2%	20.0%
General Practice	4.4%	\$821,613	3.2%	(2.0%) - 10.8%	4.4%	21.1%	21.1%	6.4%	6.4%
Orthopedic Surgery	1.6%	\$806,779	1.0%	(0.4%) - 3.7%	1.6%	5.0%	5.0%	3.9%	3.9%
Physical Therapist in Private Practice	9.2%	\$785,612	7.5%	(5.6%) - 24.0%	9.2%	20.2%	20.2%	5.9%	5.9%
Endocrinology	11.9%	\$778,716	10.1%	(7.8%) - 31.6%	11.9%	13.6%	13.6%	6.9%	6.9%
Psychiatry	5.9%	\$751,855	4.1%	(2.1%) - 13.9%	2.7%	36.4%	34.9%	10.0%	6.9%
Geriatric Medicine	24.3%	\$751,695	13.1%	(1.3%) - 49.9%	24.3%	36.0%	36.0%	25.0%	25.0%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	0.9%	\$681,537	1.0%	(1.0%) - 2.8%	0.9%	4.9%	4.9%	11.3%	11.3%
Radiation Oncology	7.9%	\$681,537	8.6%	(8.9%) - 24.6%	7.9%	7.9%	7.9%	8.3%	8.3%
Clinical Laboratory (Billing Independently)	1.4%	\$680,094	0.9%	(0.4%) - 3.2%	0.7%	8.4%	7.8%	6.5%	6.1%
Infectious Disease	26.0%	\$662,133	20.9%	(15.0%) - 67.0%	8.2%	26.7%	9.2%	37.5%	16.7%
Dermatology	1.9%	\$623,406	2.4%	(2.8%) - 6.5%	1.9%	15.9%	15.9%	3.1%	3.1%
Gastroenterology	1.0%	\$525,345	1.4%	(1.8%) - 3.7%	1.0%	2.3%	2.3%	14.3%	14.3%
Independent Diagnostic Testing Facility (IDTF)	55.4%	\$400,744	40.4%	(23.7%) -134.5%	0.0%	93.1%	92.5%	16.7%	0.0%
Clinical Nurse Specialist	100.0%	\$258,022	0.0%	0.0% - 0.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Hematology/Oncology	0.4%	\$221,940	1.0%	(1.5%) - 2.4%	0.4%	1.3%	1.3%	3.1%	3.1%
Rheumatology	0.2%	\$142,722	0.2%	(0.2%) - 0.7%	0.2%	0.8%	0.8%	9.4%	9.4%
Other Provider Types	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	50.0%	50.0%
Allergy/Immunology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Osteopathic Manipulative Therapy	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Neurology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Neurosurgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	33.3%	33.3%
Obstetrics/Gynecology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pathology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	15.7%	15.7%	0.0%	0.0%
Plastic and Reconstructive Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Thoracic Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	9.2%	9.2%	0.0%	0.0%
Nuclear Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pediatric Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Ambulatory Surgical Center	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	50.0%	50.0%
Public Health or Welfare Agencies (Federal, State,	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	7.1%	7.1%
Portable X-Ray Supplier (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	3.7%	3.7%	0.0%	0.0%
Audiologist (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	59.5%	59.5%	0.0%	0.0%
Clinical Psychologist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	33.3%	33.3%	0.0%	0.0%



## BCBS KS KS/NE/Kansas City

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Multispecialty Clinic or Group Practice	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pain Management	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Mass Immunization Roster Billers (Mass Immunizers)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Vascular Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	1.3%	1.3%	0.0%	0.0%
Cardiac Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Clinical Social Worker	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	26.1%	26.1%	0.0%	0.0%
Interventional Radiology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Physician Assistant	-4.2%	-\$191,151	4.1%	(12.3%) - 3.9%	-4.2%	3.6%	3.6%	20.0%	14.3%
Optometry	-2.9%	-\$341,410	2.7%	(8.2%) - 2.3%	-2.9%	0.1%	0.1%	8.8%	8.8%
All Types	6.9%	\$109,106,596	1.0%	4.8% - 8.9%	4.4%	13.0%	10.9%	10.9%	8.7%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## BCBS MT

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Internal Medicine	9.8%	\$1,915,131	2.3%	5.2% - 14.4%	8.1%	16.8%	15.4%	11.8%	9.5%
Medical Oncology	14.0%	\$1,538,299	11.4%	(8.2%) - 36.3%	14.0%	15.2%	15.2%	15.7%	15.7%
Family Practice	8.9%	\$1,129,769	3.1%	2.9% - 14.9%	7.2%	15.7%	14.2%	8.1%	7.1%
Physical Therapist in Private Practice	19.8%	\$840,261	8.5%	3.1% - 36.5%	19.8%	39.6%	39.6%	16.7%	16.7%
Ophthalmology	4.7%	\$721,944	3.8%	(2.8%) - 12.3%	4.5%	12.5%	12.4%	7.4%	4.6%
General Surgery	10.4%	\$618,045	6.6%	(2.5%) - 23.4%	10.4%	23.1%	23.1%	25.0%	25.0%
Chiropractic	12.6%	\$359,487	4.6%	3.7% - 21.6%	11.7%	38.8%	38.4%	10.5%	9.9%
Diagnostic Radiology	3.4%	\$336,614	1.5%	0.4% - 6.3%	2.1%	10.5%	9.1%	5.2%	3.3%
Nephrology	14.1%	\$311,750	8.4%	(2.5%) - 30.6%	14.1%	24.7%	24.7%	14.0%	14.0%
Orthopedic Surgery	2.3%	\$278,756	1.4%	(0.5%) - 5.0%	2.3%	17.3%	17.3%	4.8%	4.8%
Emergency Medicine	7.7%	\$225,153	5.2%	(2.5%) - 17.9%	4.9%	9.4%	6.7%	22.2%	17.6%
Certified Registered Nurse Anesthetist (CRNA)	11.9%	\$204,428	6.2%	(0.2%) - 24.0%	11.9%	21.2%	21.2%	26.7%	26.7%
Dermatology	3.4%	\$198,952	2.8%	(2.0%) - 8.7%	3.4%	36.2%	36.2%	8.1%	8.1%
Psychiatry	26.7%	\$184,704	21.3%	(15.0%) - 68.5%	26.7%	49.5%	49.5%	6.7%	6.7%
Occupational Therapist in Private Practice	26.1%	\$180,691	38.6%	(49.5%) -101.8%	26.1%	26.1%	26.1%	54.5%	54.5%
Nurse Practitioner	6.1%	\$164,642	4.0%	(1.8%) - 14.0%	6.1%	14.9%	14.9%	8.1%	8.1%
Rheumatology	12.2%	\$142,980	6.7%	(1.0%) - 25.4%	12.2%	12.7%	12.7%	19.2%	19.2%

**BCBS MT**

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Neurosurgery	13.7%	\$141,632	11.1%	(8.1%) - 35.5%	13.7%	87.7%	87.7%	14.3%	14.3%
Cardiology	1.3%	\$116,336	0.9%	(0.5%) - 3.1%	1.1%	16.3%	16.1%	3.7%	2.7%
Physician Assistant	4.9%	\$109,565	7.3%	(9.3%) - 19.2%	4.9%	48.9%	48.9%	10.8%	10.8%
Neurology	4.0%	\$107,532	2.9%	(1.7%) - 9.7%	4.0%	12.4%	12.4%	11.1%	11.1%
Physical Medicine and Rehabilitation	6.2%	\$93,158	4.4%	(2.3%) - 14.8%	6.2%	21.2%	21.2%	17.4%	17.4%
Pulmonary Disease	5.7%	\$76,561	5.6%	(5.4%) - 16.7%	5.7%	17.0%	17.0%	11.8%	11.8%
Radiation Oncology	3.6%	\$63,850	3.9%	(4.0%) - 11.2%	3.6%	3.6%	3.6%	4.8%	4.8%
Optometry	2.0%	\$60,732	1.8%	(1.6%) - 5.6%	0.2%	12.6%	11.5%	7.0%	2.9%
Urology	0.5%	\$41,819	0.5%	(0.5%) - 1.5%	0.5%	6.1%	6.1%	2.8%	2.8%
Pathology	1.9%	\$39,407	2.0%	(2.0%) - 5.8%	0.0%	9.3%	7.7%	2.1%	0.0%
Endocrinology	8.7%	\$37,638	8.0%	(7.0%) - 24.3%	1.4%	37.1%	33.8%	13.3%	7.1%
Otolaryngology	3.1%	\$33,268	2.3%	(1.5%) - 7.6%	1.3%	11.8%	10.4%	9.5%	5.0%
Podiatry	0.1%	\$1,601	1.7%	(3.2%) - 3.3%	-1.1%	20.2%	19.4%	2.9%	1.4%
Vascular Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Thoracic Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	100.0%	100.0%	0.0%	0.0%
Public Health or Welfare Agencies (Federal, State,	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Plastic and Reconstructive Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Other Provider Types	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	6.2%	6.2%	0.0%	0.0%
Obstetrics/Gynecology	0.0%	\$0		0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Multispecialty Clinic or Group Practice	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	43.2%	43.2%	0.0%	0.0%
Mass Immunization Roster Billers (Mass Immunizers	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	61.2%	61.2%	0.0%	0.0%
Interventional Radiology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	5.0%	5.0%	0.0%	0.0%
Independent Diagnostic Testing Facility (IDTF)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Hematology/Oncology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	19.2%	19.2%	0.0%	0.0%
Hematology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Gastroenterology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	39.0%	39.0%	0.0%	0.0%
Clinical Social Worker	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	39.6%	39.6%	0.0%	0.0%
Clinical Psychologist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	38.1%	38.1%	0.0%	0.0%
Clinical Laboratory (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	23.5%	23.5%	0.0%	0.0%
Anesthesiology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	8.9%	8.9%	2.9%	2.9%
Ambulatory Surgical Center	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	22.4%	22.4%	0.0%	0.0%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Allergy/Immunology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
General Practice	-0.1%	-\$2,317	2.0%	(4.0%) - 3.8%	-0.1%	3.9%	3.9%	15.7%	15.7%

## BCBS MT

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Infectious Disease	-64.5%	-\$20,493	0.0%	0.0% - 0.0%	-64.5%	-64.5%	-64.5%	100.0%	100.0%
All Types	5.3%	\$10,251,897	0.9%	3.6% - 7.0%	4.8%	20.7%	20.3%	8.7%	7.6%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## BCBS RI

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Internal Medicine	21.4%	\$8,511,798	2.8%	15.9% - 26.9%	12.5%	29.3%	22.0%	21.2%	13.3%
Gynecological/Oncology	100.0%	\$2,389,947	0.0%	0.0% - 0.0%	0.0%	100.0%	0.0%	100.0%	0.0%
Cardiology	11.8%	\$2,034,189	2.8%	6.4% - 17.2%	9.2%	25.0%	23.1%	19.6%	14.1%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	14.5%	\$1,953,567	5.9%	2.9% - 26.0%	5.7%	32.4%	27.0%	16.0%	8.3%
Emergency Medicine	28.3%	\$1,747,553	7.3%	14.0% - 42.6%	7.4%	36.6%	20.9%	28.6%	11.8%
Physical Therapist in Private Practice	38.2%	\$1,646,487	9.9%	18.8% - 57.6%	33.6%	48.4%	45.2%	36.2%	34.8%
Ophthalmology	12.2%	\$1,472,846	8.6%	(4.6%) - 29.0%	11.0%	33.8%	33.1%	9.1%	7.0%
Physical Medicine and Rehabilitation	50.6%	\$1,350,645	22.2%	7.1% - 94.1%	40.6%	53.4%	44.6%	42.3%	25.0%
General Surgery	11.4%	\$1,218,039	5.4%	0.8% - 22.1%	8.9%	27.0%	25.3%	18.2%	16.0%
Medical Oncology	51.1%	\$1,212,503	33.7%	(14.9%) - 117.1%	0.0%	52.9%	7.4%	15.8%	0.0%
Hematology/Oncology	10.4%	\$747,281	6.0%	(1.4%) - 22.1%	10.4%	51.4%	51.4%	12.8%	12.8%
Psychiatry	17.3%	\$637,653	8.4%	0.9% - 33.7%	8.3%	38.4%	33.4%	8.6%	5.4%
Anesthesiology	15.7%	\$629,355	10.7%	(5.2%) - 36.6%	9.9%	15.7%	9.9%	9.1%	4.8%
Orthopedic Surgery	7.4%	\$619,972	3.4%	0.9% - 14.0%	7.0%	15.7%	15.3%	17.1%	16.0%
Gastroenterology	17.7%	\$549,338	8.6%	0.9% - 34.5%	9.1%	31.0%	25.1%	33.3%	25.0%
Pulmonary Disease	19.8%	\$545,416	9.2%	1.8% - 37.8%	17.8%	22.7%	20.9%	13.2%	10.8%
Clinical Laboratory (Billing Independently)	9.3%	\$516,019	2.6%	4.2% - 14.3%	5.5%	26.4%	23.0%	7.6%	5.2%
Podiatry	9.1%	\$482,323	3.0%	3.2% - 15.0%	6.0%	37.2%	35.8%	12.1%	8.1%
Neurology	14.2%	\$324,331	8.5%	(2.5%) - 30.8%	9.0%	23.9%	19.9%	44.4%	37.5%
Family Practice	5.7%	\$252,713	2.9%	(0.0%) - 11.4%	2.9%	13.5%	11.1%	8.5%	5.1%
Infectious Disease	58.4%	\$241,136	30.4%	(1.3%) - 118.0%	0.0%	75.5%	62.7%	44.4%	16.7%
Plastic and Reconstructive Surgery	15.1%	\$227,340	15.4%	(15.2%) - 45.4%	15.1%	47.6%	47.6%	28.6%	28.6%
Nurse Practitioner	11.8%	\$221,148	6.4%	(0.7%) - 24.4%	2.3%	24.2%	17.3%	19.4%	10.7%
Urology	2.1%	\$175,861	2.1%	(2.1%) - 6.2%	0.3%	7.5%	5.9%	10.9%	8.9%

**BCBS RI**

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Optometry	5.3%	\$169,795	4.0%	(2.5%) - 13.2%	1.6%	28.7%	26.6%	4.4%	2.3%
General Practice	14.9%	\$154,132	8.8%	(2.5%) - 32.2%	9.0%	31.2%	27.4%	20.0%	15.8%
Rheumatology	1.5%	\$145,027	1.4%	(1.2%) - 4.3%	1.5%	1.8%	1.8%	11.4%	11.4%
Nephrology	5.0%	\$144,031	5.1%	(4.9%) - 15.0%	5.0%	24.2%	24.2%	3.4%	3.4%
Chiropractic	7.6%	\$139,642	5.5%	(3.1%) - 18.3%	7.6%	14.3%	14.3%	9.3%	9.3%
Otolaryngology	5.4%	\$120,827	4.3%	(3.0%) - 13.9%	5.4%	16.8%	16.8%	5.7%	5.7%
Public Health or Welfare Agencies (Federal, State,	100.0%	\$119,187	0.0%	0.0% - 0.0%	0.0%	100.0%	0.0%	100.0%	0.0%
Pathology	6.9%	\$106,009	5.2%	(3.3%) - 17.2%	3.6%	6.9%	3.6%	18.2%	14.3%
Occupational Therapist in Private Practice	100.0%	\$105,176	0.0%	0.0% - 0.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Clinical Nurse Specialist	23.2%	\$94,583	22.2%	(20.2%) - 66.7%	0.0%	57.5%	51.3%	14.3%	0.0%
Obstetrics/Gynecology	7.2%	\$90,144	6.7%	(5.9%) - 20.3%	7.2%	35.7%	35.7%	9.5%	9.5%
Dermatology	2.4%	\$76,310	1.8%	(1.1%) - 5.8%	0.9%	18.4%	17.3%	3.6%	1.8%
Physician Assistant	9.7%	\$65,968	6.2%	(2.4%) - 21.8%	3.0%	35.4%	32.1%	14.3%	5.3%
Diagnostic Radiology	0.3%	\$56,144	0.3%	(0.2%) - 0.9%	0.1%	17.4%	17.1%	1.1%	0.4%
Radiation Oncology	0.7%	\$54,328	0.8%	(0.8%) - 2.3%	0.7%	19.2%	19.2%	3.7%	3.7%
Thoracic Surgery	6.4%	\$37,001	9.4%	(12.1%) - 24.8%	6.4%	6.4%	6.4%	33.3%	33.3%
Allergy/Immunology	3.2%	\$13,116	4.9%	(6.5%) - 12.9%	3.2%	4.4%	4.4%	16.7%	16.7%
Portable X-Ray Supplier (Billing Independently)	0.0%	\$1,198	0.1%	(0.2%) - 0.3%	0.0%	18.0%	18.0%	9.6%	9.6%
Other Provider Types	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	51.7%	51.7%	80.0%	80.0%
Pediatric Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Geriatric Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	100.0%	100.0%	0.0%	0.0%
Certified Registered Nurse Anesthetist (CRNA)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	39.9%	39.9%	0.0%	0.0%
Independent Diagnostic Testing Facility (IDTF)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Ambulatory Surgical Center	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	50.0%	50.0%
Audiologist (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Clinical Psychologist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	19.1%	19.1%	0.0%	0.0%
Vascular Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Clinical Social Worker	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	38.8%	38.8%	0.0%	0.0%
Interventional Radiology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	20.6%	20.6%	0.0%	0.0%
Endocrinology	-1.8%	-\$18,122	1.9%	(5.5%) - 1.9%	-1.8%	17.2%	17.2%	3.8%	3.8%
All Types	13.5%	\$31,381,956	1.5%	10.5% - 16.5%	7.6%	27.8%	23.7%	14.3%	10.0%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

**BCBS UT**

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Internal Medicine	18.8%	\$5,140,527	4.6%	9.8% - 27.8%	14.3%	29.6%	26.4%	34.7%	30.7%
Urology	22.2%	\$4,445,926	10.6%	1.4% - 42.9%	13.4%	30.9%	24.1%	33.8%	27.9%
Physical Medicine and Rehabilitation	39.1%	\$1,795,636	16.7%	6.3% - 71.9%	13.7%	49.6%	33.4%	26.5%	10.0%
Hematology/Oncology	15.6%	\$1,760,632	11.1%	(6.1%) - 37.3%	8.0%	45.8%	42.7%	23.4%	22.0%
Family Practice	9.9%	\$1,749,778	3.7%	2.5% - 17.2%	9.3%	20.5%	20.1%	16.7%	16.2%
Nephrology	69.8%	\$1,606,519	14.0%	42.3% - 97.2%	48.3%	73.1%	57.4%	48.0%	35.0%
Physical Therapist in Private Practice	26.6%	\$1,540,015	8.7%	9.5% - 43.6%	24.8%	43.5%	41.8%	37.8%	36.9%
Emergency Medicine	15.5%	\$1,411,755	6.3%	3.1% - 27.8%	7.6%	27.5%	21.7%	28.6%	25.7%
Gastroenterology	20.5%	\$1,255,771	9.7%	1.5% - 39.5%	14.5%	29.7%	25.1%	28.2%	26.3%
Independent Diagnostic Testing Facility (IDTF)	19.1%	\$1,115,263	17.1%	(14.5%) - 52.6%	19.1%	33.8%	33.8%	9.1%	9.1%
Cardiology	3.7%	\$861,916	1.3%	1.2% - 6.1%	3.1%	14.2%	13.7%	27.9%	26.5%
Ophthalmology	4.7%	\$860,156	3.0%	(1.1%) - 10.6%	4.7%	28.6%	28.6%	20.3%	20.3%
Certified Registered Nurse Anesthetist (CRNA)	22.9%	\$846,056	16.0%	(8.5%) - 54.4%	22.9%	32.4%	32.4%	26.3%	26.3%
Chiropractic	38.4%	\$815,636	11.6%	15.6% - 61.2%	38.4%	67.5%	67.5%	25.3%	25.3%
Anesthesiology	7.8%	\$521,620	6.3%	(4.6%) - 20.2%	3.6%	47.7%	46.3%	29.4%	25.0%
General Surgery	8.2%	\$514,249	5.1%	(1.7%) - 18.2%	8.2%	27.6%	27.6%	32.4%	32.4%
Podiatry	7.7%	\$393,140	4.9%	(2.0%) - 17.4%	1.3%	27.5%	23.5%	28.0%	24.7%
General Practice	15.5%	\$371,981	6.0%	3.8% - 27.2%	15.5%	32.5%	32.5%	27.3%	27.3%
Clinical Laboratory (Billing Independently)	6.8%	\$330,908	2.6%	1.6% - 11.9%	3.0%	24.4%	21.9%	15.6%	13.3%
Dermatology	2.4%	\$277,569	2.2%	(1.9%) - 6.6%	2.4%	8.5%	8.5%	18.9%	18.9%
Endocrinology	63.2%	\$240,090	46.5%	(27.9%) -154.4%	63.2%	63.2%	63.2%	85.7%	85.7%
Diagnostic Radiology	2.1%	\$231,674	1.1%	(0.2%) - 4.3%	0.9%	16.7%	15.9%	18.1%	16.5%
Neurology	3.9%	\$197,258	2.5%	(1.1%) - 8.8%	3.9%	15.1%	15.1%	14.8%	14.8%
Obstetrics/Gynecology	3.5%	\$187,393	2.8%	(2.0%) - 9.0%	3.5%	4.5%	4.5%	30.8%	30.8%
Pulmonary Disease	3.6%	\$137,519	2.9%	(2.0%) - 9.2%	1.0%	4.8%	2.3%	25.5%	23.9%
Other Provider Types	18.5%	\$130,332	13.2%	(7.4%) - 44.5%	18.5%	25.7%	25.7%	38.5%	38.5%
Medical Oncology	4.4%	\$103,598	5.6%	(6.5%) - 15.3%	4.4%	4.4%	4.4%	9.1%	9.1%
Orthopedic Surgery	1.3%	\$102,461	1.2%	(1.0%) - 3.7%	0.5%	11.8%	11.2%	20.3%	17.9%
Rheumatology	8.9%	\$100,462	5.0%	(1.0%) - 18.8%	8.9%	11.1%	11.1%	15.8%	15.8%
Geriatric Medicine	18.5%	\$99,546	19.0%	(18.8%) - 55.7%	0.0%	18.5%	0.0%	20.0%	0.0%
Vascular Surgery	6.2%	\$86,490	6.7%	(6.8%) - 19.3%	6.2%	8.5%	8.5%	30.8%	30.8%
Nurse Practitioner	1.1%	\$81,576	1.4%	(1.7%) - 3.8%	1.1%	29.3%	29.3%	24.4%	24.4%
Psychiatry	3.4%	\$57,300	3.3%	(3.1%) - 10.0%	3.4%	27.4%	27.4%	11.8%	11.8%
Allergy/Immunology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	16.7%	16.7%
Otolaryngology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	76.5%	76.5%	13.3%	13.3%

# BCBS UT

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Neurosurgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pathology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	21.7%	21.7%	24.4%	22.5%
Plastic and Reconstructive Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	48.1%	48.1%	0.0%	0.0%
Thoracic Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	20.1%	20.1%	0.0%	0.0%
Nuclear Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	52.5%	52.5%	50.0%	50.0%
Pediatric Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	66.7%	66.7%
Optometry	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	10.7%	10.7%	16.7%	16.7%
Infectious Disease	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	50.0%	50.0%
Ambulatory Surgical Center	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	31.0%	31.0%	17.4%	17.4%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	12.1%	12.1%	8.2%	8.2%
Public Health or Welfare Agencies (Federal, State,	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	15.0%	15.0%	3.7%	3.7%
Portable X-Ray Supplier (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	43.0%	43.0%	0.0%	0.0%
Audiologist (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	22.2%	22.2%
Occupational Therapist in Private Practice	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	31.8%	31.8%	0.0%	0.0%
Clinical Psychologist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	35.2%	35.2%	15.0%	15.0%
Pain Management	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Clinical Social Worker	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	43.2%	43.2%	19.4%	19.4%
Critical Care (Intensivists)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	78.1%	78.1%	60.0%	60.0%
Radiation Oncology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	24.6%	24.6%	30.0%	30.0%
Interventional Radiology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	32.8%	32.8%	0.0%	0.0%
Physician Assistant	-1.2%	-\$24,020	6.7%	(14.4%) - 12.0%	-3.8%	18.3%	16.8%	21.4%	17.5%
All Types	10.2%	\$29,346,734	1.2%	7.7% - 12.6%	7.1%	27.4%	25.4%	23.9%	21.9%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

# Cahaba GBA AL/GA/MS

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Internal Medicine	27.7%	\$128,552,812	8.7%	10.7% - 44.7%	23.0%	34.8%	31.0%	19.0%	16.9%
Cardiology	7.9%	\$26,773,629	4.2%	(0.3%) - 16.2%	6.5%	16.3%	15.1%	17.8%	14.3%
Nephrology	27.9%	\$25,451,219	11.6%	5.2% - 50.6%	7.0%	40.7%	27.3%	21.0%	3.9%
Family Practice	9.6%	\$22,445,248	2.4%	4.9% - 14.2%	7.6%	22.9%	21.6%	13.2%	11.3%



# Cahaba GBA AL/GA/MS

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Ophthalmology	11.9%	\$19,311,862	7.6%	(3.0%) - 26.9%	11.9%	22.3%	22.3%	8.3%	8.3%
Medical Oncology	19.2%	\$17,586,108	12.0%	(4.3%) - 42.6%	19.2%	20.1%	20.1%	26.5%	26.5%
Urology	10.4%	\$12,999,762	7.9%	(5.0%) - 25.8%	3.1%	18.8%	12.9%	13.2%	10.8%
Psychiatry	36.4%	\$12,104,927	13.4%	10.1% - 62.8%	0.0%	51.0%	31.0%	32.4%	0.0%
Pulmonary Disease	17.1%	\$12,086,128	9.3%	(1.1%) - 35.4%	8.9%	26.6%	20.3%	23.8%	15.8%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	11.1%	\$11,651,661	12.9%	(14.1%) - 36.3%	-0.5%	32.1%	25.6%	14.3%	5.9%
Anesthesiology	12.3%	\$11,516,098	6.2%	0.0% - 24.5%	12.3%	24.7%	24.7%	17.9%	17.9%
General Surgery	15.0%	\$11,456,986	8.9%	(2.4%) - 32.3%	15.0%	21.3%	21.3%	20.0%	20.0%
Clinical Laboratory (Billing Independently)	5.6%	\$10,079,223	2.1%	1.5% - 9.7%	3.1%	17.0%	15.1%	4.0%	2.4%
Physical Medicine and Rehabilitation	36.2%	\$9,995,463	17.9%	1.1% - 71.2%	23.9%	57.4%	52.3%	37.9%	30.8%
Diagnostic Radiology	5.3%	\$9,805,592	2.0%	1.5% - 9.2%	2.2%	13.7%	11.1%	7.8%	3.4%
Podiatry	15.6%	\$8,511,799	11.6%	(7.1%) - 38.4%	4.4%	18.0%	7.3%	12.5%	10.3%
Dermatology	10.0%	\$7,602,133	5.3%	(0.3%) - 20.3%	2.1%	20.8%	14.8%	14.9%	6.6%
Hematology/Oncology	2.1%	\$7,279,834	1.3%	(0.4%) - 4.6%	0.3%	4.4%	2.7%	8.9%	5.0%
Neurology	11.8%	\$7,193,776	5.6%	0.9% - 22.7%	12.1%	28.3%	28.7%	22.2%	20.5%
Radiation Oncology	7.8%	\$6,677,010	9.8%	(11.4%) - 26.9%	7.8%	34.4%	34.4%	23.8%	23.8%
Rheumatology	33.4%	\$6,529,542	16.4%	1.2% - 65.5%	33.4%	47.7%	47.7%	10.9%	10.9%
General Practice	14.8%	\$5,048,385	7.7%	(0.4%) - 30.0%	12.4%	15.1%	12.7%	14.3%	12.2%
Orthopedic Surgery	3.1%	\$4,841,177	2.1%	(1.0%) - 7.3%	2.0%	10.8%	9.8%	17.3%	14.1%
Emergency Medicine	6.7%	\$4,351,984	2.9%	1.0% - 12.3%	6.4%	27.4%	27.2%	11.8%	10.0%
Gastroenterology	3.4%	\$3,763,364	2.1%	(0.8%) - 7.6%	3.3%	10.3%	10.2%	9.3%	7.5%
Pathology	14.4%	\$3,584,982	10.4%	(5.9%) - 34.8%	10.6%	26.3%	23.5%	15.4%	10.8%
Otolaryngology	5.9%	\$2,868,528	4.5%	(3.0%) - 14.7%	1.1%	10.2%	5.9%	14.6%	5.4%
Certified Registered Nurse Anesthetist (CRNA)	5.8%	\$2,632,705	3.9%	(1.8%) - 13.4%	5.8%	8.1%	8.1%	21.1%	21.1%
Endocrinology	27.7%	\$2,350,092	10.9%	6.4% - 49.0%	20.9%	27.7%	20.9%	46.2%	41.7%
Physical Therapist in Private Practice	6.6%	\$2,334,426	6.8%	(6.7%) - 19.9%	6.6%	23.6%	23.6%	6.8%	6.8%
Critical Care (Intensivists)	9.7%	\$1,977,244	9.3%	(8.7%) - 28.0%	9.7%	9.7%	9.7%	22.2%	22.2%
Gynecological/Oncology	55.8%	\$1,947,792	49.3%	(40.8%) - 152.5%	55.8%	55.8%	55.8%	50.0%	50.0%
Vascular Surgery	5.9%	\$1,718,235	7.0%	(7.8%) - 19.7%	5.9%	18.7%	18.7%	17.6%	17.6%
Obstetrics/Gynecology	15.5%	\$1,710,297	14.6%	(13.0%) - 44.1%	15.5%	28.6%	28.6%	19.2%	19.2%
Other Provider Types	30.4%	\$1,337,658	28.8%	(26.1%) - 86.9%	30.4%	90.5%	90.5%	12.5%	12.5%
Neurosurgery	27.7%	\$1,327,632	14.4%	(0.6%) - 56.0%	27.7%	27.7%	27.7%	33.3%	33.3%
Pain Management	33.9%	\$983,400	38.8%	(42.2%) - 109.9%	0.0%	66.4%	59.4%	50.0%	33.3%
Infectious Disease	5.0%	\$647,106	5.2%	(5.2%) - 15.2%	5.0%	41.5%	41.5%	7.1%	7.1%
Independent Diagnostic Testing Facility (IDTF)	0.7%	\$629,978	0.8%	(1.0%) - 2.3%	0.0%	20.7%	20.3%	11.1%	0.0%
Optometry	1.5%	\$584,233	1.1%	(0.6%) - 3.6%	1.5%	13.0%	13.0%	5.0%	5.0%
Allergy/Immunology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

## Cahaba GBA AL/GA/MS

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Osteopathic Manipulative Therapy	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Plastic and Reconstructive Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	16.5%	16.5%	0.0%	0.0%
Thoracic Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	73.2%	73.2%	0.0%	0.0%
Chiropractic	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	42.2%	42.2%	3.6%	3.6%
Geriatric Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Ambulatory Surgical Center	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	30.8%	30.8%	0.0%	0.0%
Public Health or Welfare Agencies (Federal, State,	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	12.1%	12.1%	0.0%	0.0%
Portable X-Ray Supplier (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Clinical Psychologist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	37.5%	37.5%	0.0%	0.0%
Mass Immunization Roster Billers (Mass Immunizers	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Interventional Radiology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	100.0%	100.0%	0.0%	0.0%
Physician Assistant	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Nurse Practitioner	-6.4%	-\$894,000	7.5%	(21.2%) - 8.3%	-6.4%	14.2%	14.2%	15.4%	15.4%
All Types	11.1%	\$429,356,026	1.6%	7.9% - 14.3%	7.7%	23.5%	21.0%	13.1%	10.2%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## CIGNA ID/TN/NC

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Hematology/Oncology	21.9%	\$86,729,865	15.7%	(8.8%) - 52.6%	21.6%	28.3%	28.1%	9.5%	8.7%
Family Practice	21.5%	\$64,646,593	7.9%	5.9% - 37.0%	20.0%	29.6%	28.4%	15.1%	13.5%
Internal Medicine	12.7%	\$61,787,086	3.4%	6.0% - 19.3%	7.6%	22.2%	18.2%	16.1%	12.6%
Ambulatory Surgical Center	20.5%	\$46,031,959	13.3%	(5.7%) - 46.6%	0.0%	36.6%	24.3%	23.8%	15.8%
Cardiology	10.9%	\$42,253,164	3.5%	4.1% - 17.7%	10.8%	16.9%	16.9%	16.3%	15.9%
Otolaryngology	39.4%	\$19,113,172	20.5%	(0.7%) - 79.6%	12.2%	42.1%	17.7%	19.4%	13.8%
Physical Medicine and Rehabilitation	33.0%	\$18,689,191	11.2%	11.1% - 54.9%	29.6%	51.7%	50.0%	42.9%	41.2%
Radiation Oncology	13.0%	\$16,535,738	12.0%	(10.4%) - 36.5%	1.1%	13.5%	1.7%	6.1%	3.1%
Pulmonary Disease	18.8%	\$15,429,810	7.4%	4.4% - 33.2%	14.1%	24.1%	20.0%	21.4%	19.1%
Gastroenterology	11.9%	\$12,364,773	5.8%	0.5% - 23.3%	7.6%	19.4%	15.8%	23.6%	22.2%
Cardiac Surgery	18.3%	\$9,667,551	18.5%	(18.0%) - 54.6%	15.7%	18.3%	15.7%	50.0%	40.0%
Emergency Medicine	8.9%	\$9,079,049	3.7%	1.7% - 16.2%	5.1%	15.0%	11.7%	13.3%	8.8%
Diagnostic Radiology	3.8%	\$8,916,763	2.1%	(0.3%) - 7.9%	0.8%	10.7%	7.8%	6.4%	3.9%
Psychiatry	26.2%	\$8,414,001	10.8%	5.0% - 47.3%	7.3%	46.8%	30.0%	28.6%	4.8%



