



DEPARTMENT OF HEALTH & HUMAN SERVICES

Office of Inspector General
Office of Audit Services

Region VII
601 East 12th Street
Room 284A
Kansas City, Missouri 64106

CIN A-07-01-02092
May 29, 2001

Mr. John Mitchell
Vice President for Government Operations
Regence Blue Cross Blue Shield of Utah
2890 E. Cottonwood Parkway
P.O. Box 30270
Salt Lake City, Utah 84130-0270

Dear Mr. Mitchell:

Enclosed for your information are two copies of an audit report (CIN A-07-01-02092) prepared by Conrad and Associates, L.L.P. on behalf of the Department of Health and Human Services (HHS), Office of Inspector General (OIG), Office of Audit Services (OAS). The OAS exercised technical oversight and quality control on the examination.

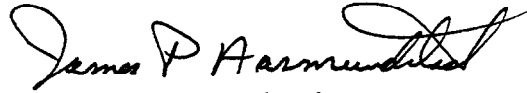
The report covers the audit of administrative costs claimed by Regence Blue Cross Blue Shield of Utah for Part A and Part B of the Medicare Program for the Period October 1, 1997 through September 30, 1999. For the period audited, Regence Blue Cross Blue Shield of Utah claimed administrative costs of \$4,915,861 for Part A and \$9,339,688 for Part B. There were no findings or recommendations as a result of the audit.

Final determinations as to actions to be taken on all matters reported will be made by the HHS action official named. In accordance with the principles of the Freedom of Information Act (Public Law 90-23), OIG, OAS reports issued to the Department's grantees and contractors are made available, if requested, to members of the press and general public to the extent information contained therein is not subject to exemptions in the Act, which the Department chooses to exercise. (See 45 Code of Federal Regulations, Part 5).

Mr. Mitchell - Page 2

To facilitate identification, please refer to the above Common Identification Number (CIN) in all correspondence relating to this report.

Sincerely,

A handwritten signature in black ink, appearing to read "James P. Aasmundstad". The signature is fluid and cursive, with a large initial "J" and a long, sweeping underline.

James P. Aasmundstad
Regional Inspector General
for Audit Services

Enclosure

HHS Action Official:

Mr. Alex Trujillo
Regional Administrator
Health Care Financing Administration
1600 Broadway, Suite 700
Denver, Colorado 80202

REGENCE BLUE CROSS BLUE SHIELD
OF UTAH

Audit of Medicare Final
Administrative Cost Proposals

For the Period
October 1, 1997 through September 30, 1999

CONRAD AND
ASSOCIATES, L.L.P.

CERTIFIED PUBLIC ACCOUNTANTS

REGENCE BLUE CROSS BLUE SHIELD
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Audit of Medicare Final
Administrative Cost Proposals

For the Period
October 1, 1997 through September 30, 1999

CONRAD AND ASSOCIATES, L.L.P.
1100 Main Street, Suite C
Irvine, California 92614

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Audit of Medicare Final
Administrative Cost Proposals

For the Period
October 1, 1997 through September 30, 1999

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Audit of Medicare Final
Administrative Cost Proposals

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October 1, 1997 through September 30, 1999

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EXECUTIVE SUMMARY

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Audit of Medicare Final
Administrative Cost Proposals

For the Period
October 1, 1997 through September 30, 1999

Executive Summary

Conrad and Associates, L.L.P., Certified Public Accountants, under contract with the U.S. Department of Health and Human Services (DHHS), performed a financial and compliance audit of expenditures claimed by Regence Blue Cross Blue Shield of Utah (BCBS) related to administration of the Medicare Part A and Part B programs. The audit covered Final Administrative Cost Proposals (FACP's) for the Medicare program submitted by BCBS for the period of October 1, 1997 through September 30, 1999.

Results of Audit

For the period under audit, BCBS reported Medicare Part A program administrative costs of \$4,915,861 and Medicare Part B program administrative costs of \$9,339,688. Total costs incurred by BCBS for Medicare Part A and Part B were more than total costs reported because BCBS reported costs only up to the amount that was included in the Approved Notice of Budget Authorization (NOBA) for the Medicare program. For the period under audit, BCBS incurred Medicare Part A program administrative costs of \$6,607,933 and Medicare Part B program administrative costs of \$15,251,672. We have not questioned any reported costs, and have expressed an unqualified opinion on the FACP's.