**CIGNA ID/TN/NC**

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Urology	4.5%	\$7,581,696	3.2%	(1.8%) - 10.8%	3.3%	11.3%	10.3%	12.9%	9.8%
Nephrology	7.3%	\$7,033,951	3.8%	(0.2%) - 14.8%	5.7%	25.6%	24.5%	14.0%	11.9%
Interventional Radiology	31.0%	\$6,830,162	24.4%	(16.7%) - 78.8%	1.7%	31.0%	1.7%	26.3%	6.7%
Ophthalmology	2.6%	\$6,417,862	1.6%	(0.5%) - 5.7%	2.0%	10.9%	10.4%	4.2%	3.4%
Endocrinology	23.0%	\$6,063,220	16.7%	(9.8%) - 55.8%	23.0%	23.0%	23.0%	20.0%	20.0%
Neurology	6.4%	\$5,849,738	5.6%	(4.5%) - 17.4%	5.2%	11.4%	10.3%	15.0%	12.8%
General Surgery	6.2%	\$5,813,206	4.5%	(2.7%) - 15.1%	4.6%	9.1%	7.5%	11.1%	5.9%
Anesthesiology	10.2%	\$5,735,418	5.6%	(0.8%) - 21.2%	8.2%	13.3%	11.5%	10.8%	8.3%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	3.4%	\$5,597,487	4.1%	(4.6%) - 11.4%	3.4%	23.0%	23.0%	7.1%	7.1%
Chiropractic	19.9%	\$5,566,173	8.5%	3.3% - 36.5%	19.9%	29.6%	29.6%	21.6%	21.6%
Clinical Laboratory (Billing Independently)	4.7%	\$5,418,302	2.8%	(0.8%) - 10.1%	2.2%	14.2%	12.2%	3.1%	2.7%
Pathology	9.2%	\$4,897,646	7.8%	(6.2%) - 24.5%	8.1%	34.8%	34.2%	6.5%	2.3%
Orthopedic Surgery	3.9%	\$4,814,639	2.4%	(0.7%) - 8.5%	3.9%	10.8%	10.8%	15.6%	15.6%
Podiatry	7.0%	\$4,519,891	6.6%	(6.0%) - 20.0%	1.0%	17.2%	12.5%	12.8%	4.7%
Clinical Psychologist	22.2%	\$4,260,184	19.2%	(15.4%) - 59.7%	22.2%	47.8%	47.8%	20.0%	20.0%
Clinical Social Worker	31.7%	\$3,977,862	17.6%	(2.8%) - 66.2%	29.8%	57.7%	56.5%	21.4%	15.4%
Optometry	5.8%	\$2,908,467	5.7%	(5.4%) - 17.1%	5.8%	5.8%	5.8%	2.9%	2.9%
Dermatology	3.1%	\$2,758,856	2.2%	(1.2%) - 7.3%	3.1%	5.4%	5.4%	4.3%	4.3%
Obstetrics/Gynecology	7.4%	\$2,305,301	5.1%	(2.5%) - 17.3%	7.4%	16.7%	16.7%	13.5%	13.5%
Physician Assistant	7.6%	\$2,199,679	5.6%	(3.4%) - 18.6%	7.6%	7.6%	7.6%	15.0%	15.0%
Physical Therapist in Private Practice	5.9%	\$2,180,045	5.6%	(5.0%) - 16.8%	5.9%	10.0%	10.0%	17.6%	17.6%
Certified Registered Nurse Anesthetist (CRNA)	3.6%	\$2,000,860	3.7%	(3.7%) - 10.9%	3.6%	6.5%	6.5%	5.0%	5.0%
General Practice	8.2%	\$1,532,394	5.1%	(1.8%) - 18.2%	5.3%	16.8%	14.4%	28.0%	14.3%
Nurse Practitioner	2.0%	\$1,155,881	2.4%	(2.6%) - 6.6%	0.9%	10.0%	8.5%	17.2%	15.9%
Medical Oncology	0.6%	\$443,614	0.5%	(0.4%) - 1.5%	0.4%	1.2%	1.1%	7.9%	5.4%
Allergy/Immunology	9.3%	\$422,241	10.6%	(11.5%) - 30.0%	9.3%	9.3%	9.3%	14.3%	14.3%
Multispecialty Clinic or Group Practice	1.5%	\$217,458	2.0%	(2.5%) - 5.5%	1.5%	1.5%	1.5%	9.1%	9.1%
Other Provider Types	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	40.0%	40.0%
Neurosurgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	7.0%	7.0%	0.0%	0.0%
Plastic and Reconstructive Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	33.3%	33.3%
Thoracic Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pediatric Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Geriatric Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	46.2%	46.2%	0.0%	0.0%
Infectious Disease	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	86.3%	86.3%	0.0%	0.0%

## CIGNA ID/TN/NC

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Independent Diagnostic Testing Facility (IDTF)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	19.0%	19.0%	0.0%	0.0%
Public Health or Welfare Agencies (Federal, State,	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Portable X-Ray Supplier (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Rheumatology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	1.2%	1.2%	0.0%	0.0%
Occupational Therapist in Private Practice	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Mass Immunization Roster Billers (Mass Immunizers	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Vascular Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Hematology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Clinical Nurse Specialist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	37.5%	37.5%	0.0%	0.0%
Gynecological/Oncology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Osteopathic Manipulative Therapy	-9.2%	-\$1,676,289	1.5%	(12.0%) - (6.3%)	-9.2%	-7.2%	-7.2%	9.1%	9.1%
All Types	10.9%	\$526,484,660	1.8%	7.4% - 14.5%	7.8%	19.5%	16.8%	12.5%	10.3%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## Empire NY/NJ

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Cardiology	18.5%	\$140,384,183	5.4%	7.9% - 29.0%	15.3%	26.3%	23.8%	15.2%	9.5%
Internal Medicine	10.0%	\$90,975,271	2.7%	4.7% - 15.3%	4.8%	20.7%	16.6%	12.7%	9.1%
Cardiac Surgery	95.8%	\$82,351,946	0.0%	0.0% - 0.0%	95.8%	95.8%	95.8%	100.0%	100.0%
Nephrology	25.2%	\$60,438,444	9.0%	7.6% - 42.8%	19.4%	27.2%	21.7%	31.8%	26.2%
Plastic and Reconstructive Surgery	42.8%	\$40,621,917	39.4%	(34.5%) - 120.1%	42.8%	58.6%	58.6%	54.5%	54.5%
Orthopedic Surgery	13.7%	\$39,949,463	8.3%	(2.5%) - 29.9%	6.7%	34.6%	30.8%	22.2%	18.8%
Diagnostic Radiology	7.7%	\$35,909,277	3.3%	1.2% - 14.1%	2.0%	25.6%	22.0%	14.1%	6.4%
General Surgery	15.3%	\$25,751,064	5.9%	3.7% - 26.8%	13.8%	27.7%	26.7%	27.3%	25.9%
Clinical Psychologist	33.3%	\$24,150,912	25.4%	(16.5%) - 83.0%	33.3%	59.8%	59.8%	29.7%	29.7%
Physical Therapist in Private Practice	25.4%	\$24,001,251	8.2%	9.2% - 41.5%	20.5%	36.1%	32.6%	30.4%	27.1%
Clinical Laboratory (Billing Independently)	6.6%	\$22,287,657	2.2%	2.2% - 11.0%	1.0%	22.2%	18.1%	7.0%	0.9%
Urology	13.0%	\$20,875,778	7.0%	(0.8%) - 26.7%	10.2%	21.9%	19.6%	15.0%	12.8%
Pulmonary Disease	8.0%	\$20,442,510	3.6%	0.9% - 15.0%	7.4%	18.2%	17.8%	9.7%	8.9%

# Empire NY/NJ

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Hematology/Oncology	11.5%	\$18,766,844	6.4%	(1.1%) - 24.0%	11.5%	29.8%	29.8%	12.3%	12.3%
Gastroenterology	6.7%	\$13,676,975	3.1%	0.7% - 12.8%	5.4%	19.8%	18.8%	16.9%	15.6%
Infectious Disease	30.2%	\$13,553,965	14.3%	2.1% - 58.3%	17.2%	49.1%	42.5%	19.0%	15.0%
Physical Medicine and Rehabilitation	17.7%	\$12,515,216	9.1%	(0.1%) - 35.6%	17.7%	19.2%	19.2%	20.0%	20.0%
General Practice	10.3%	\$9,956,955	6.8%	(2.9%) - 23.6%	8.3%	25.1%	24.1%	10.7%	7.4%
Rheumatology	8.4%	\$9,014,906	5.8%	(2.8%) - 19.7%	5.6%	8.4%	5.6%	22.2%	12.5%
Neurology	6.3%	\$8,182,540	5.7%	(4.8%) - 17.4%	2.3%	13.4%	9.9%	14.3%	11.8%
Podiatry	4.9%	\$7,921,144	3.2%	(1.2%) - 11.1%	4.6%	17.8%	17.5%	6.9%	6.1%
Psychiatry	6.1%	\$7,092,878	4.1%	(2.0%) - 14.1%	4.6%	19.9%	18.8%	8.0%	6.1%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	3.3%	\$6,413,249	3.0%	(2.7%) - 9.3%	3.1%	25.9%	25.8%	13.3%	11.9%
Interventional Radiology	6.1%	\$6,270,763	0.4%	5.4% - 6.9%	6.1%	7.1%	7.1%	10.0%	10.0%
Emergency Medicine	5.4%	\$5,516,987	3.2%	(0.9%) - 11.7%	5.4%	12.0%	12.0%	13.2%	13.2%
Chiropractic	18.1%	\$4,987,362	12.8%	(6.9%) - 43.1%	14.9%	32.5%	31.3%	15.6%	10.0%
Otolaryngology	13.0%	\$4,913,214	9.8%	(6.2%) - 32.1%	13.0%	50.5%	50.5%	9.4%	9.4%
Pathology	11.9%	\$4,694,530	9.5%	(6.6%) - 30.4%	9.2%	29.3%	27.6%	11.5%	8.0%
Nurse Practitioner	34.9%	\$4,198,049	21.4%	(6.9%) - 76.8%	21.2%	50.2%	42.5%	25.0%	14.3%
Ophthalmology	0.8%	\$4,119,118	0.9%	(1.0%) - 2.5%	0.8%	18.5%	18.5%	5.0%	5.0%
Obstetrics/Gynecology	11.4%	\$3,313,404	8.7%	(5.6%) - 28.4%	11.4%	24.1%	24.1%	6.7%	6.7%
Anesthesiology	3.4%	\$3,094,037	3.5%	(3.5%) - 10.4%	0.0%	17.8%	15.3%	3.4%	0.0%
Radiation Oncology	6.7%	\$3,056,450	8.5%	(9.9%) - 23.4%	6.7%	13.8%	13.8%	10.0%	10.0%
Dermatology	3.3%	\$2,677,170	2.0%	(0.6%) - 7.2%	3.3%	21.0%	21.0%	7.3%	7.3%
Geriatric Medicine	12.2%	\$2,539,809	9.1%	(5.6%) - 30.0%	5.1%	12.2%	5.1%	18.2%	10.0%
Optometry	4.9%	\$2,174,881	3.6%	(2.2%) - 11.9%	4.9%	4.9%	4.9%	17.6%	17.6%
Independent Diagnostic Testing Facility (IDTF)	5.2%	\$1,983,874	4.6%	(3.9%) - 14.3%	5.2%	12.1%	12.1%	7.7%	7.7%
Allergy/Immunology	38.4%	\$1,924,077	47.3%	(54.3%) - 131.0%	38.4%	38.4%	38.4%	25.0%	25.0%
Hematology	15.6%	\$1,519,170	26.3%	(36.0%) - 67.2%	15.6%	31.3%	31.3%	33.3%	33.3%
Endocrinology	3.3%	\$1,345,590	2.8%	(2.3%) - 8.8%	3.3%	3.5%	3.5%	7.1%	7.1%
Physician Assistant	8.7%	\$767,786	8.2%	(7.4%) - 24.8%	8.7%	8.7%	8.7%	20.0%	20.0%
Medical Oncology	0.2%	\$113,101	0.2%	(0.2%) - 0.5%	0.2%	17.5%	17.5%	3.6%	3.6%
Other Provider Types	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	46.7%	46.7%	38.1%	38.1%
Osteopathic Manipulative Therapy	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Neurosurgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	90.6%	90.6%	0.0%	0.0%
Thoracic Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Nuclear Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pediatric Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	28.1%	28.1%	0.0%	0.0%

## Empire NY/NJ

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Ambulatory Surgical Center	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	64.4%	64.4%	0.0%	0.0%
Public Health or Welfare Agencies (Federal, State,	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	29.7%	29.7%	0.0%	0.0%
Portable X-Ray Supplier (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Audiologist (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Occupational Therapist in Private Practice	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	12.7%	12.7%	0.0%	0.0%
Multispecialty Clinic or Group Practice	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pain Management	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	23.3%	23.3%	0.0%	0.0%
Vascular Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	2.7%	2.7%	0.0%	0.0%
Clinical Social Worker	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	59.6%	59.6%	0.0%	0.0%
Critical Care (Intensivists)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	10.7%	10.7%	0.0%	0.0%
Clinical Nurse Specialist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	37.5%	37.5%	0.0%	0.0%
Gynecological/Oncology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Family Practice	-5.4%	-\$9,488,151	11.1%	(27.2%) - 16.4%	-6.6%	18.8%	18.1%	12.9%	12.2%
All Types	10.8%	\$784,955,565	1.6%	7.7% - 13.9%	8.1%	25.8%	23.9%	12.7%	9.2%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## First Coast Service Options CT

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Internal Medicine	13.0%	\$23,236,079	2.4%	8.3% - 17.7%	9.5%	27.5%	25.1%	14.1%	11.9%
Orthopedic Surgery	23.6%	\$7,390,866	10.9%	2.3% - 45.0%	23.7%	39.0%	39.4%	21.4%	17.2%
Cardiology	7.0%	\$7,220,321	1.9%	3.2% - 10.8%	4.2%	11.4%	7.8%	12.8%	7.4%
Infectious Disease	55.8%	\$7,160,650	18.8%	18.9% - 92.7%	55.8%	59.4%	59.4%	36.7%	36.7%
General Surgery	13.0%	\$5,464,565	5.2%	2.8% - 23.2%	13.0%	27.9%	27.9%	30.3%	30.3%
Family Practice	13.8%	\$4,459,689	4.3%	5.4% - 22.3%	11.6%	21.2%	19.4%	15.9%	14.4%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	5.9%	\$3,673,589	3.7%	(1.3%) - 13.1%	5.9%	29.4%	26.9%	11.6%	8.7%
Physical Therapist in Private Practice	21.1%	\$3,068,521	11.2%	(0.9%) - 43.0%	21.1%	42.4%	42.4%	15.5%	15.5%
Gastroenterology	6.9%	\$2,029,660	3.3%	0.4% - 13.4%	3.8%	32.4%	30.8%	12.0%	10.2%
Physician Assistant	25.3%	\$2,015,640	14.5%	(3.1%) - 53.8%	1.1%	61.9%	56.5%	17.1%	8.1%
Urology	7.7%	\$2,007,620	3.7%	0.5% - 14.9%	5.9%	28.3%	27.3%	8.0%	6.8%

## First Coast Service Options CT

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Pulmonary Disease	14.5%	\$1,718,237	7.7%	(0.5%) - 29.5%	12.1%	45.9%	45.0%	11.9%	9.8%
Hematology/Oncology	3.3%	\$1,525,764	2.5%	(1.6%) - 8.2%	0.8%	4.8%	2.3%	9.1%	3.2%
Ophthalmology	1.2%	\$1,256,683	0.9%	(0.6%) - 3.0%	0.6%	18.7%	18.3%	4.8%	4.3%
Nurse Practitioner	12.8%	\$1,090,457	9.3%	(5.5%) - 31.1%	4.2%	29.1%	24.0%	12.8%	8.1%
Nephrology	6.1%	\$1,001,623	4.1%	(2.0%) - 14.2%	5.7%	27.0%	26.8%	11.1%	7.7%
Physical Medicine and Rehabilitation	10.5%	\$922,828	8.5%	(6.0%) - 27.1%	10.5%	10.5%	10.5%	21.1%	21.1%
Diagnostic Radiology	1.4%	\$902,077	0.8%	(0.1%) - 2.9%	1.2%	21.0%	20.9%	3.7%	2.9%
Clinical Laboratory (Billing Independently)	1.0%	\$891,254	0.5%	0.0% - 2.0%	0.6%	17.9%	17.6%	2.8%	2.4%
Obstetrics/Gynecology	14.8%	\$837,583	8.1%	(1.1%) - 30.8%	14.8%	43.1%	43.1%	16.1%	16.1%
Psychiatry	9.6%	\$835,620	5.6%	(1.5%) - 20.6%	6.3%	55.9%	55.1%	7.0%	4.8%
General Practice	20.5%	\$678,367	17.6%	(13.9%) - 55.0%	32.6%	42.3%	57.8%	27.8%	13.3%
Optometry	7.1%	\$557,005	5.4%	(3.5%) - 17.7%	2.3%	27.8%	25.0%	7.7%	4.0%
Dermatology	2.4%	\$547,584	1.2%	0.0% - 4.7%	2.4%	12.5%	12.5%	6.2%	6.2%
Podiatry	2.6%	\$457,516	1.9%	(1.1%) - 6.3%	1.1%	28.3%	27.4%	1.9%	1.0%
Chiropractic	16.8%	\$453,590	9.5%	(1.8%) - 35.4%	11.7%	74.2%	72.6%	11.1%	4.0%
Clinical Nurse Specialist	13.6%	\$445,010	10.0%	(6.0%) - 33.1%	13.6%	41.7%	41.7%	16.7%	16.7%
Medical Oncology	3.5%	\$396,443	1.3%	0.9% - 6.0%	3.5%	3.7%	3.7%	19.0%	19.0%
Neurology	5.3%	\$364,028	5.6%	(5.6%) - 16.2%	5.3%	49.6%	49.6%	5.6%	5.6%
Rheumatology	22.1%	\$344,062	14.3%	(6.0%) - 50.1%	22.1%	46.5%	46.5%	18.2%	18.2%
Gynecological/Oncology	100.0%	\$315,685	0.0%	0.0% - 0.0%	0.0%	100.0%	0.0%	100.0%	0.0%
Anesthesiology	3.3%	\$303,684	3.4%	(3.4%) - 10.0%	3.3%	55.3%	55.3%	4.3%	4.3%
Independent Diagnostic Testing Facility (IDTF)	1.7%	\$226,347	1.8%	(1.9%) - 5.2%	1.7%	36.4%	36.4%	8.6%	8.6%
Pathology	7.5%	\$218,663	5.6%	(3.4%) - 18.4%	5.1%	30.4%	29.0%	10.5%	5.6%
Allergy/Immunology	9.2%	\$123,212	9.1%	(8.6%) - 26.9%	9.2%	11.0%	11.0%	10.0%	10.0%
Otolaryngology	1.4%	\$123,212	1.5%	(1.6%) - 4.3%	1.4%	22.3%	22.3%	3.1%	3.1%
Other Provider Types	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	71.2%	71.2%	41.9%	41.9%
Osteopathic Manipulative Therapy	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	10.9%	10.9%	0.0%	0.0%
Neurosurgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	60.9%	60.9%	0.0%	0.0%
Plastic and Reconstructive Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Thoracic Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Nuclear Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pediatric Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Geriatric Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Certified Registered Nurse Anesthetist (CRNA)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	74.1%	74.1%	0.0%	0.0%
Endocrinology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	22.0%	22.0%	0.0%	0.0%

## First Coast Service Options CT

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Ambulatory Surgical Center	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Public Health or Welfare Agencies (Federal, State,	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Portable X-Ray Supplier (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	17.2%	17.2%	0.0%	0.0%
Clinical Psychologist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	30.7%	30.7%	0.0%	0.0%
Multispecialty Clinic or Group Practice	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	65.7%	65.7%	0.0%	0.0%
Mass Immunization Roster Billers (Mass Immunizers	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Vascular Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Clinical Social Worker	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	37.5%	37.5%	0.0%	0.0%
Emergency Medicine	-0.1%	-\$6,057	0.1%	(0.2%) - 0.1%	-0.1%	30.4%	30.4%	4.5%	4.5%
Interventional Radiology	-1.4%	-\$39,762	1.7%	(4.6%) - 1.9%	-1.4%	1.4%	1.4%	12.5%	12.5%
Radiation Oncology	-5.1%	-\$155,627	5.7%	(16.2%) - 6.1%	-5.1%	1.6%	1.6%	16.7%	16.7%
All Types	7.6%	\$84,062,290	0.9%	5.9% - 9.3%	6.0%	26.8%	25.5%	9.8%	7.9%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## First Coast Service Options FL

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Internal Medicine	19.7%	\$110,238,779	3.5%	12.8% - 26.5%	17.1%	32.7%	30.9%	19.0%	17.5%
Cardiology	8.7%	\$83,106,818	2.6%	3.6% - 13.9%	6.2%	15.2%	13.1%	14.6%	11.8%
Orthopedic Surgery	18.4%	\$66,808,975	10.9%	(2.9%) - 39.7%	7.0%	38.3%	32.0%	22.2%	19.2%
General Practice	30.7%	\$44,337,788	14.7%	1.8% - 59.5%	5.2%	41.3%	23.5%	26.2%	8.8%
Hematology/Oncology	9.9%	\$43,470,932	7.8%	(5.3%) - 25.2%	9.1%	16.9%	16.1%	4.4%	2.2%
Nephrology	41.9%	\$38,413,428	16.1%	10.2% - 73.5%	28.2%	46.8%	35.6%	25.7%	16.1%
Pulmonary Disease	35.1%	\$35,195,621	13.8%	8.0% - 62.2%	17.0%	38.9%	23.1%	34.9%	26.3%
Clinical Laboratory (Billing Independently)	9.9%	\$29,511,386	3.1%	3.9% - 15.9%	7.4%	27.8%	26.2%	4.1%	2.5%
Physical Therapist in Private Practice	19.5%	\$25,822,503	9.9%	0.2% - 38.8%	19.2%	24.9%	24.7%	13.3%	12.6%
Emergency Medicine	19.0%	\$25,337,823	6.9%	5.6% - 32.5%	9.3%	25.0%	16.7%	22.0%	15.2%
Psychiatry	33.5%	\$23,388,978	13.5%	7.2% - 59.9%	30.2%	48.1%	46.0%	30.8%	28.9%
Infectious Disease	19.8%	\$22,352,231	6.4%	7.2% - 32.4%	19.8%	22.1%	22.1%	24.1%	24.1%
Family Practice	7.7%	\$18,387,788	3.7%	0.4% - 15.1%	7.5%	31.9%	31.8%	15.9%	15.1%
Ophthalmology	3.4%	\$14,051,926	2.4%	(1.3%) - 8.0%	1.4%	10.1%	8.4%	5.0%	1.7%



## First Coast Service Options FL

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Podiatry	9.0%	\$12,427,995	5.1%	(1.0%) - 19.0%	3.4%	19.5%	15.2%	11.8%	7.2%
Urology	4.8%	\$12,059,107	2.2%	0.5% - 9.1%	4.5%	15.4%	15.1%	13.5%	12.6%
Pathology	12.5%	\$10,411,764	7.3%	(1.8%) - 26.9%	4.4%	12.5%	4.4%	13.2%	6.1%
Physical Medicine and Rehabilitation	24.6%	\$9,737,894	17.1%	(8.9%) - 58.1%	6.0%	34.6%	21.0%	35.0%	13.3%
Radiation Oncology	13.3%	\$9,488,910	9.6%	(5.6%) - 32.2%	13.3%	28.4%	28.4%	17.4%	17.4%
Gastroenterology	5.1%	\$9,466,131	2.1%	1.1% - 9.1%	5.4%	23.7%	24.8%	12.7%	9.8%
Neurology	8.5%	\$8,101,624	4.5%	(0.3%) - 17.3%	8.5%	23.3%	23.3%	21.1%	21.1%
Diagnostic Radiology	2.4%	\$7,994,691	1.0%	0.5% - 4.3%	0.8%	11.5%	10.1%	6.7%	1.6%
Otolaryngology	6.4%	\$6,732,055	3.9%	(1.3%) - 14.1%	4.9%	23.7%	22.7%	13.1%	11.7%
Dermatology	2.0%	\$6,716,236	1.3%	(0.6%) - 4.5%	0.3%	11.3%	10.0%	6.0%	4.6%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	3.9%	\$5,843,685	2.6%	(1.3%) - 9.1%	3.9%	10.1%	10.1%	5.9%	5.9%
Neurosurgery	29.0%	\$5,688,031	15.2%	(0.7%) - 58.7%	29.0%	54.6%	54.6%	33.3%	33.3%
Chiropractic	12.6%	\$5,611,469	7.1%	(1.3%) - 26.5%	12.6%	46.3%	46.3%	8.1%	8.1%
Vascular Surgery	6.6%	\$5,462,459	6.7%	(6.5%) - 19.6%	6.6%	10.0%	10.0%	13.3%	13.3%
Thoracic Surgery	100.0%	\$4,948,672	0.0%	0.0% - 0.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Certified Registered Nurse Anesthetist (CRNA)	8.4%	\$4,845,852	8.3%	(7.8%) - 24.7%	8.4%	16.7%	16.7%	5.9%	5.9%
Endocrinology	12.6%	\$4,625,658	7.7%	(2.6%) - 27.7%	12.6%	12.6%	12.6%	14.8%	14.8%
Nurse Practitioner	8.5%	\$3,649,654	5.8%	(2.8%) - 19.8%	1.2%	22.7%	17.5%	8.1%	2.9%
Rheumatology	3.2%	\$3,595,554	3.1%	(2.9%) - 9.3%	0.8%	10.0%	8.0%	8.5%	4.4%
Pediatric Medicine	46.1%	\$2,596,455	0.0%	0.0% - 0.0%	46.1%	46.1%	46.1%	100.0%	100.0%
Portable X-Ray Supplier (Billing Independently)	10.6%	\$1,246,501	10.5%	(9.9%) - 31.1%	10.6%	26.6%	26.6%	21.4%	21.4%
Physician Assistant	4.4%	\$928,865	4.7%	(4.8%) - 13.6%	4.4%	26.8%	26.8%	8.3%	8.3%
Anesthesiology	0.9%	\$911,464	0.9%	(0.8%) - 2.6%	0.9%	10.1%	10.1%	2.9%	2.9%
Medical Oncology	7.0%	\$876,980	6.8%	(6.3%) - 20.2%	7.0%	18.1%	18.1%	4.8%	4.8%
Obstetrics/Gynecology	0.6%	\$683,994	1.3%	(2.0%) - 3.2%	0.6%	8.7%	8.7%	10.7%	10.7%
Allergy/Immunology	13.1%	\$579,908	14.8%	(15.9%) - 42.2%	13.1%	16.1%	16.1%	16.7%	16.7%
Interventional Radiology	1.5%	\$273,661	2.1%	(2.7%) - 5.6%	0.0%	9.1%	7.8%	10.0%	0.0%
Other Provider Types	0.2%	\$168,309	1.7%	(3.1%) - 3.6%	0.2%	9.7%	9.7%	11.8%	11.8%
Osteopathic Manipulative Therapy	0.0%	\$0	0.0%	0.0% - 0.0%		100.0%	100.0%	0.0%	0.0%
Plastic and Reconstructive Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	24.2%	24.2%	0.0%	0.0%
Geriatric Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Optometry	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	4.7%	5.6%	7.7%	0.0%
Independent Diagnostic Testing Facility (IDTF)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	3.7%	3.7%	0.0%	0.0%
Ambulatory Surgical Center	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	14.7%	15.3%	5.6%	0.0%

## First Coast Service Options FL

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Public Health or Welfare Agencies (Federal, State,	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Occupational Therapist in Private Practice	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	71.1%	71.1%	0.0%	0.0%
Clinical Psychologist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	52.5%	52.5%	0.0%	0.0%
Multispecialty Clinic or Group Practice	0.0%	\$0	0.0%	0.0% - 0.0%		100.0%	100.0%	0.0%	0.0%
Pain Management	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	60.4%	60.4%	0.0%	0.0%
Cardiac Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Clinical Social Worker	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	37.5%	37.5%	0.0%	0.0%
Critical Care (Intensivists)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	8.1%	8.1%	0.0%	0.0%
Gynecological/Oncology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
General Surgery	-7.6%	-\$11,450,093	9.7%	(26.6%) - 11.3%	-7.6%	5.2%	5.2%	8.3%	8.3%
All Types	9.7%	\$714,648,461	1.1%	7.5% - 11.9%	6.6%	21.6%	19.3%	12.1%	9.5%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## GHI NY

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Internal Medicine	13.2%	\$11,239,808	1.8%	9.7% - 16.6%	8.6%	28.3%	25.2%	17.8%	13.7%
Radiation Oncology	53.0%	\$5,407,716	29.2%	(4.1%) -110.2%	53.0%	57.8%	57.8%	37.5%	37.5%
Physical Therapist in Private Practice	35.2%	\$5,380,434	6.5%	22.4% - 48.0%	33.9%	42.6%	41.6%	31.6%	30.1%
Urology	20.1%	\$3,714,328	8.2%	4.1% - 36.1%	15.6%	25.5%	21.5%	20.3%	14.9%
Pulmonary Disease	54.6%	\$2,888,661	13.7%	27.6% - 81.5%	36.5%	62.1%	50.3%	46.8%	34.2%
Hematology/Oncology	20.8%	\$2,781,414	14.4%	(7.4%) - 49.0%	8.4%	22.0%	10.0%	23.3%	13.2%
Gastroenterology	25.1%	\$2,499,769	11.6%	2.3% - 47.8%	14.3%	45.7%	40.3%	21.6%	14.7%
Cardiology	10.1%	\$2,438,206	3.3%	3.5% - 16.7%	6.3%	23.9%	21.8%	21.3%	11.7%
Ophthalmology	6.7%	\$1,784,095	2.6%	1.5% - 11.9%	5.1%	14.9%	13.6%	8.7%	6.7%
Physical Medicine and Rehabilitation	23.9%	\$1,704,620	6.9%	10.4% - 37.4%	20.4%	38.2%	35.9%	22.3%	21.1%
Family Practice	16.7%	\$1,528,416	6.3%	4.3% - 29.1%	11.8%	26.3%	22.5%	14.2%	10.9%
Dermatology	22.2%	\$1,516,675	15.6%	(8.3%) - 52.8%	20.9%	33.3%	32.3%	16.4%	14.8%
Psychiatry	19.8%	\$1,309,519	6.6%	7.0% - 32.7%	14.6%	44.3%	41.0%	17.6%	12.5%
Emergency Medicine	30.9%	\$894,588	12.8%	5.7% - 56.1%	9.1%	46.8%	34.8%	15.6%	3.6%
General Surgery	13.7%	\$878,670	8.9%	(3.8%) - 31.1%	2.4%	28.5%	21.0%	21.9%	10.7%
Clinical Psychologist	16.6%	\$636,707	7.7%	1.5% - 31.7%	6.2%	55.9%	51.3%	13.2%	6.1%



**GHI NY**

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	29.4%	\$612,266	27.7%	(24.9%) - 83.6%	29.4%	29.4%	29.4%	28.6%	28.6%
Anesthesiology	8.8%	\$596,197	8.5%	(7.9%) - 25.5%	8.8%	16.3%	16.3%	3.8%	3.8%
Neurology	6.1%	\$572,170	3.7%	(1.0%) - 13.3%	6.1%	13.0%	13.0%	14.3%	14.3%
Allergy/Immunology	49.2%	\$529,234	23.1%	3.9% - 94.5%	49.2%	57.9%	57.9%	55.6%	55.6%
Nephrology	9.6%	\$525,433	9.3%	(8.7%) - 27.9%	9.6%	18.0%	18.0%	4.3%	4.3%
Orthopedic Surgery	11.8%	\$457,548	9.3%	(6.5%) - 30.1%	11.8%	31.7%	31.7%	21.1%	21.1%
Otolaryngology	7.5%	\$376,097	4.2%	(0.6%) - 15.7%	7.5%	17.3%	17.3%	9.3%	9.3%
Podiatry	2.1%	\$363,096	2.1%	(2.1%) - 6.3%	0.4%	14.3%	13.0%	7.5%	5.8%
Chiropractic	11.6%	\$362,644	6.7%	(1.6%) - 24.8%	11.6%	14.6%	14.6%	9.4%	9.4%
Obstetrics/Gynecology	32.3%	\$314,496	10.8%	11.2% - 53.4%	32.3%	54.0%	54.0%	44.4%	44.4%
Vascular Surgery	78.5%	\$290,413	29.3%	21.1% -135.8%	78.5%	87.9%	87.9%	25.0%	25.0%
Geriatric Medicine	44.5%	\$289,660	33.0%	(20.3%) -109.3%	0.0%	44.5%	0.0%	25.0%	0.0%
Pain Management	32.6%	\$257,938	17.1%	(0.8%) - 66.1%	32.6%	34.8%	34.8%	50.0%	50.0%
Physician Assistant	27.8%	\$255,473	26.1%	(23.4%) - 79.0%	27.8%	35.3%	35.3%	37.5%	37.5%
Pathology	7.6%	\$229,451	6.4%	(5.0%) - 20.2%	5.6%	26.3%	25.0%	7.7%	4.0%
Clinical Social Worker	8.8%	\$190,335	6.8%	(4.4%) - 22.1%	0.0%	52.7%	49.0%	9.1%	0.0%
Optometry	7.9%	\$187,983	8.0%	(7.6%) - 23.5%	7.9%	17.3%	17.3%	5.9%	5.9%
Clinical Laboratory (Billing Independently)	6.4%	\$180,551	3.3%	(0.1%) - 12.9%	1.9%	26.1%	23.3%	14.9%	6.4%
Pediatric Medicine	30.6%	\$124,218	28.8%	(25.8%) - 87.0%	30.6%	30.6%	30.6%	25.0%	25.0%
Thoracic Surgery	5.9%	\$115,770	6.2%	(6.3%) - 18.0%	2.6%	22.0%	19.7%	30.0%	22.2%
Nurse Practitioner	34.4%	\$113,945	30.2%	(24.7%) - 93.5%	0.0%	40.5%	13.6%	25.0%	0.0%
Multispecialty Clinic or Group Practice	37.3%	\$66,474	0.0%	37.3% - 37.3%	37.3%	68.1%	68.1%	14.3%	14.3%
Other Provider Types	9.3%	\$60,735	8.8%	(8.0%) - 26.6%	9.3%	30.7%	30.7%	29.4%	29.4%
General Practice	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	40.1%	40.1%	0.0%	0.0%
Neurosurgery	0.0%	\$0	0.0%	0.0% - 0.0%		100.0%	100.0%	0.0%	0.0%
Certified Registered Nurse Anesthetist (CRNA)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Infectious Disease	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Endocrinology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	11.7%	11.7%	0.0%	0.0%
Independent Diagnostic Testing Facility (IDTF)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	5.0%	5.0%	0.0%	0.0%
Ambulatory Surgical Center	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Occupational Therapist in Private Practice	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Interventional Radiology		\$0		0.0% - 0.0%		100.0%	100.0%	0.0%	0.0%
Rheumatology	-1.0%	-\$8,542	10.9%	(22.4%) - 20.4%	-1.0%	-1.0%	-1.0%	20.0%	20.0%
Portable X-Ray Supplier (Billing	-5.7%	-\$123,014	4.2%	(13.9%) - 2.6%	-5.7%	-2.0%	-2.0%	3.5%	3.5%

## GHI NY

Carrier Provider Type (Independently)	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Diagnostic Radiology	-1.0%	-\$293,291	5.0%	(10.7%) - 8.7%	-5.1%	13.2%	10.2%	11.9%	5.5%
All Types	14.3%	\$53,250,906	1.6%	11.2% - 17.4%	10.2%	27.9%	24.9%	17.2%	13.2%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## HealthNow NY

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Urology	41.9%	\$14,858,848	24.8%	(6.6%) - 90.4%	1.9%	45.8%	12.6%	12.5%	10.9%
Internal Medicine	7.2%	\$11,840,512	1.7%	3.8% - 10.5%	3.7%	13.3%	10.3%	12.9%	8.6%
Physical Therapist in Private Practice	29.5%	\$11,273,981	9.6%	10.7% - 48.2%	29.5%	38.4%	38.4%	23.0%	23.0%
Cardiology	8.0%	\$8,811,481	3.0%	2.2% - 13.8%	7.2%	18.8%	18.2%	12.6%	10.1%
Hematology/Oncology	11.9%	\$7,376,182	7.7%	(3.3%) - 27.0%	5.6%	23.7%	18.5%	18.2%	12.0%
Psychiatry	34.6%	\$6,252,008	14.4%	6.3% - 62.9%	34.6%	48.0%	48.0%	25.6%	25.6%
Pulmonary Disease	19.8%	\$5,533,414	11.4%	(2.6%) - 42.2%	9.5%	20.2%	10.0%	18.0%	10.9%
Nephrology	22.0%	\$5,142,522	10.5%	1.4% - 42.6%	18.2%	23.3%	19.7%	41.2%	31.0%
Emergency Medicine	18.0%	\$4,536,862	12.2%	(5.8%) - 41.8%	18.0%	24.4%	24.4%	19.6%	19.6%
General Surgery	7.9%	\$4,043,082	4.3%	(0.5%) - 16.3%	7.9%	14.0%	14.0%	10.9%	10.9%
Family Practice	5.0%	\$3,847,838	2.2%	0.6% - 9.4%	2.5%	23.1%	21.5%	8.3%	6.6%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	4.2%	\$3,461,402	2.9%	(1.5%) - 9.9%	4.2%	13.6%	13.6%	4.4%	4.4%
Ophthalmology	2.9%	\$2,832,571	2.2%	(1.4%) - 7.3%	2.2%	14.6%	14.0%	6.9%	6.1%
Orthopedic Surgery	5.1%	\$2,553,884	2.3%	0.6% - 9.7%	5.1%	9.2%	8.8%	22.1%	20.9%
Obstetrics/Gynecology	12.4%	\$2,478,946	10.1%	(7.3%) - 32.1%	12.4%	45.0%	45.0%	6.8%	6.8%
Diagnostic Radiology	2.2%	\$2,331,905	0.9%	0.5% - 3.9%	1.3%	18.4%	17.9%	4.9%	1.6%
Nurse Practitioner	3.0%	\$1,642,639	3.3%	(3.5%) - 9.5%	0.1%	8.0%	5.5%	13.7%	7.4%
Chiropractic	12.6%	\$1,273,458	5.7%	1.4% - 23.7%	12.6%	27.4%	27.4%	18.4%	18.4%
Gastroenterology	4.8%	\$1,259,362	3.1%	(1.3%) - 10.9%	4.8%	14.6%	13.4%	12.1%	9.4%
Infectious Disease	32.2%	\$1,259,362	17.4%	(2.0%) - 66.4%	27.4%	32.2%	27.4%	18.2%	10.0%
Neurology	5.5%	\$1,161,011	4.1%	(2.5%) - 13.6%	0.6%	5.5%	0.6%	20.7%	8.0%
General Practice	21.2%	\$1,151,613	11.6%	(1.5%) - 43.9%	3.6%	43.9%	35.5%	16.0%	4.5%
Optometry	10.1%	\$1,070,842	10.7%	(10.9%) - 31.2%	10.1%	36.1%	36.1%	11.8%	11.8%