We evaluated BCBS's system of significant internal accounting and administrative controls, and compliance with laws and regulations that can materially affect BCBS's financial statements. Based on our evaluation, we believe control procedures were adequate for the Department of Health and Human Services' (HHS) purposes, and that BCBS complied with the terms and provisions of laws and regulations for the transactions tested. In addition, we believe that BCBS has established effective systems of internal control, accounting, and reporting for administrative costs claimed for reimbursement under the Medicare program.

A draft copy of the report was provided to BCBS. Inasmuch as there were no findings identified in this report, BCBS was not required to formally provide a response to the draft report.

* * * * *

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Audit of Medicare Final
Administrative Cost Proposals

For the Period
October 1, 1997 through September 30, 1999

Executive Summary, (Continued)

CONTRACT DISCLOSURE STATEMENT

This report is made pursuant to Contract HHS-100-95-0023 with Conrad and Associates, L.L.P., Certified Public Accountants, 1100 Main Street, Suite C, Irvine, California 92614. Certain information contained herein is subject to disclosure under the Freedom of Information Act, 5 U.S.C. 522(b)(4).

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Audit of Medicare Final
Administrative Cost Proposals

For the Period
October 1, 1997 through September 30, 1999

Acronyms

BCBS	Regence Blue Cross Blue Shield of Utah
DHHS	U.S. Department of Health and Human Services
FACP	Final Administrative Cost Proposal
FAR	Federal Acquisition Regulation
FY	Fiscal Year
HCFA	Health Care Financing Administration
NOBA	Notice of Budget Authorization
OIG	Office of Inspector General, U.S. Department of Health and Human Services

INTRODUCTION AND BACKGROUND

REGENCE BLUE CROSS BLUE SHIELD
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Audit of Medicare Final Administrative Cost Proposals

For the Period
October 1, 1997 through September 30, 1999

Introduction and Background

Health Insurance for the Aged and Disabled (Medicare), Title XVIII of the Social Security Act, provides for a hospital insurance program (Part A) and a related supplementary medical insurance program (Part B).

The Health Care Financing Administration (HCFA), within the U.S. Department of Health and Human Services (DHHS), administers the Medicare program. Title XVIII provides, however, that public or private organizations (known as "intermediaries" for Medicare Part A and "carriers" for Medicare Part B) may assist in the program's administration.

Agreements with the intermediaries and carriers define the functions to be performed and provide for the reimbursement of allowable administrative costs incurred in their performance. Each participating intermediary and carrier (contractor) submits a prospective budget of administrative costs to be incurred during the Government fiscal year to the HCFA Regional Office for review and approval. Following the close of each fiscal year, a final administrative cost proposal (FACP) is submitted, reporting the costs of performing Medicare functions incurred during the year. This cost proposal and supporting data serve as the basis for final settlement of allowable administrative costs.

After audit of the cost proposals, the contractor and HCFA negotiate a final settlement.

BCBS was paid its costs for administration of the Medicare contracts under the principle of neither profit nor loss. Appendix B of the contracts and referenced federal regulations identified allowable administrative costs that could be reimbursed. Included in the administrative costs claimed for reimbursement are costs for general and administrative expenses attributable to the general management, supervision, and conduct of a contractor's business as a whole.

The Medicare Agreement states "...costs allowable and allocable under this agreement shall be determined in accordance with the provisions of Part 31 of the Federal Acquisition Regulation (FAR), as interpreted and modified by Appendix B of the agreement."

Section 31.201 of the FAR defines the total cost of a contract as the sum of the allowable direct and indirect costs allocable to a contract, incurred or to be incurred, less any applicable credits. The regulations also state that items of cost are allowable charges if they meet tests of reasonableness and allocability and if generally accepted accounting principles are followed.

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Audit of Medicare Final Administrative Cost Proposals

For the Period
October 1, 1997 through September 30, 1999

Introduction and Background, (Continued)

A reasonable cost is defined as one that would be incurred by an ordinary prudent person in the conduct of a competitive business. Further, a cost is allocable if it is assignable or chargeable to a particular cost objective in reasonable proportion to the benefits received.

This report details the results of our audit of the FACP's submitted by BCBS to HCFA for the period October 1, 1997 through September 30, 1999.

OBJECTIVES AND SCOPE OF AUDIT

REGENCE BLUE CROSS BLUE SHIELD
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Audit of Medicare Final Administrative Cost Proposals

For the Period
October 1, 1997 through September 30, 1999

Objectives and Scope of Audit

Our audit of the FACP's submitted by BCBS for the fiscal years (FYs) ended September 30, 1998 and 1999, was made in accordance with generally accepted auditing standards and the standards for financial audits contained in the *Government Auditing Standards* as revised in 1994 and issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the FACP's are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the FACP's. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall presentation of the FACP's. We believe that our audit provides a reasonable basis for our opinion.

The U.S. Department of Health and Human Services' (DHHS) Audit Guide for the Review of Administrative Costs Incurred by Medicare Intermediaries and Carriers under Title XVIII of the Social Security Act (February 1991 revision) and other appropriate guidelines and instructions were used as guides in the audit.

Our audit included such tests necessary to assure that costs charged to Medicare were allowable and allocable and were provided in an economic and efficient manner. Our audit efforts tested the allowability of those administrative costs as well as their allocability to the Medicare program using the Medicare agreements, the Federal Acquisition Regulation (FAR), and appropriate cost accounting standards and generally accepted accounting standards as guiding criteria.

The audit was performed to provide HCFA with sufficient data to close out the FACP's and determine if controls were adequate for administration of the Medicare program. The scope of the audit included costs for the year 2000 remediation, which were included in the total costs incurred.

An entrance conference was held on November 28, 2000 with BCBS in Salt Lake City, Utah. Fieldwork was performed during the period of November 28, 2000 through February 2, 2001. Our audit was conducted at BCBS's office in Salt Lake City, Utah. An exit conference was held with BCBS and HCFA representatives in Salt Lake City, Utah on February 2, 2001 to discuss the results of our audit.

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Audit of Medicare Final Administrative Cost Proposals

For the Period
October 1, 1997 through September 30, 1999

Objectives and Scope of Audit, (Continued)

Administrative costs claimed for each of the periods under audit were as follows:

	<u>Part A</u>	<u>Part B</u>
Fiscal year ended September 30, 1998	\$2,252,100	5,095,069
Fiscal year ended September 30, 1999	<u>2,680,462</u>	<u>4,244,619</u>
Total	<u>\$4,932,562</u>	<u>9,339,688</u>

The specific objectives of our audit were to:

1. Determine whether BCBS had established an effective system of internal control, accounting, and reporting for administrative costs incurred under the program.
2. Ascertain whether the FACP's present fairly the cost of program administration allowable in accordance with FAR, Title 48, Chapter 1, Part 31 as interpreted and modified by the Medicare agreements.
3. Ascertain whether BCBS has complied with contractual and administrative requirements governing specific items of cost.
4. Identify the underlying causes of significant errors or problems noted and make recommendations for improvement or adjustment of costs claimed as appropriate.

To meet the above stated objectives, our audit included a study of those internal control procedures of BCBS to the extent we considered necessary to evaluate the system and determine specific compliance therewith. In addition, we performed tests of specific costs to determine that BCBS complied with contractual and administrative requirements. All significant items noted during our audit are discussed in the Findings and Recommendations section of this report. Our Independent Auditors' Report on Medicare Final Administrative Cost Proposals and our Report on Compliance and On Internal Control Over Financial Reporting Based on an Audit of Final Administrative Cost Proposals Performed in Accordance with Government Auditing Standards are included in the Auditors' Reports section of this report.

REGENCE BLUE CROSS BLUE SHIELD
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Audit of Medicare Final Administrative Cost Proposals

For the Period
October 1, 1997 through September 30, 1999

Objectives and Scope of Audit, (Continued)

During our audit we used judgmental sampling techniques for the purpose of determining the audit sample sizes. Our samples were designed to be representative and adequate for the purpose of expressing an opinion on the FACP's and included tests of wages, non-personnel costs, cost allocation policies and procedures, as well as specific tests for unallowable costs. Findings included in this report have been based solely upon our sample results.

AUDITORS' REPORTS

U.S. Department of Health and Human Services
Health Care Financing Administration

**INDEPENDENT AUDITORS' REPORT ON
MEDICARE FINAL ADMINISTRATIVE COST PROPOSALS**

We have audited the Final Administrative Cost Proposals (FACP's) (Schedules A through D) of Regence Blue Cross Blue Shield of Utah (BCBS) for the fiscal years ended September 30, 1999 and 1998. The amounts reported in the FACP's are the responsibility of BCBS's management. Our responsibility is to express an opinion on the FACP's based on our audit.

We conducted our audit in accordance with generally accepted auditing standards and the standards applicable to financial audits contained in the *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the FACP's are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts claimed on the FACP's. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall presentation of the FACP's. We believe that our audit provides a reasonable basis for our opinion.