## HealthNow NY

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Physical Medicine and Rehabilitation	39.2%	\$851,781	24.4%	(8.7%) - 87.1%	39.2%	39.2%	39.2%	40.0%	40.0%
Other Provider Types	16.5%	\$782,028	16.4%	(15.6%) - 48.6%	16.5%	22.2%	22.2%	20.0%	20.0%
Endocrinology	13.9%	\$697,692	11.9%	(9.4%) - 37.2%	13.9%	29.7%	29.7%	9.1%	9.1%
Geriatric Medicine	30.3%	\$644,952	36.4%	(41.0%) -101.6%	-11.9%	30.3%	-11.9%	40.0%	25.0%
Clinical Social Worker	4.9%	\$573,660	5.4%	(5.6%) - 15.5%	0.0%	30.4%	27.8%	3.6%	0.0%
Clinical Laboratory (Billing Independently)	3.5%	\$511,117	1.8%	(0.1%) - 7.1%	2.1%	28.8%	28.0%	8.0%	2.8%
Physician Assistant	3.5%	\$460,888	3.0%	(2.4%) - 9.5%	3.5%	22.1%	22.1%	5.3%	5.3%
Anesthesiology	2.2%	\$392,756	2.3%	(2.3%) - 6.7%	2.2%	45.3%	45.3%	3.7%	3.7%
Rheumatology	6.5%	\$389,272	6.0%	(5.3%) - 18.2%	6.5%	16.6%	16.6%	6.7%	6.7%
Pathology	3.1%	\$320,896	3.1%	(2.9%) - 9.2%	3.1%	4.3%	4.3%	2.3%	2.3%
Otolaryngology	0.9%	\$115,526	1.0%	(1.0%) - 2.9%	0.9%	0.9%	0.9%	4.3%	4.3%
Allergy/Immunology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Dermatology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	5.9%	5.9%	0.0%	0.0%
Neurosurgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Thoracic Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Nuclear Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pediatric Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	1.9%	1.9%	0.0%	0.0%
Certified Registered Nurse Anesthetist (CRNA)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Independent Diagnostic Testing Facility (IDTF)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	13.3%	13.3%	0.0%	0.0%
Ambulatory Surgical Center	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Public Health or Welfare Agencies (Federal, State,	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	25.4%	25.4%	0.0%	0.0%
Portable X-Ray Supplier (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	1.3%	1.3%	0.0%	0.0%
Occupational Therapist in Private Practice	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	100.0%	100.0%	0.0%	0.0%
Clinical Psychologist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	51.1%	51.1%	0.0%	0.0%
Mass Immunization Roster Billers (Mass Immunizers	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Cardiac Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Critical Care (Intensivists)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Medical Oncology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	10.5%	10.5%	0.0%	0.0%
Radiation Oncology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	11.6%	11.6%	0.0%	0.0%
Gynecological/Oncology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Plastic and Reconstructive Surgery	-0.5%	-\$29,813	10.1%	(20.4%) - 19.3%	-0.5%	-0.5%	-0.5%	55.6%	55.6%
Podiatry	-0.7%	-\$115,526	0.7%	(2.2%) - 0.7%	-0.7%	10.5%	10.5%	1.6%	1.6%
Vascular Surgery	-2.9%	-\$115,526	4.2%	(11.1%) - 5.3%	-2.9%	38.7%	38.7%	14.3%	14.3%
Hematology	-1.6%	-\$115,526	1.1%	(3.7%) - 0.4%	-1.6%	-1.3%	-1.3%	6.2%	6.2%

## HealthNow NY

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
All Types	8.2%	\$111,357,901	1.3%	5.6% - 10.8%	5.5%	19.5%	17.3%	11.2%	8.5%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## HGSA PA

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Internal Medicine	15.3%	\$62,150,463	5.1%	5.4% - 25.2%	12.2%	23.6%	21.1%	21.2%	18.1%
Vascular Surgery	77.7%	\$41,252,695	11.3%	55.5% - 99.9%	77.3%	85.6%	85.5%	44.4%	41.2%
Family Practice	15.0%	\$38,012,856	4.9%	5.4% - 24.5%	13.9%	24.5%	23.7%	12.2%	10.9%
Nephrology	39.3%	\$22,922,597	18.4%	3.3% - 75.3%	36.8%	47.9%	46.1%	46.3%	43.6%
Cardiology	9.3%	\$22,067,778	2.9%	3.5% - 15.1%	5.1%	20.9%	17.7%	14.9%	9.0%
Pulmonary Disease	19.6%	\$14,871,875	5.3%	9.3% - 30.0%	15.6%	22.6%	18.9%	25.0%	23.6%
Radiation Oncology	25.3%	\$11,955,925	21.1%	(16.0%) - 66.7%	25.3%	42.7%	42.7%	9.4%	9.4%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	5.3%	\$11,797,100	4.8%	(4.1%) - 14.7%	5.3%	30.0%	30.0%	7.8%	7.8%
Emergency Medicine	19.0%	\$11,044,194	8.9%	1.6% - 36.3%	6.1%	34.7%	26.5%	12.8%	4.7%
Gynecological/Oncology	100.0%	\$10,249,691	0.0%	0.0% - 0.0%	100.0%	100.0%	100.0%	66.7%	66.7%
General Surgery	6.2%	\$10,168,766	3.1%	0.0% - 12.3%	5.2%	24.6%	24.0%	18.6%	17.2%
Gastroenterology	12.4%	\$7,892,464	11.1%	(9.2%) - 34.1%	12.4%	19.3%	19.3%	21.9%	21.9%
Physical Medicine and Rehabilitation	19.0%	\$7,447,944	10.5%	(1.7%) - 39.6%	12.2%	33.4%	28.8%	21.4%	15.4%
Ophthalmology	3.7%	\$7,377,229	1.9%	0.0% - 7.3%	3.7%	18.5%	18.5%	5.6%	5.6%
General Practice	12.8%	\$7,258,488	3.4%	6.2% - 19.4%	9.2%	14.5%	11.0%	17.0%	13.3%
Neurology	10.7%	\$6,588,587	5.8%	(0.5%) - 22.0%	10.7%	69.3%	69.3%	25.0%	25.0%
Physical Therapist in Private Practice	12.5%	\$6,355,266	10.8%	(8.7%) - 33.8%	12.5%	23.5%	23.5%	8.5%	8.5%
Clinical Laboratory (Billing Independently)	5.4%	\$5,997,532	2.1%	1.2% - 9.6%	3.1%	21.3%	19.6%	6.0%	4.4%
Anesthesiology	9.1%	\$5,648,306	7.2%	(5.1%) - 23.3%	8.0%	32.1%	31.5%	8.1%	5.6%
Endocrinology	28.2%	\$4,769,475	21.6%	(14.2%) - 70.6%	28.2%	31.8%	31.8%	23.1%	23.1%
Diagnostic Radiology	2.5%	\$4,111,297	1.0%	0.5% - 4.5%	2.0%	7.4%	6.9%	5.6%	4.9%
Psychiatry	7.8%	\$3,733,520	6.0%	(3.8%) - 19.5%	2.6%	26.2%	22.9%	8.9%	6.8%
Hematology/Oncology	2.9%	\$3,277,844	2.4%	(1.8%) - 7.5%	2.9%	10.9%	10.9%	12.8%	12.8%
Rheumatology	9.6%	\$3,196,730	8.0%	(6.2%) - 25.3%	9.6%	14.3%	14.3%	13.9%	13.9%

## HGSA PA

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Podiatry	3.7%	\$3,054,355	3.0%	(2.2%) - 9.6%	2.0%	13.6%	12.2%	9.2%	7.8%
Otolaryngology	9.7%	\$2,649,729	5.4%	(0.9%) - 20.3%	9.7%	17.0%	17.0%	13.6%	13.6%
Chiropractic	13.0%	\$2,624,393	7.2%	(1.1%) - 27.1%	11.1%	57.7%	57.2%	6.3%	5.1%
Pediatric Medicine	100.0%	\$2,363,466	0.0%	0.0% - 0.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Obstetrics/Gynecology	2.8%	\$1,878,861	2.0%	(1.1%) - 6.8%	2.8%	18.2%	18.2%	8.1%	8.1%
Urology	1.7%	\$1,807,201	1.8%	(1.9%) - 5.2%	1.7%	11.7%	11.7%	12.8%	12.8%
Infectious Disease	7.4%	\$1,474,992	5.4%	(3.2%) - 18.0%	7.4%	17.8%	17.8%	14.3%	14.3%
Pathology	2.8%	\$1,230,515	2.0%	(1.2%) - 6.7%	2.8%	14.7%	14.7%	3.8%	3.8%
Orthopedic Surgery	1.0%	\$1,043,518	0.8%	(0.7%) - 2.6%	1.0%	19.4%	19.5%	10.8%	8.3%
Physician Assistant	6.1%	\$980,177	8.9%	(11.3%) - 23.5%	-2.1%	7.7%	-0.2%	23.5%	18.8%
Plastic and Reconstructive Surgery	14.1%	\$566,287	8.9%	(3.3%) - 31.4%	14.1%	14.1%	14.1%	33.3%	33.3%
Dermatology	0.8%	\$544,543	1.3%	(1.7%) - 3.3%	0.8%	4.3%	4.3%	4.1%	4.1%
Thoracic Surgery	9.4%	\$464,563	9.2%	(8.5%) - 27.4%	9.4%	9.4%	9.4%	33.3%	33.3%
Other Provider Types	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	12.2%	12.2%	0.0%	0.0%
Allergy/Immunology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	79.4%	79.4%	0.0%	0.0%
Osteopathic Manipulative Therapy	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Neurosurgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Nuclear Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Geriatric Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Optometry	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	10.6%	10.6%	0.0%	0.0%
Certified Registered Nurse Anesthetist (CRNA)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	5.7%	5.7%	0.0%	0.0%
Independent Diagnostic Testing Facility (IDTF)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	3.2%	3.2%	0.0%	0.0%
Ambulatory Surgical Center	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	10.0%	10.0%	0.0%	0.0%
Portable X-Ray Supplier (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	7.0%	7.0%	0.0%	0.0%
Audiologist (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	6.8%	6.8%	0.0%	0.0%
Occupational Therapist in Private Practice	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	11.3%	11.3%	0.0%	0.0%
Clinical Psychologist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	36.3%	36.3%	0.0%	0.0%
Pain Management	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	7.7%	7.7%	0.0%	0.0%
Cardiac Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Clinical Social Worker	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	37.5%	37.5%	0.0%	0.0%
Critical Care (Intensivists)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Hematology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Medical Oncology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	13.7%	13.7%	0.0%	0.0%
Interventional Radiology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	11.3%	11.3%	0.0%	0.0%

## HGSA PA

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Nurse Practitioner	-7.4%	-\$1,018,370	7.2%	(21.6%) - 6.7%	-7.4%	-3.9%	-3.9%	11.1%	11.1%
All Types	9.7%	\$349,812,850	1.3%	7.1% - 12.3%	8.2%	24.7%	23.7%	11.7%	9.9%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## NHIC CA

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Internal Medicine	14.5%	\$105,410,663	2.7%	9.2% - 19.8%	11.8%	31.6%	30.1%	17.4%	14.7%
Cardiology	17.0%	\$97,335,296	5.5%	6.3% - 27.8%	13.9%	27.8%	25.6%	21.4%	15.6%
Family Practice	18.8%	\$64,288,432	7.1%	4.9% - 32.7%	10.4%	32.7%	27.6%	18.8%	13.8%
Nephrology	25.1%	\$35,610,318	9.9%	5.6% - 44.6%	14.6%	34.4%	26.5%	19.1%	16.7%
Ophthalmology	8.0%	\$35,209,513	5.2%	(2.1%) - 18.2%	1.9%	21.2%	16.8%	6.8%	4.3%
General Practice	20.5%	\$34,515,776	5.9%	8.9% - 32.1%	18.5%	42.6%	41.6%	22.7%	21.7%
Interventional Radiology	87.4%	\$30,587,941	12.7%	62.5% -112.3%	88.1%	89.2%	89.9%	18.8%	13.3%
Clinical Laboratory (Billing Independently)	10.1%	\$30,241,833	2.9%	4.4% - 15.7%	5.8%	36.1%	34.2%	8.8%	6.3%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	10.9%	\$29,743,788	7.3%	(3.4%) - 25.3%	4.3%	33.4%	29.8%	5.6%	2.3%
Orthopedic Surgery	5.9%	\$24,145,576	3.9%	(1.7%) - 13.6%	5.9%	20.2%	20.2%	23.7%	22.0%
Physical Therapist in Private Practice	18.0%	\$22,807,025	8.8%	0.8% - 35.1%	18.0%	40.1%	40.1%	15.9%	15.9%
Neurology	24.8%	\$20,892,639	12.2%	0.9% - 48.7%	22.8%	50.2%	49.3%	21.1%	18.9%
Obstetrics/Gynecology	25.1%	\$20,674,763	19.1%	(12.4%) - 62.6%	26.9%	41.4%	57.7%	40.0%	28.0%
Podiatry	10.0%	\$16,962,981	3.7%	2.8% - 17.3%	8.2%	21.0%	19.6%	13.9%	11.6%
Diagnostic Radiology	4.8%	\$15,653,906	2.7%	(0.5%) - 10.0%	2.4%	22.2%	20.6%	5.6%	2.2%
Pulmonary Disease	13.8%	\$15,139,452	5.0%	4.0% - 23.6%	11.7%	23.9%	22.3%	25.7%	21.4%
Urology	7.3%	\$13,109,291	3.6%	0.3% - 14.4%	5.1%	35.8%	34.7%	10.5%	9.3%
Gastroenterology	9.9%	\$11,992,870	3.8%	2.5% - 17.4%	9.9%	52.2%	52.2%	23.1%	23.1%
General Surgery	13.9%	\$11,293,967	6.4%	1.4% - 26.3%	9.3%	57.0%	55.4%	25.0%	11.1%
Emergency Medicine	7.2%	\$10,136,219	4.1%	(0.8%) - 15.3%	5.8%	25.9%	25.0%	17.1%	14.9%
Anesthesiology	8.8%	\$8,766,977	6.5%	(4.0%) - 21.5%	4.7%	51.4%	50.3%	6.3%	3.2%
Physical Medicine and Rehabilitation	17.2%	\$7,377,376	10.6%	(3.6%) - 37.9%	17.2%	22.6%	22.6%	21.7%	21.7%
Other Provider Types	21.5%	\$7,298,977	17.5%	(12.7%) - 55.7%	19.8%	30.0%	28.7%	55.0%	52.6%



# NHIC CA

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Hematology/Oncology	2.2%	\$7,121,517	1.2%	(0.1%) - 4.4%	2.1%	16.8%	16.8%	7.8%	7.0%
Infectious Disease	26.7%	\$6,429,299	13.7%	(0.2%) - 53.7%	24.7%	45.0%	47.0%	35.3%	21.4%
Pediatric Medicine	78.2%	\$5,779,623	24.1%	31.0% -125.4%	78.2%	78.2%	78.2%	66.7%	66.7%
Dermatology	1.9%	\$5,655,340	1.1%	(0.4%) - 4.1%	0.5%	18.0%	17.0%	10.0%	6.9%
Otolaryngology	11.8%	\$5,384,895	4.8%	2.4% - 21.2%	11.8%	28.0%	28.0%	40.9%	40.9%
Psychiatry	5.7%	\$5,367,270	3.0%	(0.1%) - 11.5%	5.7%	22.4%	22.4%	8.3%	8.3%
Nurse Practitioner	6.8%	\$4,658,036	6.0%	(5.1%) - 18.6%	2.0%	8.0%	3.4%	20.0%	11.1%
Pain Management	61.0%	\$3,855,817	47.6%	(32.2%) -154.3%	61.0%	61.0%	61.0%	50.0%	50.0%
Allergy/Immunology	17.3%	\$3,688,384	12.2%	(6.5%) - 41.2%	17.3%	33.5%	33.5%	8.7%	8.7%
Audiologist (Billing Independently)	100.0%	\$3,640,980	0.0%	100.0% -100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Nuclear Medicine	36.4%	\$3,379,044	30.5%	(23.4%) - 96.2%	0.0%	49.2%	21.8%	46.2%	0.0%
Osteopathic Manipulative Therapy	23.4%	\$2,836,026	25.2%	(26.0%) - 72.7%	23.4%	25.9%	25.9%	25.0%	25.0%
Chiropractic	6.7%	\$2,501,465	4.7%	(2.5%) - 15.9%	4.5%	43.6%	42.8%	10.2%	8.3%
Geriatric Medicine	17.1%	\$1,833,557	17.4%	(17.1%) - 51.3%	0.0%	20.8%	5.4%	11.1%	0.0%
Rheumatology	2.0%	\$1,767,009	2.4%	(2.7%) - 6.8%	2.0%	2.0%	2.0%	6.3%	6.3%
Multispecialty Clinic or Group Practice	22.1%	\$1,678,582	21.3%	(19.7%) - 63.8%	22.1%	65.9%	65.9%	8.3%	8.3%
Physician Assistant	6.2%	\$1,622,670	7.0%	(7.5%) - 19.9%	6.2%	33.7%	33.7%	11.1%	11.1%
Plastic and Reconstructive Surgery	25.8%	\$1,342,805	19.6%	(12.6%) - 64.3%	25.8%	91.8%	91.8%	25.0%	25.0%
Pathology	1.1%	\$842,026	1.0%	(0.9%) - 3.2%	0.1%	20.3%	19.7%	10.6%	6.3%
Portable X-Ray Supplier (Billing Independently)	1.4%	\$352,794	1.5%	(1.7%) - 4.4%	1.4%	1.4%	1.4%	4.5%	4.5%
Neurosurgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Optometry	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	43.4%	43.4%	0.0%	0.0%
Independent Diagnostic Testing Facility (IDTF)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	30.1%	30.1%	0.0%	0.0%
Ambulatory Surgical Center	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	1.5%	1.5%	0.0%	0.0%
Public Health or Welfare Agencies (Federal, State,	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Occupational Therapist in Private Practice	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	88.4%	88.4%	0.0%	0.0%
Clinical Psychologist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	45.4%	45.4%	0.0%	0.0%
Vascular Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Cardiac Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Clinical Social Worker	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	37.5%	37.5%	0.0%	0.0%
Critical Care (Intensivists)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Medical Oncology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	10.8%	10.8%	2.6%	2.6%
Radiation Oncology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	7.4%	8.2%	18.2%	0.0%
Gynecological/Oncology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	100.0%	100.0%	0.0%	0.0%
Endocrinology	-2.9%	-\$486,801	3.0%	(8.9%) - 3.1%	-2.9%	12.6%	12.6%	4.5%	4.5%

## NHIC CA

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
All Types	10.8%	\$738,445,918	1.1%	8.6% - 13.1%	7.9%	29.3%	27.7%	14.3%	11.3%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## NHIC MA/ME/NH/VT

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Internal Medicine	15.3%	\$68,892,862	2.5%	10.3% - 20.2%	7.9%	26.0%	20.4%	14.0%	8.7%
Cardiology	20.0%	\$37,125,629	6.8%	6.6% - 33.5%	10.4%	27.1%	19.1%	19.4%	12.7%
Family Practice	25.6%	\$28,835,625	7.7%	10.5% - 40.7%	10.7%	40.8%	31.8%	14.1%	8.7%
Physical Therapist in Private Practice	36.7%	\$16,747,130	10.1%	16.8% - 56.5%	36.7%	45.3%	45.3%	31.1%	31.1%
Nephrology	24.4%	\$15,984,113	13.3%	(1.7%) - 50.4%	-1.5%	25.5%	0.5%	31.4%	16.7%
Emergency Medicine	21.2%	\$12,009,515	7.5%	6.6% - 35.8%	10.4%	25.0%	15.3%	23.7%	14.7%
General Surgery	8.4%	\$11,415,693	4.0%	0.5% - 16.2%	7.2%	33.1%	32.5%	19.6%	18.2%
Diagnostic Radiology	4.7%	\$9,252,632	2.7%	(0.5%) - 9.9%	2.0%	15.7%	13.6%	5.5%	2.3%
Dermatology	10.2%	\$8,772,528	5.4%	(0.4%) - 20.8%	6.3%	17.2%	14.0%	14.5%	9.2%
Gastroenterology	9.6%	\$8,595,902	4.1%	1.5% - 17.6%	9.6%	12.1%	12.1%	19.4%	19.4%
Urology	6.2%	\$8,548,030	3.6%	(0.8%) - 13.2%	6.2%	12.9%	12.9%	9.1%	9.1%
Anesthesiology	22.6%	\$7,894,930	13.9%	(4.7%) - 49.9%	15.8%	34.7%	29.9%	19.0%	15.0%
Nurse Practitioner	15.3%	\$7,222,473	7.1%	1.4% - 29.1%	9.9%	19.2%	14.3%	29.5%	24.6%
Pulmonary Disease	13.4%	\$7,082,486	5.9%	1.8% - 25.0%	14.0%	34.9%	36.1%	10.5%	8.9%
Psychiatry	10.1%	\$5,869,782	4.9%	0.6% - 19.6%	5.3%	36.6%	34.2%	5.9%	3.0%
Chiropractic	22.4%	\$5,781,469	11.0%	0.8% - 43.9%	22.4%	37.0%	37.0%	23.2%	23.2%
Endocrinology	52.5%	\$4,742,108	24.1%	5.2% - 99.7%	52.5%	64.2%	64.2%	58.3%	58.3%
Clinical Laboratory (Billing Independently)	4.8%	\$4,392,486	2.2%	0.6% - 9.0%	1.6%	18.2%	16.7%	4.0%	1.4%
Infectious Disease	22.3%	\$3,987,387	17.8%	(12.5%) - 57.1%	22.3%	24.7%	24.7%	13.3%	13.3%
Pathology	10.7%	\$3,941,416	8.8%	(6.6%) - 28.0%	2.0%	23.3%	17.0%	14.3%	2.7%
Radiation Oncology	17.2%	\$3,898,037	15.2%	(12.5%) - 47.0%	17.2%	27.0%	27.0%	15.4%	15.4%
Independent Diagnostic Testing Facility (IDTF)	3.8%	\$3,647,961	4.2%	(4.4%) - 12.1%	3.8%	11.8%	11.8%	9.5%	9.5%
Orthopedic Surgery	2.7%	\$3,599,052	2.2%	(1.6%) - 6.9%	2.7%	7.6%	7.6%	10.5%	10.5%
Medical Oncology	16.2%	\$3,464,077	10.7%	(4.8%) - 37.3%	10.7%	16.2%	10.7%	18.2%	10.0%
Neurology	6.6%	\$3,375,937	3.0%	0.7% - 12.5%	4.9%	17.3%	15.9%	14.7%	12.1%



**NHIC MA/ME/NH/VT**

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Clinical Psychologist	11.5%	\$3,009,205	8.7%	(5.5%) - 28.4%	11.5%	31.1%	31.1%	10.0%	10.0%
Hematology/Oncology	2.3%	\$2,607,390	1.9%	(1.4%) - 6.1%	2.3%	6.8%	6.8%	12.2%	12.2%
Other Provider Types	6.5%	\$2,557,099	7.4%	(8.1%) - 21.0%	6.5%	60.8%	60.8%	34.6%	34.6%
Otolaryngology	10.9%	\$2,422,123	5.8%	(0.6%) - 22.3%	10.9%	14.5%	14.5%	13.8%	13.8%
Geriatric Medicine	26.9%	\$2,014,778	16.3%	(5.1%) - 58.9%	26.9%	49.1%	49.1%	12.5%	12.5%
Thoracic Surgery	45.5%	\$1,878,420	0.0%	45.5% - 45.5%	45.5%	54.1%	54.1%	50.0%	50.0%
Podiatry	4.2%	\$1,868,915	5.2%	(6.1%) - 14.4%	4.2%	23.4%	23.4%	5.7%	5.7%
Rheumatology	5.9%	\$1,269,735	4.1%	(2.0%) - 13.9%	5.9%	12.9%	12.9%	7.1%	7.1%
Ophthalmology	0.8%	\$1,198,186	0.9%	(1.1%) - 2.6%	0.1%	20.1%	19.7%	3.6%	2.7%
Pediatric Medicine	41.5%	\$907,151	20.3%	1.7% - 81.2%	41.5%	45.5%	45.5%	20.0%	20.0%
Physician Assistant	9.4%	\$874,488	9.7%	(9.5%) - 28.4%	0.0%	44.2%	40.2%	13.3%	0.0%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	0.2%	\$714,453	0.2%	(0.3%) - 0.6%	0.2%	8.2%	8.2%	1.2%	1.2%
Clinical Nurse Specialist	13.0%	\$608,858	12.2%	(10.9%) - 36.8%	13.0%	40.6%	40.6%	16.7%	16.7%
Allergy/Immunology	21.3%	\$525,211	13.1%	(4.5%) - 47.0%	21.3%	21.3%	21.3%	33.3%	33.3%
Physical Medicine and Rehabilitation	4.0%	\$525,211	3.2%	(2.3%) - 10.3%	4.0%	25.2%	25.2%	5.6%	5.6%
Optometry	1.3%	\$385,051	1.3%	(1.2%) - 3.9%	1.3%	28.0%	28.0%	2.4%	2.4%
Obstetrics/Gynecology	2.3%	\$258,371	2.4%	(2.4%) - 7.0%	2.3%	30.2%	30.2%	5.6%	5.6%
General Practice	2.1%	\$187,686	2.6%	(3.0%) - 7.2%	2.1%	11.6%	11.6%	9.1%	9.1%
Multispecialty Clinic or Group Practice	0.7%	\$135,321	4.7%	(8.5%) - 9.9%	0.7%	3.3%	3.3%	14.3%	14.3%
Osteopathic Manipulative Therapy	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	65.7%	65.7%	0.0%	0.0%
Neurosurgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Plastic and Reconstructive Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	22.3%	22.3%	0.0%	0.0%
Nuclear Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Certified Registered Nurse Anesthetist (CRNA)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	26.2%	26.2%	0.0%	0.0%
Ambulatory Surgical Center	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	23.3%	23.3%	0.0%	0.0%
Public Health or Welfare Agencies (Federal, State,	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Portable X-Ray Supplier (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	26.7%	26.7%	0.0%	0.0%
Audiologist (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	16.9%	16.9%	0.0%	0.0%
Pain Management	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	66.4%	66.4%	0.0%	0.0%
Vascular Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	4.1%	4.1%	0.0%	0.0%
Cardiac Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	78.7%	78.7%	0.0%	0.0%
Clinical Social Worker	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	37.8%	37.8%	0.0%	0.0%
Hematology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Interventional Radiology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

# NHIC MA/ME/NH/VT

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
All Types	9.6%	\$319,026,915	1.0%	7.7% - 11.5%	6.0%	22.8%	20.2%	12.0%	8.8%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

# Noridian AZ/HI/NV/AK/OR/WA

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Cardiology	31.9%	\$134,062,501	12.5%	7.3% - 56.4%	30.8%	38.5%	37.6%	18.8%	15.6%
Internal Medicine	14.4%	\$89,435,997	3.5%	7.5% - 21.4%	9.9%	21.9%	18.1%	18.0%	13.3%
Family Practice	16.6%	\$48,200,284	3.2%	10.4% - 22.8%	10.9%	29.6%	25.6%	17.3%	12.2%
Hematology/Oncology	19.2%	\$25,148,953	10.1%	(0.5%) - 38.9%	18.9%	19.4%	19.1%	16.7%	14.9%
Gastroenterology	22.4%	\$23,717,791	9.4%	4.0% - 40.8%	22.4%	41.4%	41.4%	33.3%	33.3%
Diagnostic Radiology	4.8%	\$18,517,861	1.9%	1.1% - 8.6%	0.4%	18.7%	15.5%	7.3%	0.4%
Neurology	27.8%	\$18,115,385	9.9%	8.3% - 47.3%	27.8%	34.0%	34.0%	27.6%	27.6%
Clinical Laboratory (Billing Independently)	10.1%	\$15,561,792	3.1%	4.1% - 16.1%	7.9%	28.9%	27.6%	6.9%	3.8%
Anesthesiology	14.0%	\$12,541,228	9.6%	(4.9%) - 32.9%	14.0%	21.8%	21.8%	11.1%	11.1%
Infectious Disease	80.0%	\$12,207,999	9.2%	61.9% - 98.1%	80.0%	96.2%	96.2%	58.3%	58.3%
Ambulatory Surgical Center	6.4%	\$11,218,060	6.5%	(6.4%) - 19.2%	6.4%	23.6%	23.6%	5.0%	5.0%
Emergency Medicine	8.8%	\$9,834,645	3.9%	1.1% - 16.5%	2.8%	20.5%	15.9%	9.7%	5.1%
Ophthalmology	2.9%	\$9,490,416	1.8%	(0.6%) - 6.3%	2.9%	13.5%	13.5%	5.9%	5.9%
Chiropractic	12.1%	\$8,707,464	7.0%	(1.7%) - 25.8%	12.1%	23.1%	23.1%	13.5%	13.5%
General Surgery	10.6%	\$8,394,983	8.7%	(6.5%) - 27.8%	10.6%	32.4%	32.4%	9.4%	9.4%
Physical Therapist in Private Practice	8.6%	\$7,987,009	4.2%	0.3% - 16.8%	8.3%	31.5%	31.3%	8.0%	7.1%
Vascular Surgery	21.9%	\$7,444,792	10.9%	0.5% - 43.2%	14.3%	24.6%	17.6%	30.8%	25.0%
Orthopedic Surgery	2.5%	\$6,809,581	1.5%	(0.4%) - 5.4%	2.5%	16.4%	16.4%	17.5%	17.5%
Physical Medicine and Rehabilitation	18.3%	\$6,332,860	10.6%	(2.6%) - 39.1%	15.0%	29.0%	26.6%	20.6%	18.2%
Pulmonary Disease	8.2%	\$6,224,367	5.3%	(2.2%) - 18.6%	6.2%	11.3%	9.4%	11.6%	7.3%
Podiatry	8.3%	\$6,123,373	4.3%	(0.3%) - 16.8%	8.3%	20.3%	20.3%	12.3%	12.3%
Nephrology	13.3%	\$5,740,147	8.6%	(3.6%) - 30.2%	13.3%	52.2%	52.2%	13.8%	13.8%
Nurse Practitioner	9.9%	\$5,438,915	4.0%	2.0% - 17.7%	6.1%	24.0%	21.3%	13.8%	6.7%
General Practice	16.3%	\$4,589,468	10.5%	(4.3%) - 36.8%	2.0%	41.5%	30.0%	16.7%	9.1%
Medical Oncology	2.8%	\$4,368,231	2.9%	(2.8%) - 8.4%	2.8%	4.2%	4.2%	7.1%	7.1%
Otolaryngology	16.9%	\$3,565,281	12.9%	(8.4%) - 42.2%	16.9%	37.9%	37.9%	11.1%	11.1%

**Noridian AZ/HI/NV/AK/OR/WA**

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Dermatology	4.2%	\$3,551,032	3.0%	(1.8%) - 10.1%	4.2%	16.9%	16.9%	5.7%	5.7%
Urology	3.6%	\$3,481,286	2.9%	(2.0%) - 9.2%	3.6%	33.1%	33.1%	10.0%	10.0%
Physician Assistant	14.2%	\$2,857,324	8.0%	(1.5%) - 29.8%	14.2%	23.7%	23.7%	17.6%	17.6%
Obstetrics/Gynecology	13.0%	\$2,590,841	11.6%	(9.8%) - 35.8%	13.0%	34.6%	34.6%	12.5%	12.5%
Optometry	8.7%	\$2,359,105	8.3%	(7.5%) - 25.0%	8.7%	28.3%	28.3%	4.5%	4.5%
Pathology	3.4%	\$2,055,874	2.6%	(1.7%) - 8.6%	3.4%	6.3%	6.3%	4.4%	4.4%
Allergy/Immunology	26.1%	\$1,778,391	16.1%	(5.4%) - 57.6%	26.1%	26.1%	26.1%	10.0%	10.0%
Rheumatology	4.9%	\$1,437,412	5.1%	(5.2%) - 14.9%	0.0%	22.9%	19.8%	8.0%	0.0%
Other Provider Types	12.1%	\$1,362,416	4.6%	3.1% - 21.1%	12.1%	33.1%	33.1%	13.3%	13.3%
Occupational Therapist in Private Practice	100.0%	\$724,955	0.0%	0.0% - 0.0%	100.0%	100.0%	100.0%	50.0%	50.0%
Plastic and Reconstructive Surgery	6.9%	\$501,219	4.3%	(1.6%) - 15.3%	6.9%	6.9%	6.9%	16.7%	16.7%
Radiation Oncology	0.5%	\$287,482	0.6%	(0.7%) - 1.7%	0.0%	19.8%	19.5%	4.5%	0.0%
Interventional Radiology	0.3%	\$134,242	0.6%	(0.8%) - 1.4%	-0.2%	13.0%	12.6%	10.0%	5.3%
Endocrinology	1.3%	\$74,995	1.7%	(2.0%) - 4.7%	1.3%	18.7%	18.7%	14.3%	14.3%
Osteopathic Manipulative Therapy	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Neurosurgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	3.5%	3.5%	0.0%	0.0%
Psychiatry	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	38.7%	38.7%	0.0%	0.0%
Thoracic Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pediatric Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Geriatric Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	17.1%	17.1%	0.0%	0.0%
Certified Registered Nurse Anesthetist (CRNA)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	14.3%	14.3%	0.0%	0.0%
Independent Diagnostic Testing Facility (IDTF)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	25.8%	25.8%	0.0%	0.0%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	36.7%	36.7%	0.0%	0.0%
Public Health or Welfare Agencies (Federal, State,	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Portable X-Ray Supplier (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	100.0%	100.0%	0.0%	0.0%
Audiologist (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	100.0%	100.0%	0.0%	0.0%
Clinical Psychologist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	25.5%	25.5%	0.0%	0.0%
Multispecialty Clinic or Group Practice	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	10.0%	10.0%	0.0%	0.0%
Pain Management	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Mass Immunization Roster Billers (Mass Immunizers)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Cardiac Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Hematology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Gynecological/Oncology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

## Noridian AZ/HI/NV/AK/OR/WA

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
All Types	10.7%	\$532,975,956	1.6%	7.5% - 13.9%	8.9%	25.3%	24.1%	12.1%	9.1%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## Noridian CO/ND/SD/WY/IA