The accompanying schedules were prepared in accordance with the instructions of the U.S. Department of Health and Human Services and reflect only administrative costs reported for the operating of the Medicare, Part A and Part B programs. Accordingly, the accompanying schedules are not intended to present financial position or results of operations in conformity with generally accepted accounting principles.

In our opinion, the FACP's present fairly the costs of allowable program administration for the fiscal years ended September 30, 1999 and 1998 in accordance with the Federal Acquisition Regulation, Title 48, Chapter 1, Part 31, as interpreted and modified by the Medicare agreements.

This report is intended solely for the information and use of BCBS, U.S. Department of Health and Human Services, Office of Inspector General, and Health Care Financing Administration and is not intended to be and should not be used by anyone other than these specified parties.

Conrad And Associates, L.L.P.

February 2, 2001

U.S Department of Health and Human Services
Health Care Financing Administration

**REPORT ON COMPLIANCE AND ON INTERNAL CONTROL OVER
FINANCIAL REPORTING BASED ON AN AUDIT OF FINAL ADMINISTRATIVE
COST PROPOSALS PERFORMED IN ACCORDANCE WITH
GOVERNMENT AUDITING STANDARDS**

We have audited the Final Administrative Cost Proposals (FACP's) (Schedules A through D) of Regence Blue Cross Blue Shield of Utah (BCBS) for the fiscal years ended September 30, 1999 and 1998 and have issued our report thereon dated February 2, 2001. We conducted our audit in accordance with generally accepted auditing standards and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States.

Compliance

As part of obtaining reasonable assurance about whether BCBS's Final Administrative Cost Proposals are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts and grants, noncompliance with which could have a direct and material effect on the determination of FACP amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance that are required to be reported under *Government Auditing Standards*.

Internal Control Over Financial Reporting

In planning and performing our audit, we considered BCBS's internal controls over reporting of FACP's in order to determine our auditing procedures for the purpose of expressing our opinion on the FACP's and not to provide assurance on the internal control over FACP reporting. Our consideration of the internal control over FACP reporting would not necessarily disclose all matters in the internal control over FACP reporting that might be material weaknesses. A material weakness is a condition in which the design or operation of one or more of the internal control components does not reduce to a relatively low level the risk that misstatements in amounts that would be material in relation to the FACP's being audited may occur and not be detected within a timely period by employees in the normal course of performing their assigned functions. We noted no matters involving the internal control over FACP reporting and its operation that we consider to be material weaknesses.

U.S. Department of Health and Human Services
Health Care Financing Administration
Page Two

This report is intended solely for the information and use of BCBS, U.S. Department of Health and Human Services, Office of Inspector General, and the Health Care Financing Administration and is not intended to be and should not be used by anyone other than these specified parties.

Conrad And Associates, L.L.P.

February 2, 2001

FINDINGS AND RECOMMENDATIONS

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Audit of Medicare Final Administrative Cost Proposals

For the Period
October 1, 1997 through September 30, 1999

Findings and Recommendations

There were no findings and recommendations identified as a result of the application of the procedures performed under this engagement.

OTHER MATTERS

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Audit of Medicare Final Administrative Cost Proposals

For the Period
October 1, 1997 through September 30, 1999

Other Matters

1. Resolution of Prior Audit Findings

There are no prior audit findings.

2. Interim Expenditure Reports

As part of our audit, we performed a limited review to ascertain the accuracy of BCBS's Interim Expenditure Reports. Our review was limited to a review of methods and procedures followed by BCBS in developing expenditures reports.

Our tests disclosed that the methods and procedures used to report Medicare administrative costs on the Interim Expenditure Reports were adequate.

3. Data Processing Costs

BCBS did not incur any significant costs for planning, development or modification of the Medicare claims processing system during the audit period.

4. Complementary Insurance Credits

As part of our audit, we performed tests on the reported complementary insurance credits and ascertained that adequate procedures were being followed to ensure compliance with the Medicare contract.