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Internal Medicine	14.0%	\$27,559,969	3.6%	6.9% - 21.0%	9.9%	19.6%	16.1%	13.9%	11.0%
Family Practice	14.8%	\$25,139,515	4.1%	6.7% - 22.9%	9.8%	25.3%	21.5%	12.6%	7.4%
Neurology	35.5%	\$15,630,596	18.3%	(0.3%) - 71.4%	4.1%	64.2%	56.3%	18.5%	15.4%
Ophthalmology	14.6%	\$13,556,040	8.7%	(2.3%) - 31.6%	14.6%	21.9%	21.9%	5.8%	5.8%
Cardiology	9.0%	\$12,290,970	3.4%	2.3% - 15.7%	7.0%	19.8%	18.2%	11.9%	9.2%
Hematology/Oncology	8.3%	\$11,523,382	7.4%	(6.2%) - 22.8%	1.3%	21.7%	16.7%	5.9%	4.5%
Independent Diagnostic Testing Facility (IDTF)	82.4%	\$10,863,608	18.8%	45.5% - 119.3%	82.4%	84.2%	84.2%	50.0%	50.0%
Urology	8.2%	\$8,179,702	7.4%	(6.3%) - 22.8%	8.2%	11.8%	11.8%	5.5%	5.5%
Nephrology	28.6%	\$5,073,482	16.3%	(3.3%) - 60.4%	7.5%	28.6%	7.5%	20.8%	13.6%
Radiation Oncology	15.7%	\$4,536,493	11.0%	(6.0%) - 37.3%	15.7%	47.6%	47.6%	22.2%	22.2%
Clinical Laboratory (Billing Independently)	9.4%	\$4,211,076	4.0%	1.6% - 17.3%	6.0%	22.0%	19.4%	4.0%	2.2%
Diagnostic Radiology	4.2%	\$4,151,295	1.8%	0.6% - 7.8%	2.0%	30.8%	29.8%	4.2%	2.5%
Physical Therapist in Private Practice	17.6%	\$3,147,495	8.3%	1.3% - 33.8%	17.6%	34.3%	34.3%	12.3%	12.3%
Infectious Disease	37.0%	\$2,864,705	23.2%	(8.4%) - 82.5%	23.2%	43.8%	32.9%	31.3%	26.7%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	7.2%	\$2,788,081	7.2%	(7.0%) - 21.4%	7.2%	29.1%	29.1%	8.0%	8.0%
Chiropractic	7.1%	\$2,680,163	2.7%	1.7% - 12.5%	4.5%	23.2%	21.4%	7.7%	5.5%
Physical Medicine and Rehabilitation	66.8%	\$2,544,487	21.9%	23.9% - 109.6%	66.8%	77.3%	77.3%	45.5%	45.5%
General Practice	14.2%	\$2,306,090	11.2%	(7.8%) - 36.1%	14.2%	35.9%	35.9%	20.0%	20.0%
Anesthesiology	8.2%	\$2,099,300	5.3%	(2.3%) - 18.6%	8.2%	31.2%	31.2%	20.0%	20.0%
Certified Registered Nurse Anesthetist (CRNA)	11.4%	\$1,760,576	9.0%	(6.2%) - 29.1%	0.0%	33.8%	27.6%	9.1%	0.0%
Pulmonary Disease	10.9%	\$1,690,398	9.0%	(6.7%) - 28.6%	2.1%	19.1%	11.9%	7.1%	3.7%
Physician Assistant	10.5%	\$1,462,607	6.6%	(2.5%) - 23.5%	4.7%	28.9%	25.3%	5.9%	4.0%
Obstetrics/Gynecology	24.9%	\$1,419,772	20.6%	(15.5%) - 65.3%	24.9%	31.3%	31.3%	20.0%	20.0%

**Noridian**  
**CO/ND/SD/WY/IA**

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Portable X-Ray Supplier (Billing Independently)	29.7%	\$1,416,549	27.6%	(24.4%) - 83.9%	0.0%	47.9%	33.2%	21.4%	0.0%
Orthopedic Surgery	2.6%	\$1,323,863	1.7%	(0.8%) - 5.9%	2.6%	17.0%	17.0%	6.2%	6.2%
Cardiac Surgery	4.6%	\$1,286,175	6.4%	(8.0%) - 17.2%	0.0%	4.6%	0.0%	11.1%	0.0%
Psychiatry	4.0%	\$1,042,476	4.1%	(4.0%) - 11.9%	4.0%	26.4%	26.4%	2.0%	2.0%
Optometry	2.8%	\$879,456	2.8%	(2.7%) - 8.3%	2.8%	15.7%	15.7%	2.8%	2.8%
Podiatry	1.6%	\$680,360	1.2%	(0.8%) - 3.9%	1.6%	8.2%	8.2%	5.0%	5.0%
Endocrinology	19.7%	\$669,859	12.0%	(3.9%) - 43.2%	11.5%	19.7%	11.5%	33.3%	20.0%
Neurosurgery	6.8%	\$663,101	9.1%	(11.1%) - 24.6%	6.8%	15.7%	15.7%	27.3%	27.3%
Gastroenterology	2.7%	\$547,074	2.1%	(1.4%) - 6.7%	2.7%	39.3%	39.3%	3.7%	3.7%
Pathology	2.2%	\$519,211	1.9%	(1.5%) - 5.9%	1.2%	11.3%	10.4%	5.4%	2.8%
General Surgery	0.7%	\$468,579	1.4%	(2.1%) - 3.5%	0.7%	20.6%	20.6%	4.8%	4.8%
Pediatric Medicine	17.5%	\$466,292	10.7%	(3.5%) - 38.5%	17.5%	25.5%	25.5%	27.3%	27.3%
Allergy/Immunology	9.8%	\$154,391	12.0%	(13.7%) - 33.3%	9.8%	9.8%	9.8%	20.0%	20.0%
Nurse Practitioner	1.6%	\$88,892	6.0%	(10.1%) - 13.4%	-3.7%	18.5%	14.8%	18.2%	5.3%
Geriatric Medicine	1.1%	\$57,078	1.5%	(1.9%) - 4.2%	0.0%	20.4%	0.0%	25.0%	0.0%
Other Provider Types	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	44.0%	44.0%	0.0%	0.0%
Dermatology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	29.9%	29.9%	0.0%	0.0%
Plastic and Reconstructive Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Thoracic Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Nuclear Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Ambulatory Surgical Center	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	62.0%	62.0%	0.0%	0.0%
Public Health or Welfare Agencies (Federal, State,	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Audiologist (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Occupational Therapist in Private Practice	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	25.2%	25.2%	0.0%	0.0%
Clinical Psychologist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	33.1%	33.1%	0.0%	0.0%
Pain Management	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Mass Immunization Roster Billers (Mass Immunizers	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	100.0%	100.0%	0.0%	0.0%
Vascular Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	100.0%	100.0%	0.0%	0.0%
Clinical Social Worker	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	50.5%	50.5%	0.0%	0.0%
Hematology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	8.4%	8.4%	0.0%	0.0%
Clinical Nurse Specialist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Medical Oncology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	20.2%	20.2%	0.0%	0.0%
Emergency Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	24.3%	24.3%	0.0%	0.0%
Interventional Radiology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	54.1%	54.1%	0.0%	0.0%

**Noridian  
CO/ND/SD/WY/IA**

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Rheumatology	-1.8%	-\$134,117	2.0%	(5.7%) - 2.2%	-1.8%	20.7%	20.7%	4.5%	4.5%
Otolaryngology	-0.7%	-\$134,429	0.8%	(2.3%) - 0.8%	-0.7%	45.8%	45.8%	4.0%	4.0%
Critical Care (Intensivists)	-1.9%	-\$214,796	2.2%	(6.2%) - 2.5%	-1.9%	2.8%	2.8%	7.7%	7.7%
All Types	9.5%	\$177,259,816	1.4%	6.7% - 12.2%	6.3%	29.5%	27.5%	9.1%	6.8%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

**Palmetto GBA OH/WV**

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Internal Medicine	21.0%	\$122,068,329	3.9%	13.4% - 28.6%	17.6%	30.0%	27.3%	16.5%	13.4%
Cardiology	14.6%	\$66,867,116	4.8%	5.2% - 24.0%	12.9%	24.7%	23.5%	19.1%	15.8%
Hematology/Oncology	19.1%	\$37,420,062	12.4%	(5.3%) - 43.4%	5.9%	19.8%	6.8%	16.2%	9.7%
Nephrology	32.2%	\$25,288,264	12.9%	6.9% - 57.4%	19.2%	42.2%	33.0%	15.9%	9.8%
Endocrinology	66.0%	\$17,926,177	21.9%	23.2% -108.9%	66.0%	66.0%	66.0%	80.0%	80.0%
General Surgery	19.4%	\$16,188,445	8.3%	3.2% - 35.6%	11.1%	20.4%	12.3%	21.7%	14.3%
Pulmonary Disease	14.5%	\$14,938,373	6.4%	1.9% - 27.0%	10.7%	21.4%	18.3%	15.5%	13.0%
Physical Medicine and Rehabilitation	33.4%	\$13,642,832	20.3%	(6.3%) - 73.2%	18.7%	43.5%	33.3%	32.3%	16.0%
Family Practice	5.2%	\$11,769,555	1.8%	1.6% - 8.8%	5.2%	22.8%	22.8%	6.9%	6.6%
Certified Registered Nurse Anesthetist (CRNA)	44.7%	\$11,126,310	16.7%	12.0% - 77.4%	44.7%	53.3%	53.3%	26.7%	26.7%
Orthopedic Surgery	6.7%	\$9,756,640	3.7%	(0.6%) - 13.9%	6.2%	17.4%	17.1%	9.5%	8.5%
Emergency Medicine	7.3%	\$9,622,172	3.0%	1.4% - 13.2%	4.2%	15.8%	13.3%	12.5%	8.7%
Physical Therapist in Private Practice	33.3%	\$8,849,201	14.9%	4.0% - 62.6%	33.3%	42.6%	42.6%	31.9%	31.9%
Anesthesiology	9.1%	\$8,657,843	5.1%	(0.8%) - 19.1%	9.1%	12.6%	12.6%	11.4%	11.4%
Neurology	10.3%	\$7,828,844	4.6%	1.4% - 19.3%	6.9%	23.2%	20.7%	14.0%	9.8%
Diagnostic Radiology	2.9%	\$6,354,228	1.5%	(0.1%) - 5.9%	2.6%	12.4%	11.8%	4.1%	2.8%
Pathology	13.7%	\$6,185,929	8.4%	(2.7%) - 30.1%	13.1%	28.0%	27.6%	12.7%	9.4%
General Practice	14.2%	\$6,176,662	6.6%	1.3% - 27.1%	14.2%	20.2%	20.2%	14.3%	14.3%
Ophthalmology	1.5%	\$4,426,863	1.0%	(0.4%) - 3.5%	1.3%	15.5%	15.4%	5.3%	4.3%
Podiatry	4.9%	\$4,400,573	2.5%	(0.0%) - 9.9%	3.7%	21.4%	20.5%	6.7%	4.5%
Ambulance Service Supplier (e.g., private ambulanc	2.4%	\$4,324,720	2.4%	(2.4%) - 7.2%	2.4%	15.5%	15.5%	2.7%	2.7%



**Palmetto GBA OH/WV**

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Otolaryngology	13.0%	\$3,727,805	9.3%	(5.2%) - 31.2%	10.2%	61.0%	60.5%	12.5%	8.7%
Psychiatry	8.8%	\$3,726,728	8.4%	(7.7%) - 25.4%	0.0%	30.8%	25.8%	6.5%	0.0%
Vascular Surgery	31.0%	\$3,675,010	26.0%	(19.9%) - 81.9%	31.0%	33.8%	33.8%	30.0%	30.0%
Critical Care (Intensivists)	100.0%	\$3,195,754	0.0%	0.0% - 0.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Clinical Laboratory (Billing Independently)	3.3%	\$3,018,404	2.2%	(1.0%) - 7.6%	2.8%	15.9%	15.4%	4.5%	3.7%
Infectious Disease	34.9%	\$2,875,317	27.3%	(18.6%) - 88.3%	34.9%	36.3%	36.3%	14.3%	14.3%
Interventional Radiology	44.5%	\$2,692,795	30.4%	(15.0%) -104.0%	44.5%	44.5%	44.5%	22.2%	22.2%
Portable X-Ray Supplier (Billing Independently)	50.0%	\$2,403,388	43.3%	(34.9%) -134.9%	50.0%	69.0%	69.0%	33.3%	33.3%
Clinical Psychologist	13.1%	\$2,025,845	13.4%	(13.1%) - 39.3%	0.0%	58.2%	55.3%	6.3%	0.0%
Optometry	6.4%	\$1,617,056	6.3%	(6.0%) - 18.8%	0.0%	18.0%	13.2%	7.4%	0.0%
Dermatology	1.4%	\$1,401,994	1.2%	(1.0%) - 3.8%	1.4%	4.6%	4.6%	4.3%	4.3%
Rheumatology	1.7%	\$1,236,065	2.0%	(2.3%) - 5.7%	1.7%	1.7%	1.7%	17.4%	17.4%
Nurse Practitioner	12.4%	\$1,099,658	12.1%	(11.4%) - 36.1%	0.0%	43.7%	33.0%	25.0%	10.0%
Chiropractic	2.7%	\$628,592	3.4%	(4.1%) - 9.4%	2.7%	26.7%	26.7%	7.0%	7.0%
Independent Diagnostic Testing Facility (IDTF)	2.9%	\$449,302	3.4%	(3.8%) - 9.5%	2.9%	11.5%	11.5%	11.1%	11.1%
Obstetrics/Gynecology	1.9%	\$412,237	2.2%	(2.4%) - 6.1%	0.0%	18.5%	17.2%	5.0%	0.0%
Urology	0.2%	\$406,203	0.1%	(0.1%) - 0.4%	0.1%	4.5%	4.5%	4.8%	3.2%
Gastroenterology	0.4%	\$254,928	0.4%	(0.4%) - 1.3%	0.4%	47.3%	47.3%	3.4%	3.4%
Other Provider Types	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Allergy/Immunology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	38.9%	38.9%	0.0%	0.0%
Neurosurgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Plastic and Reconstructive Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	89.2%	89.2%	0.0%	0.0%
Thoracic Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	9.9%	9.9%	0.0%	0.0%
Nuclear Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pediatric Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Geriatric Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Ambulatory Surgical Center	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	19.0%	19.0%	16.7%	16.7%
Public Health or Welfare Agencies (Federal, State,	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	27.2%	27.2%	0.0%	0.0%
Occupational Therapist in Private Practice	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Multispecialty Clinic or Group Practice	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	79.9%	79.9%	0.0%	0.0%
Pain Management	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Clinical Social Worker	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	59.3%	59.3%	0.0%	0.0%
Clinical Nurse Specialist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Medical Oncology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	14.3%	14.3%



## Palmetto GBA OH/WV

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Radiation Oncology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	15.9%	15.9%	0.0%	0.0%
Physician Assistant	-10.0%	-\$606,396	10.3%	(30.2%) - 10.1%	-10.0%	16.8%	16.8%	14.3%	14.3%
All Types	10.6%	\$448,059,825	1.2%	8.2% - 13.1%	8.2%	22.9%	21.1%	11.4%	9.1%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## Palmetto GBA SC

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Internal Medicine	17.1%	\$24,320,801	5.4%	6.4% - 27.7%	15.3%	23.5%	22.0%	14.0%	11.1%
Rheumatology	69.0%	\$16,307,585	22.0%	25.9% -112.1%	8.5%	79.2%	62.6%	10.9%	2.0%
Cardiology	13.4%	\$14,027,516	6.1%	1.4% - 25.4%	10.6%	24.5%	22.4%	17.4%	13.7%
Hematology/Oncology	24.0%	\$13,446,094	13.1%	(1.8%) - 49.8%	21.8%	28.0%	26.1%	19.4%	15.3%
Radiation Oncology	49.2%	\$12,145,127	21.0%	8.1% - 90.3%	49.2%	58.0%	58.0%	46.7%	46.7%
Diagnostic Radiology	13.9%	\$9,392,194	5.8%	2.6% - 25.2%	9.8%	18.0%	14.2%	12.1%	6.3%
Family Practice	8.5%	\$6,086,711	2.1%	4.3% - 12.6%	6.6%	16.7%	15.1%	12.0%	10.9%
Ambulatory Surgical Center	15.3%	\$5,593,926	14.5%	(13.1%) - 43.7%	15.3%	20.8%	20.8%	16.7%	16.7%
Ophthalmology	8.8%	\$5,099,928	5.2%	(1.4%) - 19.1%	7.3%	13.3%	11.9%	6.4%	4.9%
Nephrology	17.0%	\$4,759,933	9.5%	(1.7%) - 35.7%	17.0%	25.5%	25.5%	26.8%	26.8%
Independent Diagnostic Testing Facility (IDTF)	10.3%	\$4,673,663	9.5%	(8.2%) - 28.9%	0.6%	17.7%	9.6%	13.6%	5.0%
Psychiatry	46.1%	\$3,840,421	17.4%	12.0% - 80.2%	44.9%	61.1%	60.5%	28.6%	26.5%
Orthopedic Surgery	6.5%	\$3,675,736	4.0%	(1.3%) - 14.2%	6.5%	11.5%	11.5%	13.2%	13.2%
Anesthesiology	17.7%	\$3,284,695	7.5%	3.0% - 32.3%	7.0%	22.0%	12.5%	14.0%	5.1%
Physical Medicine and Rehabilitation	24.2%	\$3,151,942	11.0%	2.6% - 45.9%	9.3%	39.8%	30.7%	26.3%	9.7%
Gastroenterology	11.2%	\$3,085,075	10.0%	(8.5%) - 30.8%	10.0%	26.3%	25.5%	25.5%	23.9%
General Surgery	8.9%	\$3,052,739	4.3%	0.5% - 17.4%	8.9%	15.0%	15.0%	21.2%	21.2%
Physical Therapist in Private Practice	22.1%	\$2,417,153	10.0%	2.5% - 41.6%	22.1%	25.2%	25.2%	22.4%	22.4%
Pathology	20.8%	\$2,364,895	8.2%	4.8% - 36.9%	9.2%	44.4%	39.0%	16.4%	6.1%
Infectious Disease	70.8%	\$2,249,004	27.2%	17.5% -124.1%	69.1%	70.8%	69.1%	66.7%	62.5%
Pulmonary Disease	16.2%	\$2,138,424	8.7%	(0.9%) - 33.3%	14.7%	28.7%	27.7%	23.1%	20.6%
Neurology	10.7%	\$2,078,659	4.6%	1.7% - 19.7%	7.9%	24.3%	22.3%	23.6%	20.8%
Chiropractic	19.6%	\$1,290,226	8.7%	2.6% - 36.7%	17.3%	33.7%	32.2%	13.8%	12.5%
Ambulance Service Supplier (e.g., private ambulance companies, funeral	2.6%	\$1,174,104	2.2%	(1.7%) - 6.9%	2.6%	19.1%	19.1%	2.2%	2.2%

# Palmetto GBA SC

Carrier Provider Type (homes)	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Medical Oncology	1.4%	\$977,717	1.2%	(1.0%) - 3.8%	0.0%	1.4%	0.0%	8.0%	0.0%
Vascular Surgery	41.0%	\$732,537	24.0%	(6.0%) - 88.0%	20.5%	41.0%	20.5%	42.9%	20.0%
Dermatology	2.1%	\$732,479	2.8%	(3.3%) - 7.5%	2.1%	2.8%	2.8%	5.6%	5.6%
Obstetrics/Gynecology	15.7%	\$606,194	8.1%	(0.1%) - 31.5%	9.3%	24.7%	19.6%	18.4%	16.2%
Podiatry	5.2%	\$593,837	5.7%	(5.9%) - 16.4%	5.2%	7.4%	7.4%	14.9%	14.9%
Otolaryngology	4.5%	\$500,869	3.3%	(1.9%) - 11.0%	4.5%	13.0%	13.0%	6.5%	6.5%
General Practice	12.5%	\$478,291	6.7%	(0.6%) - 25.6%	12.5%	22.3%	22.3%	32.0%	32.0%
Urology	0.8%	\$473,672	0.6%	(0.3%) - 2.0%	0.8%	2.8%	2.8%	5.6%	5.6%
Pain Management	29.5%	\$409,807	30.4%	(30.0%) - 89.0%	29.5%	36.1%	36.1%	25.0%	25.0%
Emergency Medicine	1.8%	\$386,132	3.0%	(4.2%) - 7.7%	1.8%	9.9%	9.9%	12.5%	12.5%
Nurse Practitioner	7.8%	\$157,178	6.0%	(3.9%) - 19.6%	7.8%	22.7%	22.7%	15.8%	15.8%
Interventional Radiology	11.0%	\$49,371	13.3%	(15.1%) - 37.1%	0.0%	11.0%	0.0%	25.0%	0.0%
Allergy/Immunology	1.5%	\$21,134	1.8%	(2.0%) - 5.0%	1.5%	7.7%	7.7%	11.1%	11.1%
Clinical Laboratory (Billing Independently)	0.3%	\$17,323	0.4%	(0.4%) - 1.1%	0.3%	8.9%	8.9%	2.9%	2.9%
Other Provider Types	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	5.4%	5.4%	62.5%	62.5%
Thoracic Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	97.6%	97.6%	0.0%	0.0%
Nuclear Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pediatric Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Geriatric Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	35.5%	35.5%	11.1%	11.1%
Optometry	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	8.0%	8.0%	0.0%	0.0%
Certified Registered Nurse Anesthetist (CRNA)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	25.3%	25.3%	4.5%	4.5%
Endocrinology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	33.4%	33.4%	0.0%	0.0%
Public Health or Welfare Agencies (Federal, State,	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	47.2%	47.2%	0.0%	0.0%
Portable X-Ray Supplier (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Occupational Therapist in Private Practice	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Clinical Psychologist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	37.5%	37.5%	0.0%	0.0%
Multispecialty Clinic or Group Practice	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Cardiac Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Clinical Social Worker	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	37.5%	37.5%	0.0%	0.0%
Critical Care (Intensivists)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Physician Assistant	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	40.8%	40.8%	0.0%	0.0%
Gynecological/Oncology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
All Types	13.1%	\$155,793,095	1.9%	9.4% - 16.9%	9.9%	22.1%	19.5%	14.3%	11.6%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

# TrailBlazer MD/DC/DE/VA

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Internal Medicine	17.0%	\$91,623,720	3.4%	10.4% - 23.7%	12.5%	32.3%	29.3%	13.4%	10.7%
Cardiology	14.1%	\$57,661,519	4.5%	5.2% - 23.1%	5.7%	33.5%	28.6%	19.1%	9.9%
Pulmonary Disease	30.9%	\$30,608,058	17.3%	(3.0%) - 64.8%	11.4%	35.0%	18.1%	27.3%	13.5%
Neurosurgery	22.7%	\$25,287,299	20.5%	(17.5%) - 63.0%	22.7%	38.4%	38.4%	20.0%	20.0%
Family Practice	10.0%	\$18,710,041	3.4%	3.3% - 16.6%	5.0%	19.9%	16.0%	10.4%	6.4%
Emergency Medicine	21.5%	\$17,070,291	9.0%	3.9% - 39.0%	2.4%	31.6%	17.6%	23.0%	4.1%
Ophthalmology	4.3%	\$14,748,517	2.9%	(1.4%) - 10.0%	3.4%	17.2%	16.5%	4.1%	2.7%
Psychiatry	15.1%	\$10,742,246	5.5%	4.3% - 25.9%	13.7%	37.8%	37.0%	19.4%	18.2%
Physical Therapist in Private Practice	16.5%	\$10,495,040	7.2%	2.4% - 30.6%	13.5%	26.2%	23.9%	14.1%	11.5%
Pain Management	79.8%	\$9,750,009	10.8%	58.5% -101.0%	0.0%	83.2%	50.4%	50.0%	0.0%
Vascular Surgery	31.4%	\$8,355,259	18.8%	(5.5%) - 68.4%	27.8%	31.4%	27.8%	30.8%	18.2%
Orthopedic Surgery	2.3%	\$7,597,988	1.8%	(1.2%) - 5.9%	0.2%	6.1%	4.1%	12.1%	8.7%
Anesthesiology	19.2%	\$7,124,443	11.0%	(2.3%) - 40.7%	7.7%	48.5%	44.0%	12.0%	4.3%
Gastroenterology	10.4%	\$6,735,374	7.2%	(3.7%) - 24.6%	10.4%	32.5%	32.5%	11.1%	11.1%
Diagnostic Radiology	2.7%	\$6,229,925	1.2%	0.4% - 5.1%	2.3%	14.8%	14.5%	5.6%	4.3%
Chiropractic	23.6%	\$6,095,085	8.2%	7.4% - 39.7%	21.6%	58.9%	58.4%	13.0%	11.8%
Hematology/Oncology	5.0%	\$5,211,402	2.9%	(0.6%) - 10.7%	3.7%	32.3%	31.6%	9.8%	6.3%
Multispecialty Clinic or Group Practice	23.7%	\$5,128,933	16.7%	(9.0%) - 56.5%	23.7%	56.9%	56.9%	27.3%	27.3%
Nurse Practitioner	22.8%	\$4,679,467	19.1%	(14.6%) - 60.3%	0.0%	27.4%	7.6%	12.5%	0.0%
Clinical Laboratory (Billing Independently)	4.9%	\$3,990,419	1.9%	1.1% - 8.7%	0.8%	23.6%	19.9%	6.7%	0.6%
Nephrology	4.7%	\$3,694,854	4.7%	(4.5%) - 14.0%	4.7%	12.6%	12.6%	3.8%	3.8%
Podiatry	9.4%	\$3,471,325	6.9%	(4.2%) - 23.0%	3.6%	40.6%	38.2%	10.2%	6.4%
Obstetrics/Gynecology	12.9%	\$3,391,264	8.1%	(2.9%) - 28.8%	12.9%	22.9%	22.9%	19.4%	19.4%
Critical Care (Intensivists)	53.9%	\$3,155,495	37.4%	(19.5%) -127.3%	0.0%	53.9%	0.0%	50.0%	0.0%
General Surgery	2.8%	\$2,814,382	2.1%	(1.3%) - 6.9%	1.7%	38.6%	38.1%	17.2%	15.8%
Infectious Disease	21.2%	\$2,670,312	14.7%	(7.7%) - 50.0%	0.0%	21.3%	0.2%	14.3%	0.0%
Otolaryngology	6.7%	\$2,585,435	4.3%	(1.8%) - 15.2%	6.7%	18.1%	18.1%	14.3%	14.3%
Occupational Therapist in Private Practice	100.0%	\$2,313,147	0.0%	100.0% -100.0%	100.0%	100.0%	100.0%	25.0%	25.0%
Physical Medicine and Rehabilitation	14.7%	\$2,275,424	12.8%	(10.3%) - 39.7%	14.7%	22.6%	22.6%	18.8%	18.8%
Certified Registered Nurse Anesthetist (CRNA)	15.1%	\$1,984,274	14.9%	(14.1%) - 44.3%	15.1%	21.7%	21.7%	12.5%	12.5%
Radiation Oncology	3.3%	\$1,707,972	3.3%	(3.2%) - 9.8%	0.0%	20.3%	18.1%	3.6%	0.0%
Neurology	3.3%	\$1,639,950	2.5%	(1.6%) - 8.1%	3.3%	11.0%	11.0%	6.9%	6.9%
Endocrinology	6.5%	\$1,130,890	10.2%	(13.5%) - 26.4%	6.5%	7.4%	7.4%	11.1%	11.1%
Urology	0.4%	\$900,739	0.4%	(0.3%) - 1.2%	0.4%	14.9%	14.9%	8.3%	8.3%
Audiologist (Billing Independently)	100.0%	\$765,899	0.0%	100.0% -100.0%	100.0%	100.0%	100.0%	50.0%	50.0%

**TrailBlazer MD/DC/DE/VA**

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Dermatology	0.8%	\$518,090	0.8%	(0.8%) - 2.4%	0.8%	15.3%	15.3%	2.1%	2.1%
Interventional Radiology	9.3%	\$477,357	8.5%	(7.3%) - 25.9%	9.3%	22.0%	22.0%	16.7%	16.7%
General Practice	1.7%	\$394,487	1.7%	(1.6%) - 4.9%	1.7%	44.1%	44.1%	2.3%	2.3%
Pathology	0.7%	\$217,911	0.7%	(0.8%) - 2.1%	0.7%	12.4%	12.4%	2.4%	2.4%
Other Provider Types	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	2.4%	2.4%	0.0%	0.0%
Allergy/Immunology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	21.9%	21.9%	0.0%	0.0%
Plastic and Reconstructive Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Thoracic Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	26.1%	26.1%	0.0%	0.0%
Nuclear Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pediatric Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	63.3%	63.3%	0.0%	0.0%
Geriatric Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Independent Diagnostic Testing Facility (IDTF)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Ambulatory Surgical Center	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	31.3%	31.3%	0.0%	0.0%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	6.4%	6.4%	0.0%	0.0%
Public Health or Welfare Agencies (Federal, State,	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Portable X-Ray Supplier (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	16.8%	16.8%	0.0%	0.0%
Clinical Psychologist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	25.2%	25.2%	0.0%	0.0%
Clinical Social Worker	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	49.7%	49.7%	0.0%	0.0%
Hematology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Clinical Nurse Specialist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	67.0%	67.0%	0.0%	0.0%
Rheumatology	-0.3%	-\$90,696	5.5%	(11.2%) - 10.5%	-0.3%	14.2%	14.2%	14.3%	14.3%
Optometry	-1.1%	-\$222,526	3.4%	(7.8%) - 5.6%	-1.1%	21.8%	21.8%	8.7%	8.7%
Physician Assistant	-8.8%	-\$468,729	9.9%	(28.2%) - 10.6%	-8.8%	-8.8%	-8.8%	16.7%	16.7%
Medical Oncology	-1.0%	-\$627,848	1.0%	(3.0%) - 0.9%	-1.0%	50.6%	50.6%	3.4%	3.4%
All Types	9.2%	\$382,544,443	1.1%	7.0% - 11.4%	5.5%	26.1%	23.7%	11.2%	7.5%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## TrailBlazer TX

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Cardiology	27.3%	\$107,171,261	7.1%	13.3% - 41.3%	14.6%	48.5%	42.5%	23.4%	15.9%
Internal Medicine	16.8%	\$101,868,569	4.6%	7.9% - 25.7%	13.5%	24.5%	21.8%	19.6%	15.7%
Hematology/Oncology	17.9%	\$57,935,814	11.1%	(3.9%) - 39.7%	13.7%	28.1%	25.0%	28.2%	9.7%
Family Practice	15.5%	\$46,290,591	3.9%	7.8% - 23.2%	12.5%	24.5%	22.1%	15.2%	13.1%
Urology	21.3%	\$40,143,894	13.1%	(4.3%) - 46.9%	19.0%	30.9%	29.1%	17.3%	16.5%
Nephrology	30.0%	\$39,540,693	8.7%	13.0% - 47.0%	27.1%	35.3%	32.8%	36.4%	26.9%
Diagnostic Radiology	13.4%	\$37,173,101	5.5%	2.6% - 24.3%	8.7%	28.5%	24.6%	14.4%	4.9%
Ophthalmology	9.3%	\$30,700,175	5.4%	(1.2%) - 19.8%	0.9%	15.5%	8.2%	9.7%	5.6%
Medical Oncology	10.4%	\$28,827,993	6.0%	(1.4%) - 22.2%	8.5%	19.9%	18.4%	22.0%	17.9%
Pulmonary Disease	36.5%	\$26,784,963	11.6%	13.9% - 59.2%	24.9%	50.7%	44.0%	30.4%	17.0%
Physical Medicine and Rehabilitation	44.5%	\$21,538,664	14.9%	15.4% - 73.6%	39.4%	49.6%	45.4%	43.7%	41.9%
Emergency Medicine	12.7%	\$19,841,612	5.5%	2.0% - 23.5%	4.0%	19.1%	11.6%	21.1%	12.5%
Independent Diagnostic Testing Facility (IDTF)	35.3%	\$18,884,582	12.7%	10.4% - 60.2%	26.7%	46.2%	40.3%	28.6%	16.7%
Gastroenterology	15.1%	\$16,943,156	7.8%	(0.3%) - 30.4%	11.6%	40.7%	39.0%	23.5%	22.0%
Orthopedic Surgery	13.5%	\$15,614,211	8.6%	(3.4%) - 30.5%	5.1%	45.9%	42.8%	9.5%	8.4%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	5.7%	\$15,228,972	2.9%	(0.1%) - 11.4%	5.7%	26.2%	26.2%	4.5%	4.5%
Anesthesiology	14.6%	\$12,109,699	7.7%	(0.4%) - 29.6%	7.1%	39.9%	36.3%	12.1%	6.5%
Psychiatry	23.1%	\$10,810,259	17.1%	(10.5%) - 56.7%	2.8%	41.1%	29.9%	17.5%	2.9%
Neurology	10.4%	\$10,776,709	8.0%	(5.2%) - 26.1%	8.1%	17.5%	15.6%	21.6%	19.4%
Nurse Practitioner	25.4%	\$9,225,519	9.1%	7.5% - 43.2%	22.6%	40.3%	38.6%	21.7%	20.0%
Otolaryngology	18.5%	\$7,415,204	13.0%	(7.0%) - 43.9%	18.5%	21.2%	21.2%	22.2%	22.2%
Physical Therapist in Private Practice	21.0%	\$5,699,592	16.6%	(11.5%) - 53.5%	8.0%	24.4%	12.5%	33.3%	15.4%
Podiatry	8.3%	\$5,576,572	4.0%	0.4% - 16.1%	6.0%	23.0%	21.4%	11.3%	8.3%
General Practice	36.0%	\$5,494,717	21.1%	(5.4%) - 77.4%	15.6%	36.0%	15.6%	20.0%	11.1%
Pathology	17.3%	\$4,936,965	11.0%	(4.3%) - 38.9%	9.0%	20.0%	12.2%	11.1%	7.7%
Chiropractic	26.6%	\$4,853,207	9.1%	8.8% - 44.3%	22.9%	57.8%	56.6%	13.7%	12.0%
Dermatology	5.0%	\$4,645,716	4.2%	(3.3%) - 13.3%	5.0%	25.6%	25.6%	4.2%	4.2%
Clinical Laboratory (Billing Independently)	3.0%	\$4,544,825	1.1%	0.8% - 5.1%	1.8%	16.6%	15.8%	3.6%	2.1%
Physician Assistant	18.3%	\$3,628,722	9.0%	0.6% - 36.0%	18.3%	29.5%	29.5%	23.8%	23.8%
Certified Registered Nurse Anesthetist (CRNA)	8.9%	\$3,221,115	9.3%	(9.3%) - 27.2%	8.9%	30.7%	30.7%	9.1%	9.1%
General Surgery	2.6%	\$2,591,264	1.8%	(0.9%) - 6.1%	2.6%	23.7%	23.7%	10.3%	10.3%
Public Health or Welfare Agencies (Federal, State,	18.2%	\$1,289,683	9.6%	(0.7%) - 37.1%	0.0%	25.4%	10.6%	13.6%	0.0%
Other Provider Types	29.5%	\$1,246,377	36.0%	(41.1%) - 100.0%	0.0%	35.0%	10.7%	33.3%	0.0%
Critical Care (Intensivists)	29.1%	\$1,202,356	31.0%	(31.7%) - 89.9%	0.0%	29.1%	0.0%	33.3%	0.0%

## TrailBlazer TX

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Thoracic Surgery	3.8%	\$1,132,637	4.5%	(5.1%) - 12.6%	3.8%	24.0%	24.0%	12.5%	12.5%
Multispecialty Clinic or Group Practice	93.5%	\$1,020,563	10.0%	73.9% -113.0%	0.0%	98.8%	98.5%	16.7%	0.0%
Endocrinology	3.6%	\$853,999	3.1%	(2.5%) - 9.7%	3.6%	13.4%	13.4%	3.2%	3.2%
Obstetrics/Gynecology	3.2%	\$750,491	2.4%	(1.5%) - 7.9%	3.2%	16.4%	16.4%	8.7%	8.7%
Rheumatology	3.8%	\$545,379	4.1%	(4.3%) - 11.9%	3.8%	18.3%	18.3%	15.0%	15.0%
Optometry	1.5%	\$428,308	1.5%	(1.6%) - 4.5%	1.5%	8.1%	8.1%	4.2%	4.2%
Geriatric Medicine	7.6%	\$416,649	6.5%	(5.1%) - 20.4%	0.0%	34.6%	40.7%	40.0%	0.0%
Allergy/Immunology	0.0%	\$6,663	2.8%	(5.5%) - 5.6%	0.0%	2.7%	2.7%	15.4%	15.4%
Osteopathic Manipulative Therapy	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Neurosurgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	19.4%	19.4%	0.0%	0.0%
Plastic and Reconstructive Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	17.5%	17.5%	0.0%	0.0%
Nuclear Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pediatric Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Infectious Disease	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	35.3%	35.3%	0.0%	0.0%
Ambulatory Surgical Center	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	14.0%	14.0%	0.0%	0.0%
Portable X-Ray Supplier (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	11.5%	11.5%	0.0%	0.0%
Audiologist (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	100.0%	100.0%	0.0%	0.0%
Clinical Psychologist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	57.1%	57.1%	0.0%	0.0%
Pain Management	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Vascular Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	74.8%	74.8%	0.0%	0.0%
Cardiac Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Clinical Social Worker	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	37.5%	37.5%	0.0%	0.0%
Clinical Nurse Specialist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	37.5%	37.5%	0.0%	0.0%
Gynecological/Oncology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	5.2%	5.2%	0.0%	0.0%
Radiation Oncology	-0.1%	-\$73,050	0.1%	(0.4%) - 0.1%	-0.1%	16.3%	16.3%	4.0%	4.0%
All Types	14.1%	\$728,838,389	1.5%	11.2% - 17.0%	9.6%	31.0%	28.1%	15.1%	10.6%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.



**Triple S, Inc. PR/VI**

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Internal Medicine	26.4%	\$35,443,573	5.9%	14.7% - 38.0%	21.9%	31.6%	27.8%	28.0%	24.7%
General Practice	22.6%	\$16,878,856	3.6%	15.5% - 29.6%	18.1%	32.4%	29.0%	30.6%	26.9%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	27.7%	\$7,724,253	10.4%	7.4% - 48.0%	23.7%	30.0%	26.3%	29.9%	26.0%
Cardiology	16.5%	\$7,652,918	3.5%	9.6% - 23.4%	13.6%	18.0%	15.2%	22.6%	20.2%
Clinical Laboratory (Billing Independently)	11.3%	\$4,841,801	2.5%	6.4% - 16.3%	7.9%	18.1%	15.2%	12.6%	10.0%
Pulmonary Disease	21.4%	\$4,838,675	11.3%	(0.6%) - 43.5%	12.7%	24.6%	16.5%	29.2%	19.3%
Anesthesiology	32.5%	\$4,689,406	13.9%	5.2% - 59.8%	12.3%	34.7%	16.0%	50.0%	38.9%
Physical Medicine and Rehabilitation	32.0%	\$3,831,257	7.1%	18.2% - 45.9%	32.0%	38.5%	38.5%	40.8%	40.8%
General Surgery	20.7%	\$3,575,657	5.8%	9.3% - 32.0%	16.4%	33.4%	30.4%	26.3%	22.2%
Family Practice	18.1%	\$3,447,879	4.4%	9.5% - 26.8%	13.1%	23.4%	19.0%	29.0%	24.8%
Gastroenterology	23.7%	\$3,207,997	11.5%	1.3% - 46.2%	16.9%	40.8%	36.7%	21.1%	18.9%
Diagnostic Radiology	5.0%	\$2,605,187	1.7%	1.6% - 8.4%	2.4%	10.5%	8.2%	11.6%	8.8%
Obstetrics/Gynecology	27.0%	\$2,298,268	12.5%	2.4% - 51.6%	19.1%	35.5%	29.4%	53.3%	46.2%
Neurology	12.7%	\$2,236,745	6.2%	0.6% - 24.8%	9.6%	12.7%	9.6%	18.2%	14.3%
Radiation Oncology	60.1%	\$2,183,602	12.4%	35.8% - 84.4%	60.1%	81.4%	81.4%	20.0%	20.0%
Emergency Medicine	27.3%	\$2,121,384	8.6%	10.4% - 44.1%	9.7%	34.2%	20.1%	35.9%	24.2%
Hematology/Oncology	20.7%	\$2,039,021	6.0%	8.8% - 32.5%	20.7%	20.7%	20.7%	36.4%	36.4%
Orthopedic Surgery	7.8%	\$1,340,432	2.9%	2.2% - 13.4%	7.8%	12.9%	12.9%	27.3%	27.3%
Infectious Disease	12.2%	\$1,226,765	4.8%	2.8% - 21.5%	12.2%	31.6%	31.6%	38.5%	38.5%
Podiatry	17.9%	\$1,200,497	6.7%	4.8% - 30.9%	16.0%	33.8%	32.6%	19.6%	16.3%
Physical Therapist in Private Practice	26.3%	\$1,085,006	13.5%	(0.3%) - 52.8%	26.3%	33.1%	33.1%	22.7%	22.7%
Endocrinology	20.1%	\$995,696	9.1%	2.3% - 37.9%	20.1%	25.1%	25.1%	38.9%	38.9%
Urology	3.9%	\$966,433	2.6%	(1.2%) - 9.0%	1.9%	16.0%	14.5%	10.9%	7.5%
Nephrology	8.6%	\$948,327	4.2%	0.4% - 16.9%	6.3%	8.6%	6.3%	26.7%	24.1%
Occupational Therapist in Private Practice	100.0%	\$927,140	0.0%	100.0% -100.0%	100.0%	100.0%	100.0%	87.5%	87.5%
Chiropractic	83.2%	\$807,437	20.0%	44.1% -122.3%	83.2%	83.2%	83.2%	27.8%	27.8%
Ophthalmology	2.8%	\$742,832	2.0%	(1.1%) - 6.8%	2.8%	11.8%	11.8%	4.7%	4.7%
Otolaryngology	12.3%	\$687,127	7.1%	(1.6%) - 26.3%	12.3%	12.3%	12.3%	21.2%	21.2%
Psychiatry	9.8%	\$651,568	4.5%	1.1% - 18.6%	7.6%	46.3%	45.0%	25.6%	23.7%
Vascular Surgery	60.3%	\$548,408	15.7%	29.6% - 91.0%	50.9%	60.3%	50.9%	66.7%	50.0%
Clinical Psychologist	42.7%	\$513,109	23.1%	(2.4%) - 87.9%	7.7%	64.2%	42.3%	50.0%	25.0%
Dermatology	7.1%	\$405,738	4.4%	(1.6%) - 15.7%	7.1%	14.1%	14.1%	10.3%	10.3%
Pathology	3.9%	\$290,594	4.0%	(3.9%) - 11.8%	3.9%	19.5%	19.5%	11.8%	11.8%
Other Provider Types	30.5%	\$232,501	11.7%	7.5% - 53.5%	30.5%	30.5%	30.5%	16.7%	16.7%



**Triple S, Inc. PR/VI**

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Pediatric Medicine	18.7%	\$185,133	16.9%	(14.5%) - 51.9%	18.7%	18.7%	18.7%	50.0%	50.0%
Allergy/Immunology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Neurosurgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Thoracic Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Nuclear Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	29.0%	29.0%	0.0%	0.0%
Optometry	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Independent Diagnostic Testing Facility (IDTF)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Ambulatory Surgical Center	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Audiologist (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Rheumatology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	7.0%	7.0%	0.0%	0.0%
Multispecialty Clinic or Group Practice	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Cardiac Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Critical Care (Intensivists)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
All Types	17.9%	\$123,371,220	1.6%	14.7% - 21.1%	14.0%	25.5%	22.3%	21.2%	18.3%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

**WPS WI/L/MI/MN**

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Internal Medicine	15.8%	\$177,618,906	3.0%	10.1% - 21.6%	9.6%	24.5%	19.6%	16.8%	11.3%
Urology	31.5%	\$123,037,832	21.0%	(9.6%) - 72.6%	31.1%	39.6%	39.3%	11.9%	10.3%
Radiation Oncology	52.0%	\$82,012,371	19.6%	13.6% - 90.4%	32.8%	53.2%	35.0%	52.8%	26.1%
Cardiology	9.3%	\$59,209,589	2.5%	4.4% - 14.3%	8.5%	15.4%	14.7%	15.2%	12.0%
Family Practice	10.7%	\$55,219,428	2.5%	5.9% - 15.5%	7.4%	21.5%	19.1%	14.6%	10.3%
Neurology	42.5%	\$40,096,620	24.3%	(5.2%) - 90.2%	0.0%	59.6%	43.3%	20.7%	0.0%
Nephrology	23.1%	\$29,513,569	12.7%	(1.7%) - 48.0%	21.6%	27.9%	26.6%	24.1%	21.4%
Diagnostic Radiology	5.3%	\$27,280,674	1.9%	1.6% - 8.9%	0.7%	13.0%	9.2%	12.2%	2.6%
Orthopedic Surgery	6.2%	\$26,934,152	3.0%	0.3% - 12.1%	2.7%	20.4%	17.7%	22.1%	11.8%
Pathology	36.3%	\$26,022,346	12.0%	12.9% - 59.8%	8.8%	49.1%	32.9%	24.5%	2.4%
Pulmonary Disease	25.1%	\$23,760,761	9.8%	5.9% - 44.3%	7.7%	37.9%	26.4%	18.6%	5.4%
Ophthalmology	3.7%	\$19,405,249	1.9%	(0.0%) - 7.3%	1.5%	17.2%	15.6%	5.4%	2.4%
Emergency Medicine	10.8%	\$18,809,033	5.3%	0.4% - 21.1%	0.8%	22.9%	15.5%	10.9%	3.9%

**WPS WI/IL/MI/MN**

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Podiatry	11.8%	\$17,869,882	4.7%	2.4% - 21.1%	3.0%	32.0%	26.8%	11.5%	6.6%
Physical Medicine and Rehabilitation	24.2%	\$17,847,916	8.7%	7.2% - 41.3%	24.2%	38.4%	38.4%	36.7%	36.7%
Hematology/Oncology	5.6%	\$15,619,504	4.9%	(4.0%) - 15.1%	5.6%	44.5%	44.5%	7.2%	7.2%
Gastroenterology	12.7%	\$15,503,847	6.7%	(0.4%) - 25.9%	11.9%	23.1%	22.4%	24.0%	20.8%
Psychiatry	21.9%	\$15,242,947	13.8%	(5.2%) - 49.0%	21.9%	41.5%	41.5%	25.0%	25.0%
General Surgery	7.7%	\$13,723,269	5.6%	(3.3%) - 18.6%	3.3%	34.5%	32.3%	11.1%	8.6%
Otolaryngology	23.4%	\$8,301,742	13.7%	(3.5%) - 50.2%	14.4%	32.7%	25.9%	41.2%	16.7%
Anesthesiology	5.7%	\$8,100,911	5.7%	(5.5%) - 16.9%	5.7%	14.4%	14.4%	9.1%	9.1%
Chiropractic	5.8%	\$7,843,597	2.6%	0.6% - 11.0%	4.1%	25.4%	24.3%	6.8%	5.4%
Thoracic Surgery	5.7%	\$7,209,726	8.6%	(11.2%) - 22.7%	5.7%	9.8%	9.8%	14.3%	14.3%
Vascular Surgery	16.5%	\$7,087,793	10.7%	(4.4%) - 37.4%	16.5%	45.8%	45.8%	18.8%	18.8%
Clinical Laboratory (Billing Independently)	4.2%	\$6,895,928	1.6%	1.1% - 7.4%	1.3%	26.2%	24.5%	3.5%	1.4%
Neurosurgery	40.1%	\$6,890,997	8.4%	23.6% - 56.5%	40.1%	55.0%	55.0%	75.0%	75.0%
Physician Assistant	19.8%	\$6,248,609	10.9%	(1.7%) - 41.2%	10.9%	19.8%	10.9%	21.1%	11.8%
Medical Oncology	2.7%	\$5,734,429	2.3%	(1.8%) - 7.3%	2.7%	27.2%	27.2%	15.0%	15.0%
Dermatology	1.9%	\$5,208,593	1.6%	(1.2%) - 5.0%	1.9%	11.4%	11.4%	4.8%	4.8%
Physical Therapist in Private Practice	6.6%	\$4,723,552	5.6%	(4.4%) - 17.7%	6.6%	15.6%	15.6%	34.7%	34.7%
Certified Registered Nurse Anesthetist (CRNA)	13.9%	\$4,641,068	14.0%	(13.6%) - 41.3%	0.0%	31.8%	23.3%	12.5%	0.0%
General Practice	3.2%	\$4,444,720	2.6%	(1.9%) - 8.2%	2.8%	4.1%	3.8%	14.3%	13.0%
Optometry	7.3%	\$4,144,819	5.9%	(4.3%) - 18.9%	1.6%	24.7%	21.0%	6.3%	3.2%
Endocrinology	9.8%	\$2,410,415	10.0%	(9.9%) - 29.5%	-0.2%	24.3%	17.4%	11.1%	4.0%
Geriatric Medicine	10.7%	\$2,292,516	7.6%	(4.2%) - 25.5%	10.7%	10.7%	10.7%	25.0%	25.0%
Obstetrics/Gynecology	4.1%	\$2,205,101	3.2%	(2.2%) - 10.5%	4.1%	22.3%	22.3%	10.0%	10.0%
Rheumatology	5.8%	\$2,071,065	5.4%	(4.8%) - 16.5%	5.8%	17.8%	17.8%	14.3%	14.3%
Allergy/Immunology	25.6%	\$1,158,362	8.7%	8.6% - 42.6%	25.6%	81.3%	81.3%	20.0%	20.0%
Critical Care (Intensivists)	22.1%	\$990,256	11.3%	(0.0%) - 44.3%	22.1%	22.1%	22.1%	33.3%	33.3%
Other Provider Types	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	80.0%	80.0%
Plastic and Reconstructive Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	93.1%	93.1%	0.0%	0.0%
Nuclear Medicine	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	8.3%	8.3%
Infectious Disease	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Independent Diagnostic Testing Facility (IDTF)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	6.9%	6.9%	0.0%	0.0%
Ambulatory Surgical Center	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	25.2%	25.2%	0.0%	0.0%
Ambulance Service Supplier (e.g., private ambulance companies, funeral homes)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	5.5%	5.5%	1.2%	1.2%
Public Health or Welfare Agencies (Federal, State,	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

**WPS WI/IL/MI/MN**

Carrier Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Portable X-Ray Supplier (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	7.0%	7.0%	0.0%	0.0%
Audiologist (Billing Independently)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Clinical Psychologist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	83.6%	83.6%	0.0%	0.0%
Multispecialty Clinic or Group Practice	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	30.8%	30.8%	0.0%	0.0%
Pain Management	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	15.6%	15.6%	0.0%	0.0%
Mass Immunization Roster Billers (Mass Immunizers)	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Cardiac Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Hematology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Interventional Radiology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Gynecological/Oncology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Nurse Practitioner	-3.7%	-\$1,318,847	3.4%	(10.4%) - 3.0%	-3.7%	16.5%	16.5%	13.3%	13.3%
All Types	11.1%	\$902,013,249	1.6%	8.0% - 14.2%	7.1%	24.6%	21.8%	13.3%	8.6%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## DMERC

### AdminaStar –Region B

DMERC Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Pharmacy	9.2%	\$90,709,641	1.8%	5.7% - 12.8%	7.5%	17.6%	16.1%	10.3%	8.6%
Medical supply company not included in 51, 52, or 53	3.4%	\$22,768,638	0.9%	1.7% - 5.1%	2.6%	9.8%	9.1%	6.5%	5.3%
Medical Supply Company with Respiratory Therapist	2.9%	\$7,781,926	1.2%	0.6% - 5.2%	2.3%	11.8%	11.3%	4.0%	3.7%
Unknown Supplier/Provider	57.2%	\$6,833,299	18.0%	22.0% - 92.3%	47.2%	57.2%	47.2%	69.2%	55.6%
Podiatry	19.4%	\$5,415,898	14.4%	(8.7%) - 47.5%	19.4%	19.4%	19.4%	23.8%	23.8%
Medical supply company with prosthetic/orthotic personnel certified by an accrediting organization	13.6%	\$4,986,177	9.9%	(5.8%) - 33.1%	13.6%	24.2%	24.2%	11.1%	11.1%
Other Provider Types	37.5%	\$4,793,889	21.2%	(4.1%) - 79.2%	31.9%	45.6%	41.3%	13.9%	6.1%
Individual prosthetic personnel certified by an accrediting organization	2.7%	\$2,163,354	3.5%	(4.2%) - 9.5%	2.7%	5.2%	5.2%	7.7%	7.7%
Nursing Facility, Other	12.4%	\$1,826,349	11.5%	(10.1%) - 34.9%	12.4%	22.9%	22.9%	16.0%	16.0%
Ophthalmology	5.4%	\$598,674	5.6%	(5.5%) - 16.3%	5.4%	10.2%	10.2%	5.8%	5.8%
Individual orthotic personnel certified by an accrediting organization	0.1%	\$38,084	0.1%	(0.1%) - 0.3%	0.1%	6.8%	6.8%	4.6%	4.6%
Orthopedic Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	11.3%	11.3%	0.0%	0.0%
Optometry	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	6.6%	6.6%	0.0%	0.0%
Medical supply company with orthotic personnel certified by an accrediting organization	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Medical supply company with prosthetic personnel certified by an accrediting organization	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	9.1%	9.1%
Medical Supply Company with registered pharmacist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Optician	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	17.2%	17.2%	0.0%	0.0%
All Types	6.6%	\$147,915,927	0.9%	4.8% - 8.4%	5.4%	13.9%	12.9%	8.3%	7.0%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

### CIGNA -Region D

DMERC Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Pharmacy	15.5%	\$103,419,409	2.3%	11.1% - 20.0%	12.9%	22.0%	19.3%	18.1%	16.7%

## CIGNA -Region D

DMERC Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Medical supply company not included in 51, 52, or 53	10.8%	\$82,409,027	4.3%	2.4% - 19.2%	9.0%	21.0%	19.6%	11.0%	9.1%
Medical supply company with prosthetic/orthotic personnel certified by an accrediting organization	56.5%	\$6,441,385	28.7%	0.3% - 112.7%	0.0%	69.9%	50.6%	27.3%	11.1%
Medical Supply Company with Respiratory Therapist	3.1%	\$5,983,197	1.3%	0.6% - 5.6%	2.0%	8.7%	7.7%	9.4%	8.3%
Individual orthotic personnel certified by an accrediting organization	48.0%	\$5,354,463	31.6%	(13.9%) - 110.0%	0.0%	51.2%	11.2%	21.4%	15.4%
Other Provider Types	18.4%	\$3,300,726	8.7%	1.3% - 35.5%	18.4%	39.7%	39.7%	31.3%	31.3%
Optometry	15.8%	\$1,326,577	9.0%	(1.9%) - 33.5%	0.0%	33.9%	25.3%	20.8%	10.6%
Unknown Supplier/Provider	23.0%	\$440,019	23.2%	(22.4%) - 68.4%	23.0%	23.0%	23.0%	12.5%	12.5%
Medical supply company with orthotic personnel certified by an accrediting organization	1.1%	\$82,096	1.4%	(1.7%) - 4.0%	1.1%	1.1%	1.1%	11.1%	11.1%
Nursing Facility, Other	1.9%	\$58,743	2.9%	(3.8%) - 7.7%	1.9%	1.9%	1.9%	14.3%	14.3%
Ophthalmology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	16.7%	16.7%	0.0%	0.0%
Orthopedic Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	4.5%	4.5%
Podiatry	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Medical supply company with prosthetic personnel certified by an accrediting organization	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.4%	0.4%	0.0%	0.0%
Individual prosthetic personnel certified by an accrediting organization	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	60.4%	60.4%	21.8%	21.8%
Medical Supply Company with registered pharmacist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	16.4%	16.4%	0.0%	0.0%
Optician	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	22.7%	22.7%	17.4%	17.4%
All Types	11.6%	\$208,815,642	2.1%	7.5% - 15.6%	9.0%	21.4%	19.3%	14.6%	12.9%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## Palmetto GBA – Region C

DMERC Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Medical supply company not included in 51, 52, or 53	9.7%	\$196,744,427	3.9%	2.0% - 17.4%	2.2%	21.9%	16.3%	12.5%	9.2%
Pharmacy	10.3%	\$182,039,261	1.8%	6.8% - 13.7%	7.9%	17.6%	15.7%	15.8%	13.7%
Individual orthotic personnel certified by an accrediting organization	58.4%	\$146,872,621	23.2%	12.9% - 103.9%	0.0%	58.4%	0.0%	42.5%	0.0%
Unknown Supplier/Provider	41.2%	\$126,830,053	18.3%	5.4% - 77.1%	0.0%	47.1%	16.0%	20.6%	0.0%
Medical Supply Company with Respiratory Therapist	3.4%	\$10,632,951	1.6%	0.3% - 6.5%	1.6%	20.1%	18.9%	6.7%	5.1%

### Palmetto GBA – Region C

DMERC Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Nursing Facility, Other	23.0%	\$9,203,768	17.8%	(11.9%) - 57.9%	23.0%	23.0%	23.0%	28.6%	28.6%
Podiatry	31.7%	\$4,172,611	28.3%	(23.8%) - 87.1%	31.7%	48.1%	48.1%	20.0%	20.0%
Medical supply company with prosthetic/orthotic personnel certified by an accrediting organization	3.4%	\$3,186,105	3.6%	(3.7%) - 10.5%	0.0%	3.4%	0.0%	22.6%	7.7%
Individual prosthetic personnel certified by an accrediting organization	18.5%	\$2,973,934	18.9%	(18.5%) - 55.6%	18.5%	18.5%	18.5%	53.3%	53.3%
Medical supply company with orthotic personnel certified by an accrediting organization	17.2%	\$2,695,254	16.4%	(15.0%) - 49.4%	17.2%	17.2%	17.2%	28.6%	28.6%
Medical supply company with prosthetic personnel certified by an accrediting organization	36.8%	\$1,883,997	35.0%	(31.7%) -105.3%	0.0%	36.8%	0.0%	50.0%	40.0%
Other Provider Types	9.8%	\$1,227,380	10.0%	(9.9%) - 29.4%	0.0%	16.1%	7.7%	37.0%	32.0%
Ophthalmology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	18.3%	18.3%	2.3%	2.3%
Orthopedic Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	6.0%	6.0%	22.2%	22.2%
Optometry	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	13.1%	13.1%	0.0%	0.0%
Medical Supply Company with registered pharmacist	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Optician	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
All Types	14.0%	\$688,462,362	2.9%	8.3% - 19.6%	4.5%	23.1%	15.7%	14.4%	11.3%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

### TriCenturion - Region A

DMERC Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
Pharmacy	10.9%	\$49,718,427	1.6%	7.8% - 14.1%	8.1%	16.6%	14.1%	12.3%	9.4%
Medical supply company not included in 51, 52, or 53	5.0%	\$25,371,257	1.2%	2.7% - 7.4%	3.5%	12.5%	11.1%	9.7%	7.1%
Medical Supply Company with Respiratory Therapist	4.8%	\$9,985,561	1.5%	1.7% - 7.8%	4.6%	11.2%	11.1%	7.2%	6.6%
Other Provider Types	29.3%	\$5,462,755	19.2%	(8.3%) - 67.0%	16.5%	29.3%	16.5%	15.4%	8.3%
Podiatry	25.0%	\$2,945,228	16.0%	(6.3%) - 56.2%	14.1%	40.6%	34.1%	17.4%	9.5%
Orthopedic Surgery	28.6%	\$2,046,429	29.2%	(28.7%) - 85.8%	28.6%	31.6%	31.6%	12.5%	12.5%
Optician	18.3%	\$1,637,996	10.3%	(1.9%) - 38.6%	18.3%	18.3%	18.3%	17.8%	17.8%
Unknown Supplier/Provider	19.9%	\$1,440,868	12.8%	(5.2%) - 44.9%	19.9%	34.5%	34.5%	22.7%	22.7%
Medical Supply Company with registered pharmacist	29.6%	\$947,565	19.5%	(8.6%) - 67.8%	18.1%	29.6%	18.1%	45.5%	33.3%
Medical supply company with prosthetic/orthotic personnel certified by an accrediting	0.5%	\$81,567	0.5%	(0.5%) - 1.4%	0.5%	3.1%	3.1%	4.8%	4.8%

# TriCenturion - Region A

DMERC Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
organization									
Ophthalmology	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	13.2%	13.2%	0.0%	0.0%
Optometry	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	17.2%	17.2%	0.0%	0.0%
Medical supply company with orthotic personnel certified by an accrediting organization	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Medical supply company with prosthetic personnel certified by an accrediting organization	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Individual orthotic personnel certified by an accrediting organization	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.7%	0.7%	0.0%	0.0%
Individual prosthetic personnel certified by an accrediting organization	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Nursing Facility, Other	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	44.2%	44.2%	0.0%	0.0%
All Types	7.3%	\$99,637,653	0.9%	5.6% - 9.0%	5.5%	13.7%	12.0%	10.3%	7.9%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.



# FI

## AdminaStar IN/IL/KY/OH

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	11.0%	\$537,013,591	3.6%	4.0% - 18.1%	5.6%	N/A	N/A	N/A	N/A
SNF	13.7%	\$408,262,258	4.7%	4.4% - 23.0%	12.8%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	19.1%	\$142,453,469	16.5%	(13.3%) - 51.4%	0.0%	N/A	N/A	N/A	N/A
ESRD	9.7%	\$71,543,022	5.0%	(0.1%) - 19.4%	9.2%	N/A	N/A	N/A	N/A
Other FI Service Types	5.6%	\$13,217,399	3.3%	(0.8%) - 12.1%	5.8%	N/A	N/A	N/A	N/A
RHCs	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	N/A	N/A	N/A	N/A
All Types	12.2%	\$1,172,489,739	2.7%	6.9% - 17.6%	7.9%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## Anthem MA/ME

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	10.3%	\$127,172,259	2.9%	4.5% - 16.1%	4.6%	N/A	N/A	N/A	N/A
SNF	27.5%	\$115,742,067	10.1%	7.7% - 47.4%	24.2%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	3.9%	\$17,069,239	2.1%	(0.3%) - 8.0%	3.8%	N/A	N/A	N/A	N/A
ESRD	4.4%	\$15,515,577	3.1%	(1.7%) - 10.5%	4.4%	N/A	N/A	N/A	N/A
Hospice	4.8%	\$14,445,593	4.8%	(4.6%) - 14.3%	0.0%	N/A	N/A	N/A	N/A
Other FI Service Types	5.5%	\$5,353,247	4.4%	(3.1%) - 14.0%	5.3%	N/A	N/A	N/A	N/A
RHCs	8.2%	\$892,163	6.0%	(3.5%) - 20.0%	0.0%	N/A	N/A	N/A	N/A
HHA	13.4%	\$450,444	12.7%	(11.4%) - 38.2%	13.4%	N/A	N/A	N/A	N/A
FQHC	0.0%	\$0	0.0%	0	0.0%	N/A	N/A	N/A	N/A
All Types	10.4%	\$296,640,588	2.2%	6.0% - 14.7%	6.8%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## Anthem NH/VT

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	8.2%	\$28,176,788	1.7%	4.9% - 11.5%	4.4%	N/A	N/A	N/A	N/A
Other FI Service Types	27.8%	\$16,060,879	8.4%	11.2% - 44.3%	5.5%	N/A	N/A	N/A	N/A
SNF	7.1%	\$6,408,542	5.7%	(4.0%) - 18.2%	7.1%	N/A	N/A	N/A	N/A
ESRD	31.7%	\$5,025,321	19.4%	(6.3%) - 69.8%	31.7%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	1.5%	\$1,879,252	1.2%	(0.9%) - 3.9%	0.0%	N/A	N/A	N/A	N/A
RHCs	1.7%	\$212,218	1.2%	(0.7%) - 4.2%	0.0%	N/A	N/A	N/A	N/A
All Types	9.0%	\$57,763,000	1.7%	5.7% - 12.3%	4.6%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## BCBS AR

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	26.8%	\$74,210,087	8.1%	11.0% - 42.6%	8.4%	N/A	N/A	N/A	N/A
SNF	38.5%	\$29,000,664	9.6%	19.7% - 57.3%	34.6%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	16.9%	\$16,336,458	12.2%	(7.1%) - 40.8%	1.4%	N/A	N/A	N/A	N/A
Other FI Service Types	21.0%	\$5,672,663	6.1%	9.1% - 33.0%	15.5%	N/A	N/A	N/A	N/A
RHCs	7.5%	\$436,564	2.3%	3.0% - 12.0%	4.5%	N/A	N/A	N/A	N/A
All Types	26.1%	\$125,656,436	5.5%	15.3% - 36.8%	12.0%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## BCBS AZ

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	6.6%	\$12,860,959	1.2%	4.2% - 9.0%	4.0%	N/A	N/A	N/A	N/A
SNF	13.8%	\$8,467,566	5.8%	2.4% - 25.1%	13.6%	N/A	N/A	N/A	N/A
ESRD	4.2%	\$1,598,836	4.7%	(5.0%) - 13.4%	4.2%	N/A	N/A	N/A	N/A

## BCBS AZ

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
Other FI Service Types	7.3%	\$691,084	5.1%	(2.7%) - 17.4%	1.8%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	0.5%	\$111,735	0.6%	(0.6%) - 1.6%	0.5%	N/A	N/A	N/A	N/A
RHCs	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	N/A	N/A	N/A	N/A
All FIs	7.3%	\$23,730,180	1.4%	4.5% - 10.1%	5.6%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## BCBS GA

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	16.4%	\$91,022,512	4.9%	6.9% - 26.0%	9.0%	N/A	N/A	N/A	N/A
ESRD	2.8%	\$37,991,364	0.8%	1.3% - 4.3%	2.3%	N/A	N/A	N/A	N/A
SNF	21.4%	\$10,205,003	15.0%	(8.0%) - 50.7%	21.4%	N/A	N/A	N/A	N/A
Other FI Service Types	7.4%	\$5,826,345	5.1%	(2.7%) - 17.5%	2.6%	N/A	N/A	N/A	N/A
RHCs	4.1%	\$233,237	2.9%	(1.6%) - 9.8%	4.1%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	0.0%	\$5,100	0.0%	(0.0%) - 0.0%	0.0%	N/A	N/A	N/A	N/A
All Types	6.9%	\$145,283,562	1.5%	3.9% - 10.0%	4.4%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## BCBS KS

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	14.5%	\$33,214,537	3.4%	7.9% - 21.1%	9.9%	N/A	N/A	N/A	N/A
SNF	10.2%	\$9,934,194	7.5%	(4.5%) - 24.9%	9.9%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	3.1%	\$3,371,339	3.0%	(2.8%) - 8.9%	3.0%	N/A	N/A	N/A	N/A

## BCBS KS

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
ESRD	12.8%	\$2,762,407	8.0%	(2.8%) - 28.5%	12.8%	N/A	N/A	N/A	N/A
Other FI Service Types	4.1%	\$1,766,197	1.7%	0.8% - 7.5%	3.0%	N/A	N/A	N/A	N/A
RHCs	1.6%	\$209,796	0.9%	(0.2%) - 3.4%	0.5%	N/A	N/A	N/A	N/A
All Types	10.0%	\$51,258,470	2.2%	5.6% - 14.3%	7.6%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## BCBS MT

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
ESRD	34.3%	\$6,946,672	13.0%	8.9% - 59.7%	34.3%	N/A	N/A	N/A	N/A
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	3.8%	\$3,463,668	0.8%	2.2% - 5.5%	1.8%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	5.0%	\$2,593,729	4.3%	(3.4%) - 13.4%	5.0%	N/A	N/A	N/A	N/A
SNF	4.5%	\$1,831,630	2.7%	(0.8%) - 9.7%	4.5%	N/A	N/A	N/A	N/A
Other FI Service Types	2.3%	\$464,716	1.0%	0.3% - 4.3%	1.2%	N/A	N/A	N/A	N/A
RHCs	5.5%	\$318,882	1.9%	1.7% - 9.3%	2.9%	N/A	N/A	N/A	N/A
All Types	6.8%	\$15,619,297	1.7%	3.5% - 10.1%	6.0%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## BCBS NE

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
Other FI Service Types	15.9%	\$13,068,879	4.7%	6.8% - 25.1%	5.1%	N/A	N/A	N/A	N/A
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	11.6%	\$12,057,681	2.8%	6.1% - 17.1%	6.5%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	7.5%	\$6,206,618	6.4%	(5.1%) - 20.0%	0.0%	N/A	N/A	N/A	N/A
SNF	25.0%	\$3,962,922	20.1%	(14.4%) - 64.4%	25.0%	N/A	N/A	N/A	N/A

## BCBS NE

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
ESRD	31.2%	\$2,919,274	15.9%	(0.0%) - 62.4%	31.2%	N/A	N/A	N/A	N/A
RHCs	1.1%	\$67,119	0.8%	(0.4%) - 2.7%	0.6%	N/A	N/A	N/A	N/A
All Types	12.8%	\$38,282,494	2.7%	7.5% - 18.0%	6.1%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## BCBS RI

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
SNF	38.7%	\$97,455,681	8.0%	23.1% - 54.3%	35.6%	N/A	N/A	N/A	N/A
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	11.7%	\$48,117,794	2.4%	7.0% - 16.4%	7.9%	N/A	N/A	N/A	N/A
ESRD	26.7%	\$5,076,921	17.6%	(7.8%) - 61.3%	15.8%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	0.2%	\$238,209	0.3%	(0.3%) - 0.7%	0.2%	N/A	N/A	N/A	N/A
Other FI Service Types		\$0	0.0%	0.0% - 0.0%	0.0%	N/A	N/A	N/A	N/A
All Types	19.3%	\$150,888,605	3.2%	13.0% - 25.7%	15.9%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## BCBS WY

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	11.9%	\$4,602,321	3.8%	4.4% - 19.4%	8.8%	N/A	N/A	N/A	N/A
SNF	34.0%	\$4,385,045	10.7%	13.0% - 55.0%	34.0%	N/A	N/A	N/A	N/A
Other FI Service Types	21.3%	\$2,258,591	7.8%	5.9% - 36.6%	20.5%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	4.8%	\$798,370	3.4%	(1.9%) - 11.4%	4.8%	N/A	N/A	N/A	N/A
ESRD	3.9%	\$138,144	2.5%	(0.9%) - 8.8%	3.9%	N/A	N/A	N/A	N/A
RHCs	3.2%	\$18,973	2.0%	(0.6%) - 7.1%	2.2%	N/A	N/A	N/A	N/A

## BCBS WY

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
All Types	14.7%	\$12,201,445	2.8%	9.2% - 20.2%	13.3%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## Cahaba GBA AL

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	13.7%	\$59,521,002	2.1%	9.5% - 17.8%	5.9%	N/A	N/A	N/A	N/A
SNF	22.3%	\$31,111,798	8.5%	5.6% - 39.0%	20.1%	N/A	N/A	N/A	N/A
Other FI Service Types	24.6%	\$18,264,111	4.6%	15.7% - 33.6%	7.8%	N/A	N/A	N/A	N/A
ESRD	4.0%	\$335,952	3.5%	(2.8%) - 10.7%	4.0%	N/A	N/A	N/A	N/A
RHCs	2.2%	\$46,579	2.2%	(2.2%) - 6.5%	0.0%	N/A	N/A	N/A	N/A
Free Standing Ambulatory Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	N/A	N/A	N/A	N/A
All FIs	15.5%	\$109,279,442	2.2%	11.1% - 19.9%	8.5%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## Cahaba GBA IA/SD

Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
HHA	4.7%	110,228,971	1.2%	2.4% - 6.9%	2.2%	N/A	N/A	N/A	N/A
SNF	30.4%	71,736,024	11.2%	8.4% - 52.5%	30.4%	N/A	N/A	N/A	N/A
Hospice	4.0%	32,254,846	1.9%	0.3% - 7.6%	3.7%	N/A	N/A	N/A	N/A
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	3.5%	18,224,422	1.1%	1.4% - 5.7%	2.2%	N/A	N/A	N/A	N/A
ESRD	12.5%	6,194,789	12.4%	(11.7%) - 36.8%	12.5%	N/A	N/A	N/A	N/A
Other FI Service Types	0.2%	317,303	2.4%	(4.5%) - 4.9%	-0.2%	N/A	N/A	N/A	N/A
RHCs	2.9%	306,724	2.9%	(2.7%) - 8.5%	2.9%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	0.0%	53,983	0.0%	(0.0%) - 0.1%	0.0%	N/A	N/A	N/A	N/A

### Cahaba GBA IA/SD

Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
All Types	5.6%	239,317,062	1.1%	3.5% - 7.7%	4.1%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

### CareFirst MD/DC

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
SNF	31.2%	\$304,431,545	4.1%	23.1% - 39.3%	29.8%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	22.7%	\$191,792,863	11.7%	(0.2%) - 45.6%	5.8%	N/A	N/A	N/A	N/A
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	24.8%	\$24,019,705	6.8%	11.4% - 38.1%	21.0%	N/A	N/A	N/A	N/A
ESRD	16.8%	\$16,033,001	10.9%	(4.6%) - 38.3%	12.6%	N/A	N/A	N/A	N/A
Other FI Service Types	15.6%	\$6,213,419	6.4%	3.0% - 28.2%	9.3%	N/A	N/A	N/A	N/A
Free Standing Ambulatory Surgery	3.7%	\$3,876,506	1.8%	0.1% - 7.2%	3.3%	N/A	N/A	N/A	N/A
All Types	25.3%	\$546,367,039	4.9%	15.8% - 34.8%	18.5%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

### Chisholm OK

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	5.9%	\$46,755,601	1.3%	3.3% - 8.6%	4.6%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	14.4%	\$23,236,716	12.9%	(10.8%) - 39.6%	14.4%	N/A	N/A	N/A	N/A
SNF	26.8%	\$15,434,710	13.7%	0.1% - 53.6%	26.8%	N/A	N/A	N/A	N/A
Other FI Service Types	9.8%	\$9,682,605	7.0%	(3.9%) - 23.5%	9.7%	N/A	N/A	N/A	N/A
RHCs	4.8%	\$286,403	3.0%	(1.0%) - 10.6%	1.9%	N/A	N/A	N/A	N/A
All Types	8.6%	\$95,396,035	2.2%	4.4% - 12.9%	7.7%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.