SCHEDULES

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Schedule of Final Administrative Cost Proposals by Cost Classification - Part A

For the Period October 1, 1997 through September 30, 1998

<u>Category</u>	<u>Costs Incurred</u>	<u>Costs Submitted</u>	<u>Questioned Costs</u>
Salaries and wages	\$ 1,530,892	1,023,231	-
Fringe benefits	435,094	290,813	-
Facilities or occupancy	159,101	103,586	-
Electronic data processing equipment	533,512	347,354	-
Subcontracts	1,645	1,114	-
Outside professional services	220,835	196,408	-
Telephone and telegraph	10,261	6,681	-
Postage and express	87,561	57,008	-
Furniture and equipment (Non EDP)	82,727	53,862	-
Materials and supplies	69,607	45,319	-
Travel	89,218	58,087	-
Return on investment	129,131	84,074	-
Miscellaneous	72,507	47,207	-
Credits	(62,644)	(62,644)	-
	<u> </u>	<u> </u>	<u> </u>
Totals	<u>\$ 3,359,447</u>	<u>2,252,100</u>	<u>-</u>

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Schedule of Final Administrative Cost Proposals by Cost Classification - Part B

For the Period October 1, 1997 through September 30, 1998

<u>Category</u>	<u>Costs Incurred</u>	<u>Costs Submitted</u>	<u>Questioned Costs</u>
Salaries and wages	\$ 3,631,248	1,910,786	-
Fringe benefits	1,067,591	520,347	-
Facilities or occupancy	246,349	195,113	-
Electronic data processing equipment	1,690,246	1,338,708	-
Subcontracts	339,544	169,695	-
Outside professional services	148,023	117,237	-
Telephone and telegraph	169,532	134,273	-
Postage and express	613,068	485,562	-
Furniture and equipment (Non EDP)	125,446	99,356	-
Materials and supplies	160,314	126,972	-
Travel	46,625	36,928	-
Return on investment	195,717	155,011	-
Miscellaneous	247,418	195,962	-
Credits	(390,881)	(390,881)	-
	<u> </u>	<u> </u>	<u> </u>
Totals	<u>\$ 8,290,240</u>	<u>5,095,069</u>	<u>-</u>

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Schedule of Final Administrative Cost Proposals by Cost Classification - Part A

For the Period October 1, 1998 through September 30, 1999

<u>Category</u>	<u>Costs Incurred</u>	<u>Costs Submitted</u>	<u>Questioned Costs</u>
Salaries and wages	\$ 1,496,439	1,207,601	-
Fringe benefits	650,208	524,707	-
Facilities or occupancy	87,779	75,005	-
Electronic data processing equipment	179,675	153,529	-
Subcontracts	-	-	-
Outside professional services	240,629	222,314	-
Telephone and telegraph	88,709	75,800	-
Postage and express	173,035	147,855	-
Furniture and equipment (Non EDP)	119,650	102,239	-
Materials and supplies	58,829	50,269	-
Travel	72,109	61,616	-
Return on investment	116,994	99,970	-
Miscellaneous	30,809	26,326	-
Credits	(66,379)	(66,769)	-
Totals	<u>\$ 3,248,486</u>	<u>2,680,462</u>	<u>-</u>

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Schedule of Final Administrative Cost Proposals by Cost Classification - Part B

For the Period October 1, 1998 through September 30, 1999

<u>Category</u>	<u>Costs Incurred</u>	<u>Costs Submitted</u>	<u>Questioned Costs</u>
Salaries and wages	\$ 3,541,130	2,210,301	-
Fringe benefits	1,050,816	667,862	-
Facilities or occupancy	200,826	130,631	-
Electronic data processing equipment	501,266	326,059	-
Subcontracts	28,416	18,483	-
Outside professional services	330,931	215,261	-
Telephone and telegraph	234,829	152,749	-
Postage and express	736,893	479,329	-
Furniture and equipment (Non EDP)	245,365	159,603	-
Materials and supplies	208,967	135,927	-
Travel	38,633	25,130	-
Return on investment	261,329	169,987	-
Miscellaneous	82,214	53,480	-
Credits	(500,183)	(500,183)	-
Totals	\$ 6,961,432	4,244,619	-

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Final Administrative Cost Proposal - Part A

For the Period October 1, 1997 through September 30, 1998

<u>Operation</u>	<u>Budget Authorization</u>	<u>Administrative Costs Claimed</u>	<u>Variance- Favorable (Unfavorable)</u>
Bills/Claims Payment	\$ 712,787	712,787	-
Appeals/Reviews	24,216	24,216	-
Inquiries	59,989	59,989	-
Reimbursement	202,029	202,029	-
Productivity Investment	257,820	257,820	-
Credits	(62,644)	(62,644)	-
Subtotal - program management	<u>1,194,197</u>	<u>1,194,197</u>	<u>-</u>
Medical Review	127,076	127,076	-
Medicare Secondary Payer	198,715	198,715	-
Benefits Integrity	50,042	50,042	-
Provider Education and Training	2,426	2,426	-
Audit	<u>679,644</u>	<u>679,644</u>	<u>-</u>
Subtotal - medicare integrity	<u>1,057,903</u>	<u>1,057,903</u>	<u>-</u>
Totals	<u>\$ 2,252,100</u>	<u>2,252,100</u>	<u>-</u>