## COSVI PR/VI

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	15.8%	\$14,449,796	2.4%	11.2% - 20.4%	5.7%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	3.6%	\$1,524,482	3.0%	(2.4%) - 9.5%	0.1%	N/A	N/A	N/A	N/A
ESRD	6.4%	\$1,203,319	4.2%	(1.8%) - 14.6%	6.4%	N/A	N/A	N/A	N/A
SNF	33.2%	\$1,200,756	24.6%	(15.0%) - 81.4%	33.2%	N/A	N/A	N/A	N/A
Free Standing Ambulatory Surgery	34.4%	\$494,825	45.1%	(54.1%) - 122.9%	0.0%	N/A	N/A	N/A	N/A
Other FI Service Types	9.3%	\$26,692	3.9%	1.6% - 16.9%	9.3%	N/A	N/A	N/A	N/A
FQHC	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	N/A	N/A	N/A	N/A
All Types	11.9%	\$18,899,869	2.1%	7.8% - 16.0%	4.9%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## Empire NY/CT/DE

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
SNF	21.5%	\$576,236,713	5.8%	10.2% - 32.9%	19.3%	N/A	N/A	N/A	N/A
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	16.4%	\$356,307,506	1.8%	12.9% - 19.9%	6.6%	N/A	N/A	N/A	N/A
ESRD	12.7%	\$67,030,364	6.1%	0.8% - 24.6%	6.3%	N/A	N/A	N/A	N/A
Other FI Service Types	14.0%	\$4,990,282	8.4%	(2.4%) - 30.4%	8.3%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	-1.3%	-\$5,023,550	1.3%	(3.9%) - 1.4%	-1.3%	N/A	N/A	N/A	N/A
All Types	17.2%	\$999,541,314	2.9%	11.5% - 22.9%	12.1%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## First Coast Service Options FL

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
SNF	29.7%	\$266,385,734	6.4%	17.1% - 42.2%	29.3%	N/A	N/A	N/A	N/A
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	23.0%	\$250,788,419	2.6%	17.8% - 28.2%	12.1%	N/A	N/A	N/A	N/A
Other FI Service Types	13.9%	\$34,148,478	5.9%	2.2% - 25.5%	4.0%	N/A	N/A	N/A	N/A

## First Coast Service Options FL

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
ESRD	19.9%	\$16,995,484	12.6%	(4.8%) - 44.6%	0.6%	N/A	N/A	N/A	N/A
RHCs	10.9%	\$281,342	10.6%	(10.0%) - 31.7%	10.9%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	0.1%	\$79,597	0.1%	(0.1%) - 0.2%	0.1%	N/A	N/A	N/A	N/A
All Types	23.0%	\$568,679,054	2.9%	17.3% - 28.7%	16.9%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## Medicare Northwest OR/ID/UT

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	13.2%	\$53,767,398	2.5%	8.2% - 18.2%	7.4%	N/A	N/A	N/A	N/A
SNF	26.0%	\$35,067,273	10.4%	5.7% - 46.3%	25.5%	N/A	N/A	N/A	N/A
ESRD	29.6%	\$9,456,331	13.7%	2.9% - 56.4%	15.3%	N/A	N/A	N/A	N/A
Other FI Service Types	6.5%	\$3,651,132	2.5%	1.7% - 11.3%	4.7%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	2.2%	\$1,602,531	2.3%	(2.4%) - 6.7%	2.2%	N/A	N/A	N/A	N/A
RHCs	4.7%	\$279,802	3.6%	(2.4%) - 11.8%	1.3%	N/A	N/A	N/A	N/A
All Types	14.6%	\$103,824,467	2.6%	9.4% - 19.8%	10.5%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## Mutual of Omaha

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
SNF	31.4%	\$1,722,864,315	5.3%	21.0% - 41.9%	28.0%	N/A	N/A	N/A	N/A
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	22.9%	\$1,041,041,095	4.7%	13.8% - 32.1%	8.0%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	23.2%	\$378,318,592	8.3%	6.9% - 39.5%	18.4%	N/A	N/A	N/A	N/A
Other FI Service Types	23.9%	\$14,635,294	11.1%	2.0% - 45.7%	11.8%	N/A	N/A	N/A	N/A
RHCs	14.7%	\$4,859,307	6.3%	2.4% - 27.1%	0.0%	N/A	N/A	N/A	N/A

## Mutual of Omaha

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
ESRD	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	N/A	N/A	N/A	N/A
All Types	26.8%	\$3,161,718,603	3.2%	20.4% - 33.1%	19.2%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## Noridian MN/ND

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	15.2%	\$79,773,748	5.5%	4.5% - 25.9%	5.4%	N/A	N/A	N/A	N/A
SNF	24.8%	\$76,865,956	7.1%	10.8% - 38.7%	21.7%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	9.3%	\$32,378,657	5.9%	(2.2%) - 20.9%	0.8%	N/A	N/A	N/A	N/A
ESRD	35.7%	\$12,998,895	16.7%	2.9% - 68.5%	25.8%	N/A	N/A	N/A	N/A
Other FI Service Types	12.6%	\$9,740,787	5.5%	1.9% - 23.2%	12.1%	N/A	N/A	N/A	N/A
RHCs	3.0%	\$453,754	1.7%	(0.4%) - 6.4%	0.0%	N/A	N/A	N/A	N/A
All Types	16.2%	\$212,211,798	3.3%	9.7% - 22.7%	9.2%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## Palmetto GBA NC

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
SNF	43.7%	\$284,975,457	9.3%	25.5% - 61.9%	43.6%	N/A	N/A	N/A	N/A
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	10.7%	\$176,248,288	2.1%	6.6% - 14.9%	6.2%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	15.4%	\$48,106,345	12.7%	(9.5%) - 40.2%	0.0%	N/A	N/A	N/A	N/A
ESRD	4.9%	\$20,269,533	3.2%	(1.3%) - 11.1%	4.9%	N/A	N/A	N/A	N/A
Other FI Service Types	1.2%	\$2,035,748	0.9%	(0.5%) - 3.0%	0.7%	N/A	N/A	N/A	N/A
RHCs	16.0%	\$1,105,872	7.0%	2.3% - 29.8%	4.2%	N/A	N/A	N/A	N/A
All Types	16.7%	\$532,741,242	3.0%	10.9% - 22.5%	13.1%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## Palmetto GBA SC

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
HHA	8.9%	\$302,561,381	1.2%	6.5% - 11.2%	3.7%	N/A	N/A	N/A	N/A
Hospice	10.0%	\$241,687,751	1.7%	6.7% - 13.3%	8.3%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	78.1%	\$35,761,208	34.2%	11.1% -145.1%	0.0%	N/A	N/A	N/A	N/A
SNF	42.2%	\$30,008,351	23.9%	(4.6%) - 89.0%	40.3%	N/A	N/A	N/A	N/A
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	16.9%	\$27,041,089	3.4%	10.3% - 23.5%	5.9%	N/A	N/A	N/A	N/A
Other FI Service Types	10.5%	\$1,020,785	10.6%	(10.3%) - 31.3%	10.5%	N/A	N/A	N/A	N/A
ESRD	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	N/A	N/A	N/A	N/A
RHCs	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	N/A	N/A	N/A	N/A
All Types	10.3%	\$638,080,566	1.1%	8.1% - 12.6%	6.0%	N/A	N/A	N/A	N/A

- This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## Premiera WA/AK

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
SNF	31.5%	\$24,130,961	14.7%	2.7% - 60.2%	31.6%	N/A	N/A	N/A	N/A
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	3.4%	\$19,784,695	4.6%	(5.6%) - 12.4%	1.3%	N/A	N/A	N/A	N/A
ESRD	16.2%	\$13,062,023	7.3%	1.9% - 30.6%	16.9%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	6.8%	\$11,395,635	4.4%	(1.8%) - 15.5%	6.8%	N/A	N/A	N/A	N/A
Other FI Service Types	4.6%	\$3,930,504	2.7%	(0.7%) - 9.9%	4.6%	N/A	N/A	N/A	N/A
RHCs	4.6%	\$1,058,869	1.8%	1.0% - 8.2%	2.6%	N/A	N/A	N/A	N/A
All Types	7.3%	\$73,362,688	3.1%	1.3% - 13.3%	6.0%	N/A	N/A	N/A	N/A

- \* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## Riverbend TN/NJ

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
SNF	15.1%	\$223,846,741	5.2%	4.9% - 25.2%	14.5%	N/A	N/A	N/A	N/A
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	6.2%	\$87,456,592	4.9%	(3.4%) - 15.7%	7.5%	N/A	N/A	N/A	N/A
ESRD	7.6%	\$19,833,733	5.9%	(3.9%) - 19.2%	1.9%	N/A	N/A	N/A	N/A
Other FI Service Types	21.4%	\$13,265,392	7.8%	6.1% - 36.8%	10.6%	N/A	N/A	N/A	N/A
RHCs	3.1%	\$6,934,615	0.7%	1.8% - 4.4%	1.2%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	N/A	N/A	N/A	N/A
All Types	9.7%	\$351,337,074	3.0%	3.9% - 15.5%	9.4%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## TrailBlazer TX/CO/NM

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
SNF	37.5%	\$227,800,516	9.8%	18.3% - 56.8%	28.5%	N/A	N/A	N/A	N/A
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	14.7%	\$217,219,301	2.1%	10.6% - 18.8%	6.7%	N/A	N/A	N/A	N/A
ESRD	9.2%	\$177,661,034	2.4%	4.6% - 13.9%	6.9%	N/A	N/A	N/A	N/A
Other FI Service Types	11.4%	\$13,746,242	5.0%	1.6% - 21.3%	9.5%	N/A	N/A	N/A	N/A
RHCs	5.6%	\$4,500,262	1.5%	2.6% - 8.5%	2.6%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	0.4%	\$1,579,114	0.4%	(0.3%) - 1.1%	0.0%	N/A	N/A	N/A	N/A
Free Standing Ambulatory Surgery	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	N/A	N/A	N/A	N/A
FQHC	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	N/A	N/A	N/A	N/A
All Types	14.1%	\$642,506,469	2.0%	10.2% - 17.9%	8.9%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

### Trispan MS/LA/MO

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
SNF	25.5%	\$133,699,060	6.1%	13.6% - 37.3%	25.4%	N/A	N/A	N/A	N/A
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	16.5%	\$97,697,032	3.1%	10.4% - 22.5%	10.2%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	5.2%	\$15,852,220	5.2%	(5.0%) - 15.3%	5.2%	N/A	N/A	N/A	N/A
Other FI Service Types	9.0%	\$15,573,813	4.2%	0.8% - 17.2%	4.0%	N/A	N/A	N/A	N/A
RHCs	8.4%	\$1,751,247	3.0%	2.6% - 14.3%	3.9%	N/A	N/A	N/A	N/A
ESRD	0.2%	\$119,864	4.2%	(8.0%) - 8.4%	0.2%	N/A	N/A	N/A	N/A
All Types	15.8%	\$264,693,236	2.6%	10.7% - 20.9%	13.1%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

### UGS CA/HI/AS/GU/NMI

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
SNF	25.0%	\$331,342,644	6.1%	13.1% - 36.9%	22.8%	N/A	N/A	N/A	N/A
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	15.2%	\$262,999,171	2.8%	9.6% - 20.7%	6.3%	N/A	N/A	N/A	N/A
HHA	26.2%	\$260,382,304	5.4%	15.7% - 36.8%	14.5%	N/A	N/A	N/A	N/A
ESRD	28.6%	\$243,933,674	5.3%	18.2% - 39.1%	23.2%	N/A	N/A	N/A	N/A
Hospice	9.3%	\$85,453,578	3.0%	3.5% - 15.0%	6.0%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	31.0%	\$30,121,242	27.5%	(22.9%) - 84.9%	0.0%	N/A	N/A	N/A	N/A
Other FI Service Types	11.8%	\$7,183,179	7.6%	(3.0%) - 26.6%	9.9%	N/A	N/A	N/A	N/A
RHCs	21.1%	\$3,218,746	8.0%	5.4% - 36.9%	4.2%	N/A	N/A	N/A	N/A
FQHC	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	N/A	N/A	N/A	N/A
All Types	20.4%	\$1,224,634,538	2.1%	16.3% - 24.5%	13.8%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## UGS MI/WI

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
SNF	29.7%	\$229,163,732	12.1%	6.1% - 53.4%	29.7%	N/A	N/A	N/A	N/A
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	12.1%	\$207,983,876	2.1%	8.0% - 16.1%	3.5%	N/A	N/A	N/A	N/A
HHA	8.8%	\$79,277,487	3.8%	1.4% - 16.1%	7.7%	N/A	N/A	N/A	N/A
Hospice	8.3%	\$62,508,579	5.7%	(2.9%) - 19.4%	4.2%	N/A	N/A	N/A	N/A
FQHC	9.1%	\$27,003,612	1.4%	6.4% - 11.9%	2.8%	N/A	N/A	N/A	N/A
ESRD	12.7%	\$26,116,184	7.7%	(2.4%) - 27.7%	6.3%	N/A	N/A	N/A	N/A
Other FI Service Types	10.7%	\$21,332,075	8.0%	(5.0%) - 26.3%	10.7%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	23.3%	\$15,207,140	18.2%	(12.5%) - 59.0%	23.3%	N/A	N/A	N/A	N/A
RHCs	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	N/A	N/A	N/A	N/A
All Types	13.5%	\$668,592,686	2.5%	8.7% - 18.4%	9.5%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## UGS VAWV

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	14.4%	\$118,710,236	2.1%	10.2% - 18.6%	10.1%	N/A	N/A	N/A	N/A
SNF	26.6%	\$105,209,822	8.6%	9.7% - 43.5%	26.6%	N/A	N/A	N/A	N/A
ESRD	28.4%	\$12,866,997	17.1%	(5.0%) - 61.9%	1.2%	N/A	N/A	N/A	N/A
Other FI Service Types	5.4%	\$3,461,249	3.3%	(1.2%) - 12.0%	4.6%	N/A	N/A	N/A	N/A
RHCs	7.8%	\$425,208	5.4%	(2.8%) - 18.5%	7.8%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	N/A	N/A	N/A	N/A
All Types	16.6%	\$240,673,512	2.8%	11.1% - 22.2%	13.5%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.



## Veritus PA

FI Provider Type	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non- Response Claims	Projected Improper Payments Including Non- Response Claims*	Standard Error	95% Confidence Interval	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims	Including Non- Response Claims	Excluding Non- Response Claims
SNF	19.3%	\$184,530,530	5.2%	9.1% - 29.5%	19.2%	N/A	N/A	N/A	N/A
OPPS, Laboratory (Billing an FI), Ambulatory (Billing an FI)	12.9%	\$108,718,513	2.7%	7.7% - 18.2%	9.0%	N/A	N/A	N/A	N/A
Other FI Service Types	15.5%	\$9,868,767	7.0%	1.7% - 29.3%	13.0%	N/A	N/A	N/A	N/A
ESRD	2.5%	\$1,966,296	3.1%	( 3.6%) - 8.5%	2.5%	N/A	N/A	N/A	N/A
RHCs	2.7%	\$548,299	1.6%	( 0.3%) - 5.7%	1.0%	N/A	N/A	N/A	N/A
Non-PPS Hospital In-patient	0.0%	\$0	0.0%	0.0% - 0.0%	0.0%	N/A	N/A	N/A	N/A
All Types	14.7%	\$305,632,405	2.7%	9.4% - 19.9%	13.0%	N/A	N/A	N/A	N/A

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

# Appendix E – Non-Responder Special Study and Other Non-Response Information.

Tables E1 – E4 provide rates for:

- 1) all non-responder claims
- 2) non-responder claims with less than \$100 billed, and
- 3) non-responder claims with \$100 or more billed.

## E1: Overall Rates for Non-Response

Cluster	All		Less than \$100		\$100 or more	
	Paid Non-Response Rate Including No Doc.	95% Confidence Interval	Paid Non-Response Rate Less Than \$100	95% Confidence interval	Paid Non-Response Rate Greater Than Or Equal To \$100	95% Confidence Interval
All Clusters	4.5%	4.0% - 5.1%	4.4%	4.1% - 4.7%	4.6%	3.9% - 5.3%

## E2: Carrier Rates for Non-Response

Carrier Cluster	All		Less than \$100		\$100 or more	
	Paid Non-Response Rate Including No Doc.	95% Confidence Interval	Paid Non-Response Rate Less Than \$100	95% Confidence interval	Paid Non-Response Rate Greater Than Or Equal To \$100	95% Confidence Interval
BCBS RI	6.4%	3.8% - 8.9%	5.6%	3.9% - 7.2%	7.2%	2.5% - 11.8%
TrailBlazer TX	5.0%	3.3% - 6.7%	6.0%	4.3% - 7.6%	4.3%	2.0% - 6.6%
BCBS AR NM/OK/LA	4.7%	3.4% - 6.0%	5.8%	4.3% - 7.4%	3.7%	2.1% - 5.4%
GHI NY	4.6%	3.1% - 6.1%	5.3%	3.7% - 6.8%	4.0%	1.8% - 6.3%
Triple S, Inc. PR/VI	4.5%	2.8% - 6.2%	4.7%	3.5% - 5.9%	4.3%	1.3% - 7.3%
WPS WI/IL/MI/MN	4.3%	2.9% - 5.7%	5.4%	3.8% - 7.0%	3.3%	1.3% - 5.2%
AdminaStar IN/KY	3.9%	1.6% - 6.3%	3.4%	2.3% - 4.5%	4.4%	0.4% - 8.4%
TrailBlazer MD/DC/DE/VA	3.9%	2.3% - 5.5%	4.3%	3.1% - 5.5%	3.6%	1.2% - 6.0%
NHIC MA/ME/NH/VT	3.8%	2.5% - 5.2%	4.5%	3.1% - 5.9%	3.3%	1.2% - 5.3%
Cahaba GBA AL/GA/MS	3.7%	2.2% - 5.1%	4.5%	3.0% - 6.0%	3.0%	1.1% - 5.0%
Palmetto GBA SC	3.6%	0.9% - 6.3%	3.5%	2.4% - 4.5%	3.7%	(0.7%) - 8.0%
CIGNA ID/TN/NC	3.5%	1.7% - 5.2%	3.4%	2.1% - 4.7%	3.5%	0.7% - 6.4%
First Coast Service Options FL	3.4%	1.7% - 5.0%	3.2%	2.0% - 4.5%	3.4%	0.9% - 6.0%
Noridian CO/ND/SD/WY/IA	3.4%	1.5% - 5.3%	2.9%	1.9% - 3.8%	3.8%	0.3% - 7.3%
BCBS UT	3.3%	1.8% - 4.9%	3.2%	1.8% - 4.6%	3.5%	1.1% - 5.9%

Carrier Cluster	All		Less than \$100		\$100 or more	
	Paid Non-Response Rate Including No Doc.	95% Confidence Interval	Paid Non-Response Rate Less Than \$100	95% Confidence interval	Paid Non-Response Rate Greater Than Or Equal To \$100	95% Confidence Interval
NHIC CA	3.2%	1.8% - 4.6%	3.0%	1.9% - 4.0%	3.5%	1.2% - 5.7%
BCBS AR AR/MO	3.1%	2.2% - 4.0%	4.8%	3.4% - 6.1%	1.8%	0.7% - 3.0%
Empire NY/NJ	3.0%	1.9% - 4.0%	4.5%	3.1% - 5.8%	1.9%	0.6% - 3.2%
HealthNow NY	2.9%	0.7% - 5.1%	2.8%	1.8% - 3.8%	3.0%	(1.3%) - 7.4%
Palmetto GBA OH/WV	2.7%	1.2% - 4.2%	2.7%	1.6% - 3.8%	2.7%	0.3% - 5.1%
BCBS KS KS/NE/Kansas City	2.5%	1.4% - 3.7%	2.9%	1.9% - 3.8%	2.3%	0.5% - 4.1%
Noridian AZ/HI/NV/AK/OR/WA	2.0%	1.3% - 2.6%	3.8%	2.6% - 5.1%	0.6%	0.1% - 1.2%
First Coast Service Options CT	1.7%	1.1% - 2.4%	2.3%	1.4% - 3.1%	1.3%	0.5% - 2.2%
HGSA PA	1.7%	1.0% - 2.3%	2.3%	1.5% - 3.1%	1.1%	0.3% - 1.9%
BCBS MT	0.6%	0.3% - 0.9%	1.2%	0.6% - 1.9%	0.0%	0.0% - 0.0%
All Carriers	3.4%	3.3% - 3.6%	4.0%	3.9% - 4.1%	3.0%	2.4% - 3.5%

### E3: DMERC Rates for Non-Response

DMERCs	All		Less than \$100		\$100 or more	
	Paid Non-Response Rate Including No Doc.	95% Confidence Interval	Paid Non-Response Rate Less Than \$100	95% Confidence interval	Paid Non-Response Rate Greater Than Or Equal To \$100	95% Confidence Interval
Palmetto GBA -Region C	9.9%	4.2% - 15.5%	3.3%	2.0% - 4.7%	10.9%	4.4% - 17.4%
CIGNA-Region D	2.8%	1.3% - 4.2%	2.1%	1.1% - 3.0%	2.9%	1.3% - 4.6%
TriCenturion-Region A	2.0%	1.0% - 3.0%	4.6%	2.0% - 7.1%	1.3%	0.3% - 2.2%
AdminaStar Federal-Region B	1.3%	0.7% - 1.9%	1.5%	0.7% - 2.2%	1.3%	0.6% - 1.9%
All DMERCs	5.7%	5.6% - 5.9%	2.8%	2.6% - 3.0%	6.3%	3.0% - 9.7%

### E4: FI Rates for Non-Response

FI Cluster	All		Less than \$100		\$100 or more	
	Paid Non-Response Rate Including No Doc.	95% Confidence Interval	Paid Non-Response Rate Less Than \$100	95% Confidence interval	Paid Non-Response Rate Greater Than Or Equal To \$100	95% Confidence Interval
BCBS AR	16.0%	4.73% - 27.34%	7.6%	5.75% - 9.48%	16.6%	4.60% - 28.60%
Mutual (all states)	9.4%	4.75% - 14.07%	14.9%	12.24% - 17.47%	9.2%	4.28% - 14.03%
CareFirst MD/DC	8.6%	(1.92%) - 19.13%	7.1%	4.85% - 9.30%	8.6%	(2.07%) - 19.33%
NORIDIAN MN/ND	7.9%	2.24% - 13.51%	5.0%	3.66% - 6.44%	8.0%	2.07% - 14.03%
CAHABA GBA AL	7.8%	5.58% - 10.06%	11.9%	9.54% - 14.30%	7.6%	5.18% - 9.93%

FI Cluster	All		Less than \$100		\$100 or more	
	Paid Non-Response Rate Including No Doc.	95% Confidence Interval	Paid Non-Response Rate Less Than \$100	95% Confidence interval	Paid Non-Response Rate Greater Than Or Equal To \$100	95% Confidence Interval
UGS CA	7.8%	5.28% - 10.26%	13.0%	10.54% - 15.55%	7.6%	5.05% - 10.18%
COSVI PR/VI	7.4%	4.02% - 10.82%	12.3%	10.22% - 14.46%	6.8%	3.03% - 10.57%
FCSO FL	7.4%	4.75% - 9.95%	15.8%	13.17% - 18.33%	6.9%	4.19% - 9.63%
BCBS NE	7.1%	2.83% - 11.35%	0.9%	0.20% - 1.55%	7.5%	2.96% - 12.02%
Empire NY/CT/DE	5.9%	3.01% - 8.76%	16.9%	14.25% - 19.64%	5.3%	2.23% - 8.28%
TBHE TX/CO/NM	5.7%	3.34% - 7.99%	6.7%	4.93% - 8.44%	5.6%	3.17% - 8.06%
UGS MI/WI	4.8%	2.77% - 6.88%	9.0%	6.99% - 10.98%	4.4%	2.18% - 6.66%
AdminaStar IA/IN/IL/KY/OH	4.7%	0.26% - 9.23%	5.1%	3.52% - 6.64%	4.7%	0.04% - 9.41%
Anthem NH/VT	4.7%	2.24% - 7.07%	3.2%	1.95% - 4.43%	4.8%	2.13% - 7.48%
Medicare Northwest OR/ID/UT	4.7%	2.57% - 6.74%	7.0%	5.33% - 8.72%	4.4%	2.17% - 6.70%
Palmetto GBA SC	4.6%	3.02% - 6.26%	8.9%	4.98% - 12.88%	4.6%	2.99% - 6.24%
BCBS RI	4.1%	1.36% - 6.83%	4.6%	3.21% - 5.96%	4.1%	1.14% - 6.98%
Palmetto GBA NC	4.1%	1.14% - 7.10%	7.4%	5.55% - 9.31%	3.9%	0.81% - 7.09%
AH MA/ME	3.8%	0.80% - 6.80%	4.9%	2.95% - 6.81%	3.7%	0.49% - 6.94%
UGS VA/WV	3.8%	1.69% - 5.91%	5.0%	3.52% - 6.44%	3.7%	1.46% - 5.97%
TRISPAN MS/LA/MO	3.1%	1.31% - 4.90%	7.1%	5.23% - 8.88%	2.9%	1.04% - 4.76%
BCBS KS	2.8%	0.75% - 4.93%	3.7%	2.50% - 4.82%	2.8%	0.53% - 5.03%
BCBS GA	2.7%	0.44% - 4.98%	5.7%	3.99% - 7.33%	2.6%	0.28% - 4.96%
Veritus PA	2.0%	0.82% - 3.10%	3.9%	2.55% - 5.20%	1.8%	0.62% - 3.04%
BCBS AZ	1.9%	0.93% - 2.81%	1.8%	0.64% - 2.99%	1.9%	0.87% - 2.87%
BCBS WY	1.9%	0.75% - 3.05%	3.4%	2.00% - 4.83%	1.8%	0.60% - 3.03%
CAHABA GBA IA	1.6%	0.72% - 2.53%	1.9%	0.69% - 3.03%	1.6%	0.70% - 2.55%
Premera WA/AK	1.3%	0.81% - 1.88%	7.6%	5.99% - 9.30%	0.8%	0.29% - 1.36%
BCBS MT	1.0%	0.50% - 1.49%	2.7%	1.57% - 3.89%	0.8%	0.31% - 1.35%
BCBS OK	1.0%	0.25% - 1.76%	2.2%	1.17% - 3.26%	0.9%	0.11% - 1.72%
Riverbend TN	0.9%	(2.67%) - 4.46%	4.6%	3.17% - 5.95%	0.5%	(3.40%) - 4.45%
All FIs	5.4%	4.39% - 6.39%	8.6%	8.00% - 9.11%	5.2%	4.19% - 6.29%

To verify the accuracy of the 5.8 % adjusted claims payment error rate in the FY 2003 error report, CMS conducted a Non-Responder Special Study (NRSS). In this study, CMS selected a random sample of 800 Part B, and DMERC, and Part A non-inpatient PPS providers assigned a “no response” error in the November 2003 error rate report, The NRSS contract staff implimented aggressive efforts to secure documentation from these providers and derived an accurate payment error rate for this sample.

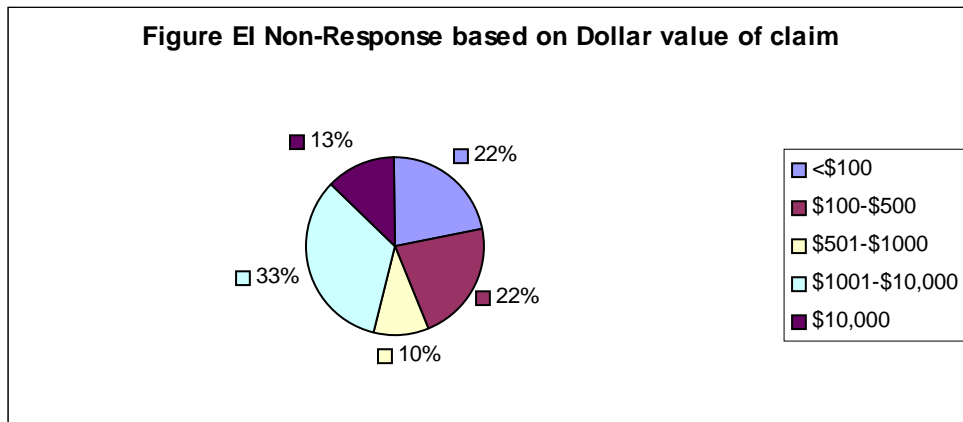
The aggressive telephone contact protocol in this special study permitted CERT to obtain medical records for 80.75% of non-responder claims. CERT was unable to reach providers to request documentation for just 16 of the 800 sampled claims. The following table details the reasons the NRSS did not obtain medical records.

Post Analysis for 800 NRSS claims:

NR_types	Description	Counts	Pct
A	Provider indicates they have or they will submit the requested medical record to the CERT contractor.	646	80.75%
D	Provider indicates that they do not have a medical record for that date of service.	39	4.88%
I	Case appealed by provider and appeal reversed or partially reversed CERT	32	4.00%
B	Provider indicates no such patient exists.	30	3.75%
C	Provider indicates that although this patient exists, no such service was provided to the patient.	18	2.25%
M	Unreachable provider, or provider no longer billing Medicare.	16	2.00%
L	Provider is in FID and medical records for BI investigative reasons can not be obtained.	11	1.38%
E2	Provider indicates that a different provider (a third party) has the relevant medical record.	3	0.38%
J	Extenuating circumstances(fire, flood, explosion etc.), or provider retired or died.	3	0.38%
E1	Provider indicates that another department within the provider is responsible for fulfilling documentation requests.	2	0.25%
TOTAL		800	100%

The NRSS review of medical records for the sampled claims revealed an error rate for those claims of 23.10%. CERT adjusted the November 2003 unadjusted error rate of 9.8% to capture the results of the NRSS. The re-adjusted 2003 error rate was 5.71%. That rate reflects the NRSS findings that an estimated 75.8% of non-response errors in the November 2003 report were actually properly paid claims. The readjusted November 2003 report payment error rate of 5.71% has a projected dollars paid in error of \$11.4 billion. CERT tested the difference between the FY 2003 re-adjusted estimate from the NRSS and the adjusted rate for FY 2003 report.. CERT determined the re-adjusted rate for this study (5.71%) was not statistically different from the adjusted payment error rate of 5.8% in the November 2003 report.

Figure E1 shows the distribution of the dollar value of non-response claims.



## Appendix F – Dollars at Risk of Non-Response (DARN)

Table F1 shows DARN rates by cluster. CMS calculated the DARN rate by estimating the total dollar value of requests for medical records from provider that received the final CERT following letters 10 days or more before the documentation cut off date for this report (i.e., February 23, 2004).

**Table F1: Overall DARN Rates**

Cluster	Number of Claims Sent	Number of Claims Responded	Response Rate	DARN*	95% Confidence Interval (\$)
All Clusters	116,982	115,793	98.8%	\$1,692,902,406	1,338,785,599 - 2,047,019,213

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

**Table F2: Carrier DARN Rates**

Cluster	Number of Claims Sent	Number of Claims Responded	Response Rate	DARN*	95% Confidence Interval (\$)
Empire NY/NJ	1,864	1,822	97.7%	\$95,570,368	52,478,156 - 138,662,579
WPS WI/IL/MI/MN	1,985	1,953	98.4%	\$86,296,606	41,415,715 - 131,177,497
CIGNA ID/TN/NC	1,968	1,949	99.0%	\$80,859,251	12,134,387 - 149,584,115
TrailBlazer TX	1,989	1,951	98.1%	\$58,867,146	29,737,753 - 87,996,539
First Coast Service Options FL	1,964	1,947	99.1%	\$56,028,639	17,523,051 - 94,534,228
TrailBlazer MD/DC/DE/VA	1,987	1,949	98.1%	\$55,834,358	29,955,302 - 81,713,414
NHIC CA	1,994	1,972	98.9%	\$51,103,173	20,807,647 - 81,398,698
Noridian AZ/HI/NV/AK/OR/WA	1,945	1,918	98.6%	\$49,940,927	27,279,816 - 72,602,038
BCBS AR NM/OK/LA	1,989	1,933	97.2%	\$46,533,361	27,904,418 - 65,162,303
NHIC MA/ME/NH/VT	1,997	1,969	98.6%	\$35,475,682	14,751,673 - 56,199,691
Palmetto GBA SC	1,958	1,928	98.5%	\$30,145,759	-1,975,339 - 62,266,857
BCBS AR AR/MO	1,990	1,960	98.5%	\$29,684,317	15,117,605 - 44,251,028
Palmetto GBA OH/WV	1,996	1,978	99.1%	\$24,359,060	6,189,939 - 42,528,181
Triple S, Inc. PR/VI	1,976	1,922	97.3%	\$19,141,998	9,350,829 - 28,933,167
BCBS RI	1,971	1,910	96.9%	\$12,213,598	6,204,732 - 18,222,464
BCBS KS KS/NE/Kansas City	1,967	1,955	99.4%	\$10,733,244	1,282,154 - 20,184,333
GHI NY	1,975	1,916	97.0%	\$6,409,306	4,383,630 - 8,434,981
First Coast Service Options CT	1,982	1,964	99.1%	\$6,249,711	2,651,731 - 9,847,692
Noridian CO/ND/SD/WY/IA	1,996	1,982	99.3%	\$4,870,539	1,501,859 - 8,239,218
Cahaba GBA AL/GA/MS	1,991	1,987	99.8%	\$4,286,813	-496,849 - 9,070,476
BCBS UT	1,678	1,669	99.5%	\$1,596,819	-58,751 - 3,252,389
HGSA PA	1,942	1,941	99.9%	\$1,341,503	-1,289,436 - 3,972,442
HealthNow NY	1,946	1,936	99.5%	\$1,304,000	348,147 - 2,259,854
AdminaStar IN/KY	1,995	1,992	99.8%	\$1,156,203	-341,934 - 2,654,340



Cluster	Number of Claims Sent	Number of Claims Responded	Response Rate	DARN*	95% Confidence Interval (\$)
BCBS MT	1,999	1,992	99.6%	\$402,707	81,590 - 723,824
All Carriers	49,044	48,395	98.7%	\$770,405,088	645,195,189 - 895,614,986

\*This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

**Table F3: DMERC DARN Rates**

DMERC	Number of Claims Sent	Number of Claims Responded	Response Rate	DARN*	95% Confidence Interval (\$)
Palmetto GBA -Region C	1,849	1,823	98.6%	\$385,848,930	93,064,396 - 678,633,464
CIGNA-Region D	1,884	1,872	99.4%	\$20,009,513	2,149,686 - 37,869,340
TriCenturion-Region A	1,936	1,899	98.1%	\$19,314,593	8,537,797 - 30,091,389
AdminaStar Federal-Region B	1,978	1,964	99.3%	\$11,790,740	3,919,822 - 19,661,658
ALL DMERCs	7,647	7,558	98.8%	\$436,963,776	143,170,938 - 730,756,614

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

**Table F4: FI DARN Rates**

Cluster	Number of Claims Sent	Number of Claims Responded	Response Rate	DARN*	95% Confidence Interval (\$)
Mutual of Omaha	1,985	1,910	96.2%	\$202,950,364	85,102,870 - 320,797,858
Empire NY/CT/DE	1,965	1,912	97.3%	\$38,256,876	13,723,866 - 62,789,885
First Coast Service Options FL	1,938	1,911	98.6%	\$34,527,519	-778,137 - 69,833,175
AdminaStar IA/IN/IL/KY/OH	1,982	1,976	99.7%	\$32,611,533	-25,331,338 - 90,554,404
UGS CA/HI/AS/GU/NMI	1,975	1,963	99.4%	\$26,702,673	-7,679,258 - 61,084,604
CareFirst MD/DC	1,795	1,775	98.9%	\$24,783,580	3,054,474 - 46,512,686
Riverbend TN	1,983	1,957	98.7%	\$19,844,942	171,232 - 39,518,652
BCBS RI	1,994	1,938	97.2%	\$19,370,501	-1,069,953 - 39,810,955
TrailBlazer TX/CO/NM	1,957	1,943	99.3%	\$16,957,386	3,072,556 - 30,842,215
Noridian MN/ND	1,977	1,975	99.9%	\$14,784,974	-14,190,693 - 43,760,642
Palmetto GBA SC	1,618	1,610	99.5%	\$9,939,190	-8,421,775 - 28,300,154
Anthem NH/VT	1,993	1,967	98.7%	\$8,477,707	1,405,400 - 15,550,014
UGS VA/WV	1,996	1,992	99.8%	\$6,286,505	-4,889,855 - 17,462,865
Cahaba GBA IA	1,965	1,964	99.9%	\$5,130,050	-4,930,864 - 15,190,964
Palmetto GBA NC	1,987	1,981	99.7%	\$4,546,724	-1,093,263 - 10,186,711
BCBS GA	1,968	1,966	99.9%	\$4,357,000	-4,049,645 - 12,763,646
UGS MI/WI	1,831	1,824	99.6%	\$4,217,861	875,272 - 7,560,450
COSVI PR/VI	1,972	1,904	96.6%	\$3,306,251	840,522 - 5,771,980
Medicare Northwest OR/ID/UT	1,953	1,946	99.6%	\$2,534,027	-105,646 - 5,173,700
BCBS AR	1,979	1,970	99.5%	\$2,297,104	-692,662 - 5,286,871
Trispan MS/LA/MO	1,954	1,951	99.8%	\$1,696,170	-816,530 - 4,208,870
Cahaba GBA AL	1,957	1,953	99.8%	\$691,870	-175,680 - 1,559,421
AH MA/ME	1,996	1,994	99.9%	\$677,465	-271,889 - 1,626,818
BCBS AZ	1,980	1,979	99.9%	\$196,088	-188,473 - 580,649
BCBS KS	1,977	1,970	99.6%	\$169,838	-13,410 - 353,086
BCBS WY	1,911	1,909	99.9%	\$75,467	-33,549 - 184,483
Premiera WA/AK	1,924	1,922	99.9%	\$72,102	-42,898 - 187,103
BCBS OK	1,858	1,857	99.9%	\$71,774	-68,992 - 212,540

Cluster	Number of Claims Sent	Number of Claims Responded	Response Rate	DARN*	95% Confidence Interval (\$)
Veritus PA	1,985	1,985	100.0%	\$0	0 - 0
BCBS MT	1,990	1,990	100.0%	\$0	0 - 0
BCBS NE	1,946	1,946	100.0%	\$0	0 - 0
All FIs	60,291	59,840	98.9%	\$485,533,542	332,625,041 - 638,442,043

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## Appendix G – Problem Procedure Codes

The CMS has recognized problems with certain procedure codes. In a letter dated June 1, 2000, the CMS Administrator notified Medicare physicians that CPT codes 99233 and 99214 for evaluation and management services had accounted for a significant proportion of the FY 1998 and FY 1999 coding errors. The Administrator noted that documentation for many of these services more appropriately supported CPT codes 99212 and 99231, respectively, and reminded providers to document the specific procedures performed. Our analysis indicates continuing problems with these same procedure codes. This appendix presents tabulations for those codes.

***CPT code 99233, subsequent hospital care.*** The physician should typically spend 35 minutes with the patient and perform at least two of these key procedures: a detailed interval patient history, a detailed examination, and/or medical decision making of high complexity.

Medical reviews of 768 lines for January 1, 2003 through December 31, 2003, disclosed that 391 lines, or 50.9 percent, were in error. This was a significant increase since last year. Of the 391 errors, 152 were incorrectly coded and subsequently downcoded to lower valued procedure codes. Most of the remaining errors related to documentation problems.

Table G1 summarizes data for our 9-year analysis of this code.

Table G1: Problem Code: CPT Code 99233			
Fiscal Year	Number of Lines Reviewed	Number of Lines Questioned	Percent of Lines in Error
1996	217	115	53.0%
1997	416	128	30.8%
1998	457	114	24.9%
1999	187	102	54.5%
2000	449	220	49.0%
2001	338	142	42.0%
2002	228	174	76.3%
2003	709	435	61.4%
2004	768	391	50.9%

***CPT code 99214, office or other outpatient visit.*** The physician should typically spend 25 minutes face-to-face with the patient and perform at least two of the following

procedures: a detailed patient history, a detailed examination, and/or medical decision making of moderate complexity.

As shown in table G2, medical reviews of 3250 lines for January 1, 2003 through December 31, 2003, disclosed 589 lines, or 18.1 percent, were in error--a significant decrease from previous years. Of the 589 errors, 418 were incorrectly coded.

Table G2 summarizes data for our 9-year analysis of this code.

<b>Table G2: Problem Code: CPT Code 99214</b>			
<b>Fiscal Year</b>	<b>Number of Lines Reviewed</b>	<b>Number of Lines Questioned</b>	<b>Percent of Lines in Error</b>
<b>1996</b>	140	54	38.6%
<b>1997</b>	234	86	36.8%
<b>1998</b>	168	63	37.5%
<b>1999</b>	143	81	56.6%
<b>2000</b>	191	71	37.2%
<b>2001</b>	214	67	31.3%
<b>2002</b>	104	24	23.1%
<b>2003</b>	2,798	687	24.6%
<b>2004</b>	3,250	589	18.1%

***CPT code 99232, subsequent hospital care*** For this billing code, the physician should typically spend 25 minutes at bedside with the patient and should perform at least two of the following key procedures: an expanded problem-focused interval patient history, an expanded problem-focused examination, and/or medical decision making of moderate complexity.

In FY 2001, although not highlighted in the Administrator's letter, the OIG noted a high incidence of error in CPT code 99232 (subsequent hospital care) in all years reviewed. CMS has noted a significant decrease for January 1, 2003 through December 31, 2003. As illustrated in the next Table G3, medical reviews of 2485 lines for January 1, 2003 through December 31, 2003, disclosed that 754 lines, or 30.3 percent, were in error. Of these, 95 were incorrectly coded, and the medical records supported lower valued procedure codes. Most of the remaining errors related to documentation problems.

<b>Table G3: Problem Code: CPT Code 99232</b>			
<b>Fiscal Year</b>	<b>Number of Lines Reviewed</b>	<b>Number of Lines Questioned</b>	<b>Percent of Lines in Error</b>
<b>1996</b>	597	266	44.6%
<b>1997</b>	1,159	350	30.2%
<b>1998</b>	911	181	19.9%
<b>1999</b>	837	279	33.3%
<b>2000</b>	881	270	30.6%
<b>2001</b>	964	146	15.1%
<b>2002</b>	488	179	36.7%
<b>2003</b>	2,213	855	38.6%
<b>2004</b>	2,485	754	30.3%

Some examples of incorrect coding for the period January 1, 2003 through December 31, 2003, are as follows:

**Physician.** A physician was paid \$68.78 (original amount paid) for a new patient office visit (CPT code 99203) which is an office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: a detail history, a detailed examination, and medical decision making of low complexity. The medical documentation supported an office visit for an established patient (CPT code 99213) which by definition is an office or other outpatient visit for the evaluation and management of an established patient which requires at least two of these three key component: an expanded problem focused history, an expanded problem focused examination, or a medical decision- making of low complexity. The actual documentation supported an expanded problem focused history, a detailed examination, and a medical decision of low complexity thereby supporting the CPT code 99213 level of service for an established patient. As a result, the medical reviewer changed the CPT-4 code to 99213 from 99203, downcoding the service and counted dollars denied (\$31.30) as error.

Other Evaluation and Management (E&M) codes also contribute significantly to the error rate.

The American Medical Association (AMA) has developed Evaluation and Management (E&M) codes that Medicare physicians use when submitting claims for payment. In 2003, there were 21 categories of E&M codes, including categories such as office or other outpatient service, consultations, emergency department services, and critical care services. Within each category of codes there is a range of three to five levels of Health Care Common Procedure Coding System codes that determines the level of service. The level of service determines the level of payment. There are three key descriptors used to determine the appropriate HCPCS code: history, examination, and medical decision-making. There are four other components, including counseling, coordination of care, nature of presenting problem, and time that are contributory factors, but they are not used to determine the HCPCS code.<sup>10</sup>

<sup>10</sup> However, in instances where counseling and coordination of care is the primary nature of the encounter, time is the primary basis for billing

Table G4 lists all E&M codes with 2,000 or more claims in the CERT sample. The table provides information on the error found for each code.

**Table G4: E&M Codes with more than 2,000 claims reviewed**

E&M Code	Paid/Allowed Claims Error Rate					Provider Compliance Error Rate		Services Processed Error Rate	
	Including Non-Response Claims	Projected Improper Payments Including Non-Response Claims*	Standard Error	95% Confidence Interval	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims	Including Non-Response Claims	Excluding Non-Response Claims
Subsequent hospital care (99232)	28.5%	\$698,478,711	1.7%	25.2% - 31.8%	22.5%	30.0%	23.9%	34.9%	30.1%
Office/outpatient visit, est (99214)	10.2%	\$383,186,049	0.6%	9.0% - 11.4%	8.1%	17.9%	16.0%	18.0%	16.3%
Office/outpatient visit, est (99213)	4.0%	\$205,761,025	0.4%	3.3% - 4.7%	1.6%	9.0%	6.7%	12.7%	10.7%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

Tables G5 through G8 provide for each contractor type (Carrier/DMERC/FI) the service-specific overpayment rates. 2004 is the first year that CMS is including service specific overpayment rates.

**Table G5: Service Specific Net Overpayment Rates: Carriers**

Service Billed to Carrier (HCPCS)	Number of Claims in Sample	Number of Lines in Sample	Dollars Overpaid in Sample	Total Dollars Paid in Sample	Projected Dollars Overpaid*	Over Payment Rate
Follow-up inpatient consult (99263)	25	41	\$2,237	\$3,975	\$24,469,835	45.0%
Follow-up inpatient consult (99262)	66	102	\$1,702	\$4,317	\$25,167,654	39.6%
Td vaccine > 7, im (90718)	32	32	\$34	\$93	\$505,660	37.2%
Echo guide for biopsy (76942)	67	68	\$1,382	\$4,399	\$26,774,396	35.6%
Subsequent hospital care (99233)	413	681	\$19,244	\$53,727	\$324,934,058	33.4%
Ultrasound therapy (97035)	354	440	\$1,384	\$4,465	\$22,989,125	33.2%
X-ray exam, knee, 4 or more (73564)	49	59	\$275	\$1,290	\$7,749,581	32.9%
Follow-up inpatient consult (99261)	29	43	\$235	\$871	\$5,262,001	32.5%
Mechanical traction therapy (97012)	67	75	\$107	\$354	\$2,032,333	31.8%
Electrical stimulation (97032)	165	193	\$863	\$2,569	\$9,901,503	31.3%
Critical care, first hour (99291)	109	172	\$7,327	\$31,123	\$176,418,091	29.6%
Initial hospital care (99222)	264	265	\$6,590	\$24,097	\$110,877,061	29.2%
Radiation therapy dose plan (77300)	38	40	\$773	\$3,449	\$16,173,469	27.7%
Hemodialysis, one	75	121	\$1,857	\$7,621	\$36,749,272	26.8%

Service Billed to Carrier (HCPs)	Number of Claims in Sample	Number of Lines in Sample	Dollars Overpaid in Sample	Total Dollars Paid in Sample	Projected Dollars Overpaid*	Over Payment Rate
evaluation (90935)						
Subsequent hospital care (99231)	726	1,147	\$10,169	\$40,060	\$173,891,810	26.7%
Antigen therapy services (95165)	48	50	\$725	\$2,918	\$14,455,153	26.6%
Initial inpatient consult (99255)	149	150	\$6,940	\$23,616	\$110,339,101	26.6%
Massage therapy (97124)	110	138	\$479	\$1,945	\$6,015,382	26.0%
Initial hospital care (99223)	373	373	\$13,432	\$48,886	\$208,908,559	25.4%
Nursing facility care (99302)	40	40	\$569	\$2,580	\$10,805,154	25.3%
All Other Codes	46,245	81,196	\$294,444	\$4,397,052	\$4,798,559,615	6.6%
Overall	47,398	85,426	\$370,767	\$4,659,408	\$6,112,978,812	7.9%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

**Table G6: Service Specific Net Overpayment Rates: DMERCs**

Service Billed to DMERC (HCPs)	Number of Claims in Sample	Number of Lines in Sample	Dollars Overpaid in Sample	Total Dollars Paid in Sample	Projected Dollars Overpaid*	Over Payment Rate
Drain ostomy pouch w/flange (A5063)	60	61	\$362	\$1,959	\$2,662,560	20.6%
Blood glucose/reagent strips (A4253)	1,158	1,185	\$18,040	\$109,458	\$132,794,844	16.3%
Lancets per box (A4259)	617	625	\$1,550	\$10,639	\$13,059,580	15.7%
Lancet device each (A4258)	119	121	\$234	\$1,932	\$1,959,469	13.4%
Blood glucose monitor home (E0607)	78	78	\$486	\$3,567	\$3,010,350	11.2%
Enteral feed supp pump per d (B4035)	118	123	\$2,063	\$27,606	\$18,261,243	8.8%
Nebulizer administration set (A7003)	180	190	\$77	\$828	\$616,031	8.3%
Battery for glucose monitor (A4254)	41	41	\$26	\$334	\$210,788	8.3%
Direct heat form shoe insert (A5509)	47	51	\$598	\$7,338	\$4,807,782	7.9%
Iv pole (E0776)	61	61	\$72	\$1,184	\$736,983	7.9%
Cont airway pressure device (E0601)	183	202	\$1,204	\$14,410	\$8,751,614	7.7%
Powered pres-redu air matrs (E0277)	40	52	\$2,442	\$26,045	\$17,946,374	7.6%
Ipratropium brom inh sol u d (J7644)	383	400	\$5,609	\$69,895	\$42,452,910	7.5%
Albuterol inh sol u d (J7619)	517	540	\$3,924	\$48,497	\$30,013,194	7.4%
Enteral formulae category i (B4150)	131	139	\$1,777	\$27,711	\$13,216,261	6.8%
Lens sphcyl bifocal 4.00d/1 (V2203)	69	86	\$312	\$4,042	\$1,799,450	6.7%
Enter feed supkit syr by day (B4034)	33	35	\$345	\$4,521	\$1,924,267	6.3%
Diab shoe for density insert (A5500)	58	63	\$390	\$6,275	\$3,161,085	6.1%
Portable liquid O2 (E0434)	126	141	\$216	\$4,852	\$1,979,000	5.8%
Calibrator solution/chips (A4256)	221	221	\$108	\$2,188	\$935,818	5.6%
All Other Codes	5,642	8,603	\$37,628	\$902,523	\$252,426,912	3.7%



Overall	7,481	13,018	\$77,465	\$1,275,804	\$552,726,517	5.7%
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\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

**Table G7: Service Specific Net Overpayment Rates: FI**

Service Billed to Fiscal Intermediary (Type of Bill)	Number of Claims in Sample	Number of Lines in Sample	Dollars Overpaid in Sample	Total Dollars Paid in Sample	Projected Dollars Overpaid*	Over Payment Rate
SNF-inpatient (including Part A) (21)	1,340	1,340	\$1,281,054	\$5,151,941	\$4,702,723,042	23.8%
SNF-inpatient or home health visits (Part B only) (22)	925	925	\$70,037	\$336,692	\$297,152,910	21.0%
Clinic-CORF (75)	146	146	\$7,704	\$63,167	\$19,536,251	11.4%
Clinic-ORF only (eff 4/97); ORF and CMHC (10/91 - 3/97) (74)	813	813	\$23,721	\$254,027	\$71,199,387	10.5%
Hospital-swing beds (18)	110	110	\$37,842	\$452,125	\$60,087,200	10.2%
Clinic-hospital based or independent renal dialysis facility (72)	1,198	1,198	\$185,839	\$2,381,421	\$567,159,160	7.9%
Hospital-outpatient (HHA-A also) (13)	29,390	29,390	\$656,411	\$8,656,906	\$1,919,327,339	7.5%
Special facility or ASC surgery-hospice (hospital based) (82)	83	83	\$12,515	\$191,746	\$40,815,983	6.9%
SNF-outpatient (HHA-A also) (23)	213	213	\$6,744	\$54,118	\$10,226,498	6.6%
Special facility or ASC surgery-hospice (non-hospital based) (81)	645	645	\$96,451	\$1,483,844	\$269,313,097	6.0%
HHA-inpatient or home health visits (Part B only) (32)	727	727	\$63,967	\$1,286,297	\$196,154,726	5.5%
Hospital-inpatient or home health visits (Part B only) (12)	107	107	\$2,940	\$80,099	\$15,120,043	5.1%
HHA-outpatient (HHA-A also) (33)	593	593	\$49,579	\$1,306,899	\$176,056,326	4.9%
Special facility or ASC surgery-rural primary care hospital (85)	3,305	3,305	\$56,130	\$834,909	\$58,979,649	4.7%
Hospital-other (Part B) (14)	12,704	12,704	\$30,643	\$696,137	\$94,485,864	4.2%
Hospital-inpatient (including Part A) (11)	430	430	\$26,830	\$2,190,885	\$214,895,816	4.1%
Clinic-CMHC (76)	32	32	\$293	\$35,317	\$3,834,840	3.9%
Special facility or ASC surgery-ambulatory surgical center (83)	77	77	\$2,751	\$87,961	\$3,514,401	3.1%
Clinic-independent provider based FQHC (73)	475	475	\$962	\$36,379	\$7,633,133	2.7%
Clinic-rural health (71)	2,869	2,869	\$3,725	\$206,637	\$8,918,151	1.6%
All Other Codes	192	192	\$0	\$4,160	\$0	0.0%
Overall	56,374	56,374	\$2,616,137	\$25,791,668	\$8,737,133,816	11.2%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

**Table G8: Net Overpayment Rates: Carrier/DMERC/FI**

Service Billed to Carriers/DMERC/FIs	Number of Claims in Sample	Number of Lines in Sample	Dollars Overpaid in Sample	Total Dollars Paid in Sample	Projected Dollars Overpaid	Over Payment Rate
Overall	111,253	154,818	\$3,064,369	\$31,726,880	\$15,402,839,145	9.40%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

Table G9 through G11 lists for each contractor type the top twenty services with the highest dollars in error due to upcoding. CMS identified the top twenty services based on dollars in error.

**TableG9: Services with Upcoding Errors: Carriers**

Service Billed to Carrier (HCPCS)	Upcoding Errors		
	Paid Claims Error Rate	Projected Improper Payments*	95% Confidence Interval
Initial inpatient consult (99255)	19.7%	\$89,369,199	14.2% - 25.2%
Office/outpatient visit, est (99215)	18.6%	\$130,450,415	15.4% - 21.9%
Office/outpatient visit, new (99204)	18.5%	\$71,340,048	13.1% - 24.0%
Office consultation (99245)	17.5%	\$72,561,177	11.4% - 23.7%
Office/outpatient visit, new (99205)	15.5%	\$29,298,430	9.3% - 21.7%
Nursing facility care (99303)	15.2%	\$19,986,478	9.1% - 21.4%
Ultrasound therapy (97035)	14.8%	\$10,506,534	(10.1%) - 39.7%
Leuprolide acetate suspnsion (J9217)	14.7%	\$109,660,637	(11.0%) - 40.4%
Extrnl counterpulse, per tx (G0166)	14.5%	\$23,617,870	(12.0%) - 40.9%
Initial inpatient consult (99254)	13.8%	\$93,282,816	10.2% - 17.4%
Nursing facility care (99302)	13.4%	\$6,151,096	3.7% - 23.1%
Office consultation (99244)	12.7%	\$111,167,010	9.9% - 15.6%
Initial hospital care (99223)	12.2%	\$113,829,350	9.4% - 15.1%
Initial hospital care (99222)	11.1%	\$44,077,500	7.3% - 14.9%
Follow-up inpatient consult (99261)	10.4%	\$1,690,787	(5.5%) - 26.4%
Office/outpatient visit, new (99203)	8.4%	\$37,899,515	6.0% - 10.8%
Nursing fac care, subseq (99313)	8.2%	\$15,451,416	4.4% - 12.1%
Subsequent hospital care (99233)	8.1%	\$90,130,703	6.0% - 10.3%
Follow-up inpatient consult (99263)	7.6%	\$4,223,227	3.6% - 11.6%
Critical care, first hour (99291)	6.5%	\$41,760,979	(2.5%) - 15.5%
All Other Codes	0.9%	\$666,104,457	0.8% - 1.1%
Overall	2.2%	\$1,782,559,643	1.9% - 2.6%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

**Table G10: Services with Upcoding Errors: DMERCs**

Service Billed to DMERC (HCPCS)	Upcoding Errors		
	Paid Claims Error Rate	Projected Improper Payments*	95% confidence Interval
Bedside drainage bag (A4357)	1.3%	\$80,466	(1.3%) - 3.9%
Ipratropium brom inh sol u d (J7644)	0.7%	\$4,157,914	(0.2%) - 1.7%
Lancets per box (A4259)	0.6%	\$497,111	(0.2%) - 1.3%
Blood glucose/reagent strips (A4253)	0.5%	\$4,063,244	(0.0%) - 1.0%
All Other Codes	0.2%	\$14,121,680	0.0% - 0.3%
Albuterol inh sol u d (J7619)	0.1%	\$351,764	(0.1%) - 0.2%
Overall	0.2%	\$23,272,179	0.2% - 0.3%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

**Table G11: Services with Upcoding Errors: FIs**

Service Billed to FIs (Type of Bill)	Upcoding Errors		
	Paid Claims Error Rate	Projected Improper Payments*	95% Confidence Interval
Clinic-hospital based or independent renal dialysis facility (72)	1.3%	\$96,913,384	0.4% - 2.2%
SNF-inpatient or home health visits (Part B only) (22)	1.3%	\$18,862,701	(0.1%) - 2.7%
SNF-outpatient (HHA-A also) (23)	1.0%	\$1,640,212	(0.3%) - 2.3%
SNF-inpatient (including Part A) (21)	1.0%	\$194,495,454	0.3% - 1.6%
HHA-inpatient or home health visits (Part B only) (32)	0.9%	\$33,958,533	(0.5%) - 2.3%
Hospital-outpatient (HHA-A also) (13)	0.6%	\$167,165,823	0.2% - 1.0%
Special facility or ASC surgery-rural primary care hospital (85)	0.5%	\$7,137,518	0.1% - 1.0%
Hospital-swing beds (18)	0.5%	\$2,780,455	(0.3%) - 1.2%
Clinic-ORF only (eff 4/97); ORF and CMHC (10/91 - 3/97) (74)	0.4%	\$3,106,861	(0.0%) - 0.9%
Hospital-inpatient or home health visits (Part B only) (12)	0.4%	\$1,504,076	(0.3%) - 1.1%
Clinic-CORF (75)	0.1%	\$147,325	(0.0%) - 0.2%
Hospital-other (Part B) (14)	0.1%	\$1,804,730	0.0% - 0.1%
Clinic-rural health (71)	0.0%	\$251,402	(0.0%) - 0.1%
Special facility or ASC surgery-hospice (non-hospital based) (81)	0.0%	\$1,577,721	(0.0%) - 0.1%
HHA-outpatient (HHA-A also) (33)	0.0%	\$613,090	(0.0%) - 0.0%
Overall	0.6%	\$531,959,286	0.4% - 0.9%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

# *Appendix H – Results of the Undercoding Special Study*

## **Improper Coding Resulting in Underpayments by Medicare for Claims Submitted Between 01/01/02 through 12/31/02 Improper Medicare Fee-for-Service Payments Report Fiscal Year 2003**

### **BACKGROUND**

CMS conducted an Undercoding Special Study of claims submitted in CY 2002 to Carriers/DMERCs/FIs. The net paid claims error rate for Carriers was 14.4%; for Durable Medical Equipment Regional Carriers (DMERCs), 13.6%; for Fiscal Intermediary (FIs), 14.4%. QIO data was not available for analysis.

Providers use a standard coding system to bill Medicare. Clinicians from the CERT Review Contractor determined that, in some instances, providers submitted documentation that supported a higher code than the code the provider submitted, i.e., providers “undercoded” claims. In those instances, not only did the provider documentation support the higher code, but also the beneficiaries needed the higher level of service. For “undercoded” claims, the payment error is considered underpaid based on the difference between the dollar amount for the billed service and the dollar amount for the service supported by the submitted documentation.

The paid claims error rate and improper payment amount was calculated in dollars paid after the Carrier/DMERC/FI made its payment decision on the claim/admission. For the FY 2003 report, it excluded any claim/admission that the Carrier/DMERC/FI completely disallowed. The paid claims error rate represents the percentage of dollars that the Carriers/DMERCs/FIs erroneously paid and is a good indicator of how claim errors in the Medicare FFS program impact the Medicare trust fund. The unadjusted, national improper payment amount of \$19.6 billion was a net figure (underpayments are subtracted from overpayments). The estimated gross improper payment amount (where underpayments were added to overpayments) in Medicare FFS for FY 2003 was \$21.5 billion. Incorrectly coded claims accounted for 12.1% of the national paid claims error rate for the Improper Medicare FFS Payments Report for FY 2003. Therefore, although previous Improper Medicare FFS Payments Reports documented error rates related to incorrect coding between 8.5% and 18%, since these reports only document the net dollars of incorrect coding, the extent of undercoding has not been documented or reported. Thus, this is the first report documenting the extent of undercoding for Medicare FFS, based on the data included in the Improper Medicare FFS Payments Report for FY 2003.

# OVERVIEW OF METHODOLOGY

In the *Improper Medicare Fee-for-Service (FFS) Payments Report for FY 2003 Report*, the improper payments for services were calculated by weighting each contractor's error rate by claim volume or payment, as well as by the number of months that claims were sampled for each contractor. The CERT contractor used raw non-weighted data to produce the Undercoding Special Study. This means that calculated rates in this appendix, for claims in the dataset used for the November 2003 report, do not account for weighting, based on the size of a contractor for each contractor type. Thus, the rates reported by CERT are different from the error rates reported in the Improper Fee-for-Service Payments Report. The rates listed for each HCPCS code in this report represent the un-weighted rate within the dataset used for the *Improper Medicare Fee-for-Service (FFS) Payments for FY 2003 Report*.

CMS calculated the undercoding rate by dividing the number of lines incorrectly undercoded by the number of lines billed. The dollars undercoded equates the sum of all undercoded claims. The net dollars incorrectly coded were calculated by subtracting the dollars for undercoded claims from the dollars from upcoded claims. CMS calculated the percent of undercoded claims by dollars by dividing the dollars undercoded by the net dollars for incorrectly coded claims. CMS established upper and lower 95% confidence intervals and standard errors were established for all rates.

## Results

Table H1 summarizes undercoding by contractor type: Carrier/DMERC/FI. Carrier claims had 523 lines of service undercoded for rate of .67%. There were significantly less undercoding errors for DMERCs and FIs than for carriers. There were only 3 and 34 lines of service undercoded, respectively. Thus, the rate of undercoding for DMERCs was .02% and FIs was .05%. The cumulative projected underpayment of \$266,494,968 related to incorrect coding for all services billed to Carriers, DMERCs, and FIs.

Table H1: Summary of Underpayment Due to Incorrect Coding for PAID claims 11/2003\*

Claim Type	Total Lines	Lines Underpaid	Percent of Lines Undercoded	95% LL	95% UL	Standard Error	Net Incorrect Coding Amount	Overpayment Amount	Underpayment Amount	Percent Underpayment of Gross Incorrect Coding Amount
Carrier	77,890	523	0.67%	0.62%	0.73%	0.03%	\$86,578.59	\$99,143.73	\$ (12,565.14)	11.25%
DMERC	13,446	3	0.02%	0.00%	0.07%	0.01%	\$1,692.65	\$1,801.25	\$ (108.60)	5.69%
FI	61,842	34	0.05%	0.04%	0.08%	0.01%	\$1,824.23	\$8,457.92	\$ (6,633.69)	43.96%
Total	153,178	560	0.37%	0.34%	0.40%	0.02%	\$90,095.47	\$109,402.90	\$ (19,307.43)	15.00%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

Table H2 reveals the underpayments related to incorrectly coded services for claims submitted to carriers. The table is sorted in descending order by dollars underpaid per Health Care Common Procedure Coding System (HCPCS) code. One hundred twenty-six lines of service billed for

99213 were underpaid for an undercoding rate of 1.75%. The only other HCPCS code with greater than \$1,000 underpayments was CPT code 99212, the level 3 established office visit. The table demonstrates an underpayment amount of \$2,773 related to incorrect coding of CPT code 99212. There were 171 lines undercoded for 99212 with an undercoding rate of 8.5%. The two evaluation and management (E&M) services, 99212 and 992143 account for 47.1% of the underpayment dollars for carrier undercoded claims.

Only 83 HCPCS of a possible 9,000 billable codes to Medicare were undercoded. Therefore carriers undercoded (83/9,000)/(billable codes) in FY 2003. However 32 of 83 codes for (32/83) are related to E&M services. E&M codes account for \$10,436 of the \$12,565 underpaid for carriers, which represents 83.1% of underpayment dollars.

There were some HCPCS codes for which providers frequently undercoded. However, providers rarely submitted claims using these codes. The consultation codes, 99241, 99251, 99261 and Emergency Room visits (99281), were billed infrequently but had high rates of undercoding per line of service billed with rates of undercoding between 12.9% and 13.3%.

Common Procedure Terminology (CPT) are used by physicians to bill Medicare. Codes 99212 and 99213 are the only HCPCS codes with greater than 100 services underpaid.