**REGENCE BLUE CROSS BLUE SHIELD
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Final Administrative Cost Proposal - Part B

For the Period October 1, 1997 through September 30, 1998

<u>Operation</u>	<u>Budget Authorization</u>	<u>Administrative Costs Claimed</u>	<u>Variance- Favorable (Unfavorable)</u>
Bills/Claims Payment	\$ 1,908,005	1,908,005	-
Appeals/Reviews	169,000	169,000	-
Inquiries	577,000	577,000	-
Provider Education and Training	49,300	49,300	-
Participating Physician	150,000	150,000	-
Productivity Investment	1,777,145	1,777,145	-
PM Special Projects	-	-	-
Credits	(390,881)	(390,881)	-
Subtotal - program management	<u>4,239,569</u>	<u>4,239,569</u>	<u>-</u>
Medical Review	589,900	589,900	-
Medicare Secondary Payer	198,200	198,200	-
Benefits Integrity	50,500	50,500	-
Provider Education and Training	<u>16,900</u>	<u>16,900</u>	<u>-</u>
Subtotal - medicare integrity	<u>855,500</u>	<u>855,500</u>	<u>-</u>
Totals	<u>\$ 5,095,069</u>	<u>5,095,069</u>	<u>-</u>

**REGENCE BLUE CROSS BLUE SHIELD
OF UTAH**

Final Administrative Cost Proposal - Part A

For the Period October 1, 1998 through September 30, 1999

<u>Operation</u>	<u>Budget Authorization</u>	<u>Administrative Costs Claimed</u>	<u>Variance- Favorable (Unfavorable)</u>
Bills/Claims Payment	\$ 757,100	757,180	(80)
Appeals/Reviews	34,000	31,432	2,568
Inquiries	74,600	75,902	(1,302)
Provider Education and Training	3,500	3,500	-
Reimbursement	227,000	227,000	-
Productivity Investment	584,400	584,617	(217)
Credits	<u>(65,000)</u>	<u>(66,769)</u>	<u>1,769</u>
Subtotal - program management	<u>1,615,600</u>	<u>1,612,862</u>	<u>2,738</u>
Medical Review	126,900	126,900	-
Medicare Secondary Payer	200,200	200,200	-
Benefits Integrity	44,500	44,500	-
Provider Education and Training	1,000	1,000	-
Audit	<u>695,000</u>	<u>695,000</u>	<u>-</u>
Subtotal - medicare integrity	<u>1,067,600</u>	<u>1,067,600</u>	<u>-</u>
Totals	<u>\$ 2,683,200</u>	<u>2,680,462</u>	<u>2,738</u>

**REGENCE BLUE CROSS BLUE SHIELD
OF UTAH**

Final Administrative Cost Proposal - Part B

For the Period October 1, 1998 through September 30, 1999

<u>Operation</u>	<u>Budget Authorization</u>	<u>Administrative Costs Claimed</u>	<u>Variance- Favorable (Unfavorable)</u>
Bills/Claims Payment	\$ 2,093,100	2,108,105	(15,005)
Appeals/Reviews	265,000	265,012	(12)
Inquiries	615,200	615,183	17
Provider Education and Training	52,400	52,397	3
Participating Physician	67,000	67,000	-
Productivity Investments	670,200	670,207	(7)
PM Special Projects	2,000	-	2,000
Credits	(492,400)	(500,183)	7,783
Subtotal - program management	<u>3,272,500</u>	<u>3,277,721</u>	<u>(5,221)</u>
Medical Review	601,900	601,946	(46)
Medicare Secondary Payer	250,000	250,060	(60)
Benefits Integrity	69,900	69,936	(36)
Provider Education and Training	44,900	44,956	(56)
Productivity Investments	6,000	-	6,000
Subtotal - medicare integrity	<u>972,700</u>	<u>966,898</u>	<u>5,802</u>
Totals	<u>\$ 4,245,200</u>	<u>4,244,619</u>	<u>581</u>