Table H2: Underpayment Due to Incorrect Coding in Carrier Paid Claims Sorted by Underpayment Amount\*

Claim Type	Description	Total Lines	Lines Underpaid	Percent of Lines Underpaid	95% LL	95% UL	Standard Error	Net Incorrect Coding Amount	Underpayment Amount	Percent Underpayment of Net Incorrect Coding Amount
99213	Office/outpatient visit, est	7,183	126	1.75%	1.46%	2.09%	0.15%	\$543.67	(\$3,148.61)	46.03%
99212	Office/outpatient visit, est	2,012	171	8.50%	7.32%	9.80%	0.62%	(\$2,642.75)	(\$2,773.54)	95.50%
99283	Emergency dept visit	385	26	6.75%	4.46%	9.74%	1.28%	(\$164.81)	(\$836.27)	55.47%
99231	Subsequent hospital care	1,338	30	2.24%	1.52%	3.19%	0.40%	(\$696.84)	(\$789.03)	89.54%
99211	Office/outpatient visit, est	759	22	2.90%	1.83%	4.36%	0.61%	(\$416.08)	(\$556.96)	79.81%
99311	Nursing fac care, subseq	436	12	2.75%	1.43%	4.76%	0.78%	(\$299.97)	(\$299.97)	100.00%
45378	Diagnostic colonoscopy	120	1	0.83%	0.02%	4.56%	0.83%	(\$270.64)	(\$270.64)	100.00%
Q0136	Non ESRD Epoetin alpha injection	135	1	0.74%	0.02%	4.06%	0.74%	(\$261.40)	(\$261.40)	100.00%
45382	Colonoscopy/control bleeding	1	1	100.00%	2.50%	100.00%	0.00%	(\$259.48)	(\$259.48)	100.00%
99214	Office/outpatient visit, est	2,798	9	0.32%	0.15%	0.61%	0.11%	\$13,630.51	(\$220.49)	1.57%
99261	Follow-up inpatient consult	45	6	13.33%	5.05%	26.79%	5.07%	(\$177.02)	(\$193.01)	92.35%
99251	Initial inpatient consult	31	4	12.90%	3.63%	29.83%	6.02%	(\$181.17)	(\$181.17)	100.00%
17000	Destroy benign/ pre-malignant lesion	292	1	0.34%	0.01%	1.89%	0.34%	(\$161.00)	(\$161.00)	100.00%
99282	Emergency dept visit	111	4	3.60%	0.99%	8.97%	1.77%	(\$145.35)	(\$158.01)	92.58%
17003	Destroy lesions, 2-14	194	1	0.52%	0.01%	2.84%	0.51%	(\$110.54)	(\$149.63)	79.29%
99243	Office consultation	277	2	0.72%	0.09%	2.58%	0.51%	\$1,362.62	(\$135.27)	8.28%
99239	Hospital discharge day	101	1	0.99%	0.03%	5.39%	0.99%	\$218.77	(\$117.14)	25.86%
90806	Psytx, off, 45-50 min	302	3	0.99%	0.21%	2.88%	0.57%	(\$105.46)	(\$105.46)	100.00%
99262	Follow-up inpatient consult	97	7	7.22%	2.95%	14.30%	2.63%	\$83.05	(\$105.11)	35.84%
99202	Office/outpatient visit, new	230	4	1.74%	0.48%	4.39%	0.86%	\$258.67	(\$92.70)	20.88%

Claim Type	Description	Total Lines	Lines Underpaid	Percent of Lines Underpaid	95% LL	95% UL	Standard Error	Net Incorrect Coding Amount	Underpayment Amount	Percent Underpayment of Net Incorrect Coding Amount
92012	Eye exam established pat	431	3	0.70%	0.14%	2.02%	0.40%	(\$69.91)	(\$89.04)	82.31%
99203	Office/outpatient visit, new	365	3	0.82%	0.17%	2.38%	0.47%	\$2,521.01	(\$87.92)	3.26%
99232	Subsequent hospital care	2,213	4	0.18%	0.05%	0.46%	0.09%	\$2,565.98	(\$84.92)	3.10%
36800	Insertion of cannula for hemodialysis	4	1	25.00%	0.63%	80.59%	21.65%	(\$81.49)	(\$81.49)	100.00%
99347	Home visit, est patient	33	3	9.09%	1.92%	24.33%	5.00%	(\$78.26)	(\$78.26)	100.00%
99242	Office consultation	121	2	1.65%	0.20%	5.84%	1.16%	\$274.28	(\$63.53)	15.83%
99284	Emergency dept visit	387	1	0.26%	0.01%	1.43%	0.26%	\$493.17	(\$60.63)	9.87%
92004	Eye exam, new patient	125	1	0.80%	0.02%	4.38%	0.80%	(\$40.42)	(\$60.38)	75.16%
93882	Extra cranial study	2	1	50.00%	1.26%	98.74%	35.36%	(\$59.31)	(\$59.31)	100.00%
74150	Ct abdomen w/o dye	56	1	1.79%	0.05%	9.55%	1.77%	(\$58.25)	(\$58.25)	100.00%
72192	Ct pelvis w/o dye	48	2	4.17%	0.51%	14.25%	2.88%	(\$49.92)	(\$49.92)	100.00%
99244	Office consultation	304	1	0.33%	0.01%	1.82%	0.33%	\$5,655.90	(\$49.69)	0.86%
71020	Chest x-ray	1,085	3	0.28%	0.06%	0.81%	0.16%	(\$31.65)	(\$47.66)	74.85%
99281	Emergency dept visit	23	3	13.04%	2.78%	33.59%	7.02%	(\$47.54)	(\$47.54)	100.00%
99222	Initial hospital care	235	1	0.43%	0.01%	2.35%	0.42%	\$2,351.32	(\$47.52)	1.94%
11040	Debride skin, partial	74	3	4.05%	0.84%	11.39%	2.29%	(\$36.94)	(\$36.94)	100.00%
90812	Intac psytch, off, 45-50 min	6	1	16.67%	0.42%	64.12%	15.21%	(\$36.00)	(\$36.00)	100.00%
99245	Office consultation	107	1	0.93%	0.02%	5.10%	0.93%	\$3,081.82	(\$33.61)	1.07%
20550	Inject tendon/ligament/cyst	60	1	1.67%	0.04%	8.94%	1.65%	\$8.58	(\$33.49)	44.32%
88108	Cytopath, concentrate tech	48	1	2.08%	0.05%	11.07%	2.06%	(\$32.82)	(\$32.82)	100.00%
70547	Mr angiography neck w/o dye	9	1	11.11%	0.28%	48.25%	10.48%	(\$31.37)	(\$31.37)	100.00%
99233	Subsequent hospital care	709	1	0.14%	0.00%	0.78%	0.14%	\$8,125.52	(\$30.70)	0.37%
99312	Nursing fac care, subseq	586	2	0.34%	0.04%	1.23%	0.24%	\$931.97	(\$30.58)	3.08%
71010	Chest x-ray	1,133	2	0.18%	0.02%	0.64%	0.12%	(\$18.34)	(\$27.18)	75.46%
93731	Analyze pacemaker system	35	1	2.86%	0.07%	14.92%	2.82%	(\$23.99)	(\$23.99)	100.00%
99252	Initial inpatient consult	82	1	1.22%	0.03%	6.61%	1.21%	\$226.31	(\$23.48)	8.59%
00300	Anesth, head/neck/trunk	12	1	8.33%	0.21%	38.48%	7.98%	(\$9.07)	(\$23.34)	62.06%
10040	Acne surgery	2	1	50.00%	1.26%	98.74%	35.36%	(\$21.33)	(\$21.33)	100.00%
99263	Follow-up inpatient consult	52	1	1.92%	0.05%	10.26%	1.90%	\$665.01	(\$20.92)	2.96%
74020	X-ray exam of abdomen	87	1	1.15%	0.03%	6.24%	1.14%	(\$19.23)	(\$19.23)	100.00%
99313	Nursing fac care, subseq	147	2	1.36%	0.17%	4.83%	0.96%	\$726.59	(\$17.01)	2.24%
99215	Office/outpatient visit, est	356	2	0.56%	0.07%	2.01%	0.40%	\$7,131.66	(\$16.80)	0.23%
J1100	Dexamethasone sodium phos	100	2	2.00%	0.24%	7.04%	1.40%	(\$9.30)	(\$14.45)	73.72%
93040	Rhythm ECG with report	5	1	20.00%	0.51%	71.64%	17.89%	(\$13.40)	(\$13.40)	100.00%
72072	X-ray exam of thoracic spine	12	1	8.33%	0.21%	38.48%	7.98%	(\$13.09)	(\$13.09)	100.00%
11720	Debride nail, 1-5	110	1	0.91%	0.02%	4.96%	0.90%	(\$12.31)	(\$12.31)	100.00%
97110	Therapeutic exercises	710	2	0.28%	0.03%	1.01%	0.20%	\$263.07	(\$10.61)	3.73%
11311	Shave skin lesion	10	1	10.00%	0.25%	44.50%	9.49%	(\$9.66)	(\$9.66)	100.00%
98940	Chiropractic manipulation	496	1	0.20%	0.01%	1.12%	0.20%	(\$9.33)	(\$9.33)	100.00%
76092	Mammogram, screening	403	1	0.25%	0.01%	1.37%	0.25%	\$72.14	(\$8.71)	9.73%
20605	Drain/inject, joint/bursa	33	1	3.03%	0.08%	15.76%	2.98%	(\$7.53)	(\$7.53)	100.00%



Claim Type	Description	Total Lines	Lines Underpaid	Percent of Lines Underpaid	95% LL	95% UL	Standard Error	Net Incorrect Coding Amount	Underpayment Amount	Percent Underpayment of Net Incorrect Coding Amount
90805	Psytx, off, 20-30 min w/E&M	107	1	0.93%	0.02%	5.10%	0.93%	(\$7.24)	(\$7.24)	100.00%
73500	X-ray exam of hip	39	1	2.56%	0.06%	13.48%	2.53%	(\$7.13)	(\$7.13)	100.00%
99204	Office/outpatient visit, new	231	1	0.43%	0.01%	2.39%	0.43%	\$4,130.86	(\$6.28)	0.15%
J7060	5% dextrose/water	11	1	9.09%	0.23%	41.28%	8.67%	(\$5.47)	(\$5.47)	100.00%
90804	Psytx, office, 20-30 min	45	1	2.22%	0.06%	11.77%	2.20%	(\$5.11)	(\$5.11)	100.00%
72040	X-ray exam of neck spine	27	1	3.70%	0.09%	18.97%	3.63%	(\$4.45)	(\$4.45)	100.00%
93010	Electrocardiogram report	1,103	1	0.09%	0.00%	0.50%	0.09%	\$21.77	(\$3.89)	13.16%
73564	X-ray exam, knee, 4 or more	62	1	1.61%	0.04%	8.66%	1.60%	\$26.81	(\$3.56)	10.49%
71250	Ct thorax w/o dye	41	1	2.44%	0.06%	12.86%	2.41%	(\$3.51)	(\$3.51)	100.00%
88304	Tissue exam by pathologist	94	1	1.06%	0.03%	5.79%	1.06%	\$44.37	(\$3.34)	6.54%
J3301	Triamcinolone acetonide inj	102	1	0.98%	0.02%	5.34%	0.98%	\$3.08	(\$3.04)	33.19%
A0429	BLS-emergency	98	1	1.02%	0.03%	5.55%	1.02%	\$400.11	(\$2.83)	0.70%
81003	Urinalysis, auto, w/o scope	139	2	1.44%	0.17%	5.10%	1.01%	(\$2.54)	(\$2.54)	100.00%
J0704	Betamethasone sod phosp/4 MG	10	1	10.00%	0.25%	44.50%	9.49%	(\$2.47)	(\$2.47)	100.00%
70120	X-ray exam of mastoids	1	1	100.00%	2.50%	100.00%	0.00%	(\$2.05)	(\$2.05)	100.00%
74010	X-ray exam of abdomen	9	1	11.11%	0.28%	48.25%	10.48%	(\$1.97)	(\$1.97)	100.00%
82948	Reagent strip/blood glucose	37	1	2.70%	0.07%	14.16%	2.67%	(\$0.82)	(\$0.82)	100.00%
J1030	Methylprednisolone 40 MG inj	75	1	1.33%	0.03%	7.21%	1.32%	(\$0.65)	(\$0.65)	100.00%
95812	Electroencephalogram (EEG)	3	1	33.33%	0.84%	90.57%	27.22%	(\$0.33)	(\$0.33)	100.00%
73110	X-ray exam of wrist	46	1	2.17%	0.06%	11.53%	2.15%	(\$0.28)	(\$0.28)	100.00%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

Table H3 shows the HCPCS billed to DMERCs with undercoded claims. Table H3 is sorted in descending order by underpayment amount. For all claims submitted to DMERCs, there were only 3 lines (for 3 separate HCPCS codes) that contained an undercoded service

**Table H3: Underpayment Due to Incorrect Coding in DME Paid Claim 11/2003\***

HCPCS	Description	Total Lines	Lines Underpaid	Percent Underpaid Lines	95% LL	95% UL	Standard Error	Net Incorrect Coding Amount	Under-payment Amount	Percent Underpayment of Gross Incorrect Coding Amount
B4036	Enteral feed sup kit grav by	12	1	8.33%	0.21%	38.48%	7.98%	(\$47.04)	(\$47.04)	100.00%
B4034	Enter feed sup kit syr by day	53	1	1.89%	0.05%	10.07%	1.87%	(\$42.00)	(\$42.00)	100.00%
K0003	Lightweight wheelchair	162	1	0.62%	0.02%	3.39%	0.62%	(\$19.56)	(\$19.56)	100.00%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

Table H4 shows undercoded services billed to FIs. For all claims providers submitted to FI's, there were 34 lines (for 27 separate HCPCS codes) that contained an undercoded service. This table is sorted in descending order by underpayment amount.

**Table H4: Underpayment due to Incorrect Coding in FI Paid Claims 11/2003, order by Underpayment Amount\***

HCPCS	Description	Total Lines	Lines Under-paid	Percent Underpaid Lines	95% LL	95% UL	Standard Error	Net Incorrect Coding Amount	Underpayment Amount	Percent Under-payment of Gross Incorrect Coding Amount
77416	Radiation treatment delivery	18	1	5.56%	0.14%	27.29%	5.40%	(\$2,228.80)	(\$2,228.80)	100.00%
Q0081	Infusion ther other than che	328	1	0.30%	0.01%	1.69%	0.30%	(\$1,110.21)	(\$1,627.47)	75.88%
Q0136	Non esrd epoetin alpha inj	165	3	1.82%	0.38%	5.22%	1.04%	(\$514.80)	(\$883.29)	70.56%
74150	Ct abdomen w/o dye	61	3	4.92%	1.03%	13.71%	2.77%	(\$818.32)	(\$818.32)	100.00%
A0425	Ground mileage	121	1	0.83%	0.02%	4.52%	0.82%	(\$301.28)	(\$301.28)	100.00%
P9016	RBC leukocytes reduced	53	1	1.89%	0.05%	10.07%	1.87%	(\$10.74)	(\$136.93)	52.04%
74020	X-ray exam of abdomen	42	1	2.38%	0.06%	12.57%	2.35%	(\$131.94)	(\$131.94)	100.00%
J1260	Dolasetron mesylate	24	1	4.17%	0.11%	21.12%	4.08%	(\$114.28)	(\$114.28)	100.00%
72192	Ct pelvis w/o dye	48	1	2.08%	0.05%	11.07%	2.06%	\$488.72	(\$59.08)	9.74%
94642	Aerosol inhalation treatment	1	1	100.00%	2.50%	100.00%	0.00%	(\$49.42)	(\$49.42)	100.00%
90784	Injection, IV	236	1	0.42%	0.01%	2.34%	0.42%	\$146.35	(\$45.76)	19.24%
J2915	NA Ferric Gluconate Complex	67	1	1.49%	0.04%	8.04%	1.48%	(\$40.85)	(\$40.85)	100.00%
73564	X-ray exam, knee, 4 or more	33	1	3.03%	0.08%	15.76%	2.98%	\$0.00	(\$38.74)	50.00%
81015	Microscopic exam of urine	14	1	7.14%	0.18%	33.87%	6.88%	(\$5.88)	(\$30.84)	55.27%
72040	X-ray exam of neck spine	43	1	2.33%	0.06%	12.29%	2.30%	(\$26.97)	(\$26.97)	100.00%
97110	Therapeutic exercises	2655	3	0.11%	0.02%	0.33%	0.07%	(\$25.57)	(\$25.57)	100.00%
A0426	Als 1	16	1	6.25%	0.16%	30.23%	6.05%	(\$22.12)	(\$22.12)	100.00%
A6212	Foam drg <=16 sq in w/border	1	1	100.00%	2.50%	100.00%	0.00%	(\$16.81)	(\$16.81)	100.00%
76090	Mammogram, one breast	78	1	1.28%	0.03%	6.94%	1.27%	(\$13.64)	(\$13.64)	100.00%
84479	Assay of thyroid (t3 or t4)	57	1	1.75%	0.04%	9.39%	1.74%	(\$5.95)	(\$5.95)	100.00%
84030	Assay of blood pku	2	1	50.00%	1.26%	98.74%	35.36%	(\$5.94)	(\$5.94)	100.00%
81003	Urinalysis, auto, w/o scope	227	3	1.32%	0.27%	3.81%	0.76%	\$15.28	(\$4.08)	17.41%
87088	Urine bacteria culture	156	1	0.64%	0.02%	3.52%	0.64%	(\$2.65)	(\$2.67)	99.26%
82550	Assay of ck (cpk)	435	1	0.23%	0.01%	1.27%	0.23%	(\$1.56)	(\$1.56)	100.00%
G0197	Evalofptforprescrip speechdevi	1	1	100.00%	2.50%	100.00%	0.00%	(\$0.83)	(\$0.83)	100.00%
87077	Culture aerobic identify	143	1	0.70%	0.02%	3.83%	0.70%	(\$0.55)	(\$0.55)	100.00%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

## CONCLUSIONS

This analysis is the first report to document the extent of undercoding services billed to Medicare FFS. The extent of undercoding for Part A and DMERC is not significant or systematic. Undercoding in Part A and DMERC most likely represents random billing errors.

For services billed to Carriers, undercoding is significant for 99212 and less so for 99213. Low level consults and the lowest level emergency visits may be undercoded significantly but these services are billed with much less frequency than the mid-level established office visits (99212,99213). Eighty-three percent of undercoding by underpayment amount is attributed to undercoding of 32 E&M services.

Lastly, undercoding rates are defined in this report by the lines of service undercoded. In payment error calculations, errors are dollar weighted. Since incorrectly coded claims result in partial overpayments or underpayments, payment errors related to incorrect coding underestimate the extent of incorrect coding relative to payments errors resulting in full denials.

For CMS to lower the error rates related to incorrect coding, CMS must focus on the rate of undercoded or upcoded services, not the dollar weighted rate associated with these payment errors.

## **Improper Coding Resulting in Underpayments by Medicare for Claims Submitted Between 01/01/03 through 12/31/03 Improper Medicare Fee-for-Service Payments Report Fiscal Year 2004**

Tables H5 through H8 provide for each contractor type (Carrier/DMERC/FI) the service-specific underpayment rates. 2004 is the first year that CMS is including service specific underpayment rates.

**Table H5: Service Specific Net Underpayment Rates: Carriers**

Service Billed to Carriers (HCPCS)	Number of Claims in Sample	Number of Lines in Sample	Dollars Underpaid in Sample	Total Dollars Paid in Sample	Projected Dollars Underpaid*	Under Payment Rate
Home visit, est patient (99348)	40	44	-\$684	\$3,232	-\$22,545,191	-43.7%
Office consultation (99241)	42	42	-\$297	\$1,527	-\$4,761,166	-18.3%
Nursing fac care, subseq (99311)	339	393	-\$762	\$11,384	-\$12,845,956	-6.8%
Office/outpatient visit, est (99212)	1,902	1,939	-\$3,914	\$60,079	-\$60,009,114	-6.6%
Office/outpatient visit, est (99211)	723	746	-\$1,057	\$12,771	-\$13,375,855	-6.1%
Office/outpatient visit, new (99201)	41	41	-\$81	\$922	-\$893,655	-5.6%
Initial inpatient consult (99251)	30	30	-\$100	\$957	-\$1,046,820	-5.1%
Emergency dept visit (99282)	107	107	-\$157	\$2,258	-\$1,761,466	-5.0%
Tissue exam by pathologist (88304)	63	65	-\$28	\$1,128	-\$880,144	-4.4%
Emergency dept visit (99283)	346	346	-\$706	\$16,558	-\$9,654,531	-3.7%
Follow-up inpatient consult (99261)	29	43	-\$33	\$871	-\$506,332	-3.1%
IV infusion, additional hour (90781)	67	69	-\$58	\$2,005	-\$1,216,300	-2.9%
Subsequent hospital care (99231)	726	1,147	-\$851	\$40,060	-\$18,359,647	-2.8%
Sodium hyaluronate injection (J7317)	28	33	-\$91	\$4,212	-\$1,823,349	-2.7%
Us exam, pelvic, complete (76856)	38	38	-\$81	\$1,960	-\$649,465	-2.0%
Ct thorax w/o dye (71250)	39	39	-\$44	\$4,646	-\$1,776,530	-1.9%
Unlisted Procedures (99999)	52	52	-\$59	\$3,134	-\$692,535	-1.9%
Follow-up inpatient consult (99263)	25	41	-\$33	\$3,975	-\$1,008,547	-1.9%
Ground mileage (A0425)	710	748	-\$362	\$26,869	-\$7,937,114	-1.8%
X-ray exam of neck spine (72040)	43	43	-\$4	\$556	-\$105,887	-1.7%
All Other Codes	44,502	79,420	-\$8,398	\$4,460,303	-\$126,576,728	-0.2%
Overall	47,398	85,426	-\$17,801	\$4,659,408	-\$288,426,331	-0.4%

\*This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

**Table H6: Service Specific Net Underpayment Rates: DMERC**

Service Billed to DMERCs (HCPCS)	Number of Claims in Sample	Number of Lines in Sample	Dollars Underpaid in Sample	Total Dollars Paid in Sample	Projected Dollars Underpaid*	Under Payment Rate
Enteral formulae category i (B4150)	131	139	\$58	\$27,711	\$729,069	0.4%
Overall	7,481	13,018	\$58	\$1,275,804	\$729,069	0.0%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

**Table H7: Service Specific Net Underpayment Rates: FI**

Service Billed to Fiscal Intermediary (Type of Bill)	Number of Claims in Sample	Number of Lines in Sample	Dollars Underpaid in Sample	Total Dollars Paid in Sample	Projected Dollars Underpaid*	Under Payment Rate
HHA-outpatient (HHA-A also) (33)	593	593	-\$5,314	\$1,306,899	-\$13,337,522	-0.4%
Hospital-outpatient (HHA-A also) (13)	29,390	29,390	-\$44,021	\$8,656,906	-\$88,663,714	-0.3%
Special facility or ASC surgery-rural primary care hospital (85)	3,305	3,305	-\$1,567	\$834,909	-\$3,493,032	-0.3%
SNF-inpatient or home health visits (Part B only) (22)	925	925	-\$2,267	\$336,692	-\$3,300,828	-0.2%
Hospital-inpatient or home health visits (Part B only) (12)	107	107	-\$313	\$80,099	-\$532,655	-0.2%
Hospital-swing beds (18)	110	110	-\$366	\$452,125	-\$703,497	-0.1%
Clinic-ORF only (eff 4/97); ORF and CMHC (10/91 - 3/97) (74)	813	813	-\$543	\$254,027	-\$696,616	-0.1%
Hospital-inpatient (including Part A) (11)	430	430	-\$763	\$2,190,885	-\$5,023,550	-0.1%
Hospital-other (Part B) (14)	12,704	12,704	-\$488	\$696,137	-\$1,506,556	-0.1%
SNF-inpatient (including Part A) (21)	1,340	1,340	-\$5,392	\$5,151,941	-\$11,905,387	-0.1%
Clinic-hospital based or independent renal dialysis facility (72)	1,198	1,198	-\$2,018	\$2,381,421	-\$3,448,304	0.0%
Clinic-CORF (75)	146	146	-\$44	\$63,167	-\$76,387	0.0%
HHA-inpatient or home health visits (Part B only) (32)	727	727	-\$420	\$1,286,297	-\$971,957	0.0%
Special facility or ASC surgery-hospice (non-hospital based) (81)	645	645	\$0	\$1,483,844	\$0	0.0%
SNF-outpatient (HHA-A also) (23)	213	213	\$0	\$54,118	\$0	0.0%
HHA-other (Part B) (34)	191	191	\$0	\$4,160	\$0	0.0%
Clinic-rural health (71)	2,869	2,869	\$0	\$206,637	\$0	0.0%
Clinic-independent provider based FOHC (73)	475	475	\$0	\$36,379	\$0	0.0%
Clinic-CMHC (76)	32	32	\$0	\$35,317	\$0	0.0%
Special facility or ASC surgery-hospice (hospital based) (82)	83	83	\$0	\$191,746	\$0	0.0%
All Other Codes	78	78	\$0	\$87,961	\$0	0.0%
Overall	56,374	56,374	-\$63,515	\$25,791,668	-\$133,660,006	-0.2%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

**Table H8: Carrier/DMERC/FI Net Underpayment Rates**

Services Billed to Carrier, DMERCs, and FIs	Number of Claims in Sample	Number of Lines in Sample	Dollars Underpaid in Sample	Total Dollars Paid in Sample	Projected Dollars Underpaid*	Under Payment Rate
Overall	111,253	154,818	-\$187,132	\$31,737,879	-\$719,595,876	-0.40%

\* This data has not been adjusted to exclude beneficiary copayments, deductibles, and reductions to recover previous overpayments.

# Appendix I – Statistics and Other Information for the CERT Sample

Table I1 provides information on the sample size for each cluster included in the report. This table provides data by claim. It is not comparable to other tables that are by line for Carriers and DMERCs and by claim for FIs.

**Table I1a: Carrier Size of Universe and Size of Review Sample**

Cluster	Number of Claims Reviewed	Number of Claims Questioned	Percent of Claims Non-response
All Carriers	49044	7354	3.8%
First Coast Service Options FL	1964	303	3.1%
First Coast Service Options CT	1982	257	2.7%
Palmetto GBA SC	1958	291	3.7%
WPS WI/IL/MI/MN	1985	312	5.6%
TrailBlazer TX	1989	369	5.8%
Cahaba GBA AL/GA/MS	1991	318	3.3%
NHIC CA	1994	364	3.9%
TrailBlazer MD/DC/DE/VA	1987	277	4.2%
NHIC MA/ME/NH/VT	1997	288	4.1%
Noridian CO/ND/SD/WY/IA	1996	221	3.1%
Empire NY/NJ	1864	286	4.9%
Palmetto GBA OH/WV	1996	265	3.1%
HGSA PA	1942	272	2.7%
BCBS RI	1971	317	4.7%
HealthNow NY	1946	254	3.3%
GHI NY	1975	355	5.0%
BCBS MT	1999	199	1.5%
BCBS UT	1678	226	2.8%
Noridian AZ/HI/NV/AK/OR/WA	1945	284	3.7%
AdminaStar IN/KY	1995	259	3.1%
BCBS KS KS/NE/Kansas City	1967	222	2.9%
Triple S, Inc. PR/VI	1976	520	4.4%
CIGNA ID/TN/NC	1968	289	2.9%
BCBS AR AR/MO	1990	296	4.4%
BCBS AR NM/OK/LA	1989	310	6.0%

**Table I1b: DMERC Size of Universe and Size of Review Sample**

Cluster	Number of Claims Reviewed	Number of Claims Questioned	Percent of Claims Non-response
All DMERCs	7,647	758	2.5%
AdminaStar Federal-Region B	1,978	185	1.8%
TriCenturion-Region A	1,936	198	2.8%
Palmetto GBA -Region C	1,849	180	3.3%
CIGNA-Region D	1,884	195	2.1%

**Table I1c: FI Size of Universe and Size of Review Sample**

Cluster	Number of Claims Reviewed	Number of Claims Questioned	Percent of Claims Non-response
All FIs	60291	8687	6.5%
CAHABA GBA AL	1957	370	11.9%
BCBS GA	1968	233	4.0%
FCSO FL	1938	443	13.3%
BCBS AR	1979	344	8.8%
CAHABA GBA IA	1965	149	2.7%
AdminaStar IA/IN/IL/KY/OH	1982	245	4.1%
BCBS KS	1977	204	5.3%
AH MA/ME	1996	198	3.2%
Anthem NH/VT	1993	198	4.1%
BCBS RI	1994	277	5.1%
CareFirst MD/DC	1795	362	5.7%
TRISPAN MS/LA/MO	1954	311	6.3%
Palmetto GBA NC	1987	276	4.9%
NORIDIAN MN/ND	1977	265	7.1%
Mutual (all states)	1985	433	12.1%
Empire NY/CT/DE	1965	442	12.3%
BCBS OK	1858	143	2.1%
Veritus PA	1985	214	3.6%
COSVI PR/VI	1972	458	10.6%
Palmetto GBA SC	1618	211	5.9%
Riverbend TN	1983	248	5.6%
TBHE TX/CO/NM	1957	332	7.4%
BCBS AZ	1980	188	3.5%
UGS VA/WV	1996	302	5.0%
UGS CA	1975	452	11.5%
UGS MI/WI	1831	267	8.8%
BCBS WY	1911	176	3.2%
BCBS MT	1990	262	7.3%
Premiera WA/AK	1924	275	7.2%
Medicare Northwest OR/ID/UT	1953	278	5.7%
BCBS NE	1946	131	2.9%

Table I2 provides information on the sample size for each category for which this report makes national estimates. Data in these tables for Carrier and DMERC data is expressed in terms of



lines, and data in these tables for FIs data is expressed in terms of claims. Totals cannot be calculated for these categories since CMS is using different units for each type of provider.

**Table I2a: Numbers in Each Cell for High Level Tables: Carriers**

Variable	Number of Claims Reviewed	Number of Claims Questioned	Percent of Claims Non-response
<b>ALL Carriers</b>	88,391	10,850	3.3%
<b>hcpcs procedure code</b>			
Chest x-ray (71010)	1,300	117	5.1%
Automated hemogram (85025)	1,516	113	3.2%
Prothrombin time (85610)	1,216	73	2.9%
Electrocardiogram report (93010)	1,303	257	9.7%
Office/outpatient visit, est (99212)	1,971	330	1.6%
Office/outpatient visit, est (99213)	7,555	629	2.5%
Office/outpatient visit, est (99214)	3,250	589	2.5%
Subsequent hospital care (99231)	1,264	436	9.3%
Subsequent hospital care (99232)	2,485	754	7.7%
Drawing blood for specimen (G0001)	3,988	275	3.0%
Other	62,543	7,277	3.1%
<b>Betos Code</b>			
Hospital visit	5,160	1,712	8.7%
Lab tests	17,794	1,104	2.6%
Minor procedures	4,668	845	1.9%
Office visit	14,242	1,915	2.4%
Other tests	2,263	375	7.0%
Specialist	2,307	95	1.5%
Standard imaging	2,428	213	4.9%
Other	39,529	4,591	3.3%
<b>Resolution Type</b>			
Automated	16,978	311	0.9%
Complex	79	2	1.3%
None	70,299	10,521	4.0%
Routine	937	16	0.9%
<b>Diagnosis Code</b>			
Diseases of other endocrine glands (25)	3,883	413	3.0%
Other metabolic disorders and immunity disorders (27)	3,387	263	2.8%
Diseases of the blood and bloodforming organs (28)	2,459	259	3.3%
Disorders of the eye and adnexa (36)	3,034	190	1.5%
Hypertensive disease (40)	4,359	560	3.6%
Ischemic heart disease, Diseases of pulmonary circulation (41)	3,114	431	3.5%
Other forms of heart disease (42)	4,806	775	5.0%
Arthropathies and related disorders (71)	3,953	604	3.7%
Dorsopathies, Rheumatism, excluding the back (72)	5,199	781	2.5%
Symptoms (78)	9,514	1,238	3.8%
Other	44,683	5,336	3.3%

**Table I2a: Numbers in Each Cell for High Level Tables: Carriers**

Variable	Number of Claims Reviewed	Number of Claims Questioned	Percent of Claims Non-response
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**Table I2b: Numbers in Each Cell for High Level Tables: DMERCs**

Variable	Number of Claims Reviewed	Number of Claims Questioned	Percent of Claims Non-response
<b>ALL DMERCs</b>	13,338	1,157	2.4%
<b>Hcpcs procedure code</b>			
Blood glucose/reagent strips (A4253)	1,222	248	3.0%
Lancets per box (A4259)	644	114	3.0%
Hosp bed semi-electr w/ matt (E0260)	311	15	2.3%
Portable gaseous O2 (E0431)	969	35	1.1%
Nebulizer with compression (E0570)	657	49	2.3%
Dispensing fee dme neb drug (E0590)	583	24	0.9%
Oxygen concentrator (E1390)	1,323	51	1.3%
Albuterol inh sol u d (J7619)	558	58	3.2%
Ipratropium brom inh sol u d (J7644)	407	40	1.7%
Standard wheelchair (K0001)	349	14	1.7%
Other	6,315	509	2.8%
<b>DME Code</b>			
CPAP	400	33	1.8%
Enteral Nutrition	519	53	3.9%
Glucose Monitor	2,333	403	2.7%
Hospital Beds/Accessories	437	21	2.3%
Lenses	476	25	1.9%
Nebulizers	2,628	216	2.3%
Ostomy Supplies	433	71	3.2%
Oxygen Supplies/Equipment	2,540	98	1.1%
Urological Supplies	259	26	5.8%
Wheelchairs	1,237	60	2.4%
Other	2,076	151	2.9%
<b>Resolution Type</b>			
Automated	2,027	31	0.8%
Complex	29	0	0.0%
None	10,428	1,114	2.8%
Routine	854	12	1.1%
<b>Diagnosis Code</b>			
Diseases of other endocrine glands (25)	2,586	423	2.7%
Other disorders of the central nervous system (34)	193	5	1.0%
Other forms of heart disease (42)	538	22	0.9%
Cerebrovascular disease (43)	407	31	4.9%
Chronic obstructive pulmonary disease and allied conditions (49)	4,454	286	1.9%
Other diseases of skin and subcutaneous tissue (70)	197	20	4.1%
Arthropathies and related disorders (71)	547	23	1.6%

**Table I2a: Numbers in Each Cell for High Level Tables: Carriers**

Variable	Number of Claims Reviewed	Number of Claims Questioned	Percent of Claims Non-response
Dorsopathies, Rheumatism, excluding the back (72)	189	14	2.6%
Symptoms (78)	1,054	93	3.3%
Persons with a condition influencing their health status (V4)	992	107	2.2%
Other	2,181	133	2.4%

**Table I2c: Numbers in Each Cell for High Level Tables: FIs**

Variable	Number of Claims Reviewed	Number of Claims Questioned	Percent of Claims Non-response
All FIs	60,291	8,687	6.5%
Hcpcs procedure code <sup>11</sup>			
Chest x-ray (71020)	990	80	4.2%
Mammogram, screening (76092)	1166	53	2.8%
Basic metabolic panel (80048)	1281	230	9.5%
Comprehen metabolic panel (80053)	1588	332	11.1%
Prothrombin time (85610)	1410	192	9.1%
Therapeutic exercises (97110)	999	275	5.3%
Office/outpatient visit, est (99212)	1688	154	6.6%
Office/outpatient visit, est (99213)	1840	214	9.0%
Drawing blood for specimen (G0001)	11080	1656	7.7%
Unknown	11969	1617	5.5%
Other	26280	3884	6.0%
TOB Code			
Hospital-outpatient (HHA-A also) (13)	31654	5016	7.2%
Hospital-other (Part B) (14)	13845	1814	8.2%
SNF-inpatient (including Part A) (21)	1374	399	2.5%
SNF-inpatient or home health visits (Part B only) (22)	965	222	4.1%
HHA-inpatient or home health visits (Part B only) (32)	765	80	5.0%
Clinic-rural health (71)	2943	123	2.5%
Clinic-hospital based or independent renal dialysis facility (72)	1227	223	2.4%
Clinic-ORF only (eff 4/97); ORF and CMHC (10/91 - 3/97) (74)	858	142	5.2%
Special facility or ASC surgery-hospice (non-hospital based) (81)	657	58	1.8%
Special facility or ASC surgery-rural primary care hospital (85)	3425	335	3.5%
Other	2578	275	4.7%
Resolution Type			
Automated	3436	4	0.0%
Complex	197	1	0.5%
None	56589	8681	6.9%
Routine	62	0	0.0%

<sup>11</sup> "HCPCS codes and Resolution Type counts are based on one line of claim which may not reflect other lines on the same claim."

**Table I2a: Numbers in Each Cell for High Level Tables: Carriers**

Variable	Number of Claims Reviewed	Number of Claims Questioned	Percent of Claims Non-response
<b>Diagnosis Code</b>			
Diseases of other endocrine glands (25)	2817	441	6.7%
Other metabolic disorders and immunity disorders (27)	2135	323	8.3%
Hypertensive disease (40)	2494	374	9.0%
Other forms of heart disease (42)	3204	428	7.0%
Other diseases of urinary system (59)	1748	252	7.2%
Arthropathies and related disorders (71)	2278	396	6.9%
Dorsopathies, Rheumatism, excluding the back (72)	3145	411	5.2%
Symptoms (78)	6678	903	6.0%
Persons encountering health services for specific procedures and aftercare (V5)	3795	592	6.7%
Persons without reported diagnosis encountered during examination and investigation of individuals and populations (V7)	2906	299	4.6%
Other	29091	4268	6.4%

Table I3 indicates types of claims this report included or excluded from each error rate.

**Table I3: What is Included and Excluded in the Sample**

TABLE I3: WHAT IS INCLUDED AND EXCLUDED IN THE SAMPLE								
ERROR RATE	Paid Line Items	Unpaid Line Items	Denied For Non-Medical Reasons	Automated Medical Review Denials	No Resolution	RTP	Late resolution	Inpt, RAPS, Tech Errors
Paid Claim	Include	Include	Include	Include	Exclude	Exclude	Exclude	Exclude
Processing	Include	Include	Include	Include	Include	Exclude	Include	Exclude
Provider	Include	Include	Include	Include	Exclude	Exclude	Exclude	Exclude

The dollars in error for the paid claims error rate is based on the final allowed charges, and the dollars in error for the provider compliance error rate is based on initial allowed charge. There error rate for the processing error rate is based on number of claims (for FIs) or number of lines (for carriers and DMERCs) processed in error.

**Table I4 indicates the number of claims for this report that CMS included or excluded from each error rate.**

**Table I4a: Frequency of Claims November 2004 Improper Medicare Fee-for-Service Payments Report Includes or Excludes from Each Error Rate: Carriers**

Error Type	Included	Dropped	Total
<b>Paid</b>	49044	2808	51852
<b>Processing</b>	49521	2331	51852
<b>Provider Compliance</b>	49044	2808	51852

Table I4b: Frequency of Claims November 2004 Improper Medicare Fee-for-Service Payments  
Report Includes or Excludes from Each Error Rate: DMERCs

Error Type	Included	Dropped	Total
<b>Paid</b>	7647	622	8269
<b>Processing</b>	7924	345	8269
<b>Provider Compliance</b>	7647	622	8269

Table I4c: Frequency of Claims November 2004 Improper Medicare Fee-for-Service Payments  
Report Includes or Excludes from Each Error Rate: FIs

Error Type	Included	Dropped	Total
<b>Paid</b>	60291	1,943	62,234
<b>Processing</b>	N/A	N/A	N/A
<b>Provider Compliance</b>	N/A	N/A	N/